

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

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

C Name of organization: ASSOCIATION OF NATIONAL ADVERTISERS INC
 Doing business as:
 Number and street (or P O box if mail is not delivered to street address): 155 EAST 44TH STREET Room/suite:
 City or town, state or province, and ZIP or foreign postal code: NEW YORK, NY 10017

D Employer identification number: 13-0453230
E Telephone number: (212) 697-5950
G Gross receipts \$ 58,816,270

F Name and address of principal officer: ROBERT LIODICE, 155 EAST 44TH STREET, NEW YORK, NY 10017
H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) (6) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ HTTP://WWW.ANA.NET

K Form of organization: Corporation Trust Association Other ▶
L Year of formation: 1910 **M** State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 THE ASSOCIATION OF NATIONAL ADVERTISERS, INC (ANA) WAS ORGANIZED TO SERVE THE INTERESTS OF CORPORATIONS THAT ADVERTISE AND MARKET REGIONALLY OR NATIONALLY

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

3 Number of voting members of the governing body (Part VI, line 1a)	42
4 Number of independent voting members of the governing body (Part VI, line 1b)	41
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	177
6 Total number of volunteers (estimate if necessary)	52
7a Total unrelated business revenue from Part VIII, column (C), line 12	80,689
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	39,249,561	49,736,036
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	481,763	518,055
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	859,798	985,641
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	40,591,122	51,239,732
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	22,000	43,250
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	17,054,174	20,902,736
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	22,004,666	29,016,648
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	39,080,840	49,962,634
19 Revenue less expenses Subtract line 18 from line 12	1,510,282	1,277,098

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	22,713,945	26,397,404
21 Total liabilities (Part X, line 26)	15,732,914	20,108,710
22 Net assets or fund balances Subtract line 21 from line 20	6,981,031	6,288,694

Part II Signature Block

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

Sign Here Signature of officer: ***** Date: 2019-11-15
 CHRISTINE MANNA PRESIDENT & COO & CFO
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Preparer's signature: Date: 2019-11-15
 Check if self-employed PTIN: P00543209
 Firm's name: ▶ PKF O'CONNOR DAVIES LLP Firm's EIN: ▶ 27-1728945
 Firm's address: ▶ 665 FIFTH AVENUE Phone no: (212) 286-2600
 NEW YORK, NY 10022

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

ANA'S MISSION IS MARKETING LEADERSHIP THAT MAKES A DIFFERENCE FOR ALL MARKETERS THEIR BRANDS AND THE MARKETING INDUSTRY
 [SEE SCHEDULE O FOR CONTINUATION]

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

See Additional Data Table

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

4e Total program service expenses ▶

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political campaign activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
25b	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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		No
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? <i>If "Yes," complete Schedule L, Part III</i>		No
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)		
28a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28c	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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
35b	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V 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	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

<p>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</p>	2a	177			
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year?<i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	Yes	
<p>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)?</p>			4a		No
<p>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)</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>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?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a 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?</p>			7a		
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b		
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c		
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	7d				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h		
8 Sponsoring organizations maintaining donor advised funds.					
<p>Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8		
<p>9a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	10a				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	10b				
11 Section 501(c)(12) organizations. Enter					
<p>a Gross income from members or shareholders</p>	11a				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</p>	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year</p>	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O</p>			13a		
<p>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</p>	13b				
<p>c Enter the amount of reserves on hand</p>	13c				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments?<i>If "No," provide an explanation in Schedule O</i></p>			14b		
<p>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? If "Yes," see instructions and file Form 4720, Schedule N</p>			15	Yes	
<p>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</p>			16		No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (42); 1b Enter the number of voting members included in line 1a, above, who are independent (41); 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? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (Yes); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 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? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No)

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 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? (No); 16b 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?

Section C. Disclosure

- 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply
Own website Another's website [X] Upon request Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 records
CHRISTINE MANNA 155 EAST 44TH STREET NEW YORK, NY 10017 (212) 697-5950

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f			
	g Noncash contributions included in lines 1a - 1f \$ _____				
h Total. Add lines 1a-1f					

Program Service Revenue			Business Code			
	2a MEMBERSHIP DUES		900099	23,032,298	23,032,298	
b TRAINING & CONFERENCES		900099	10,226,906	10,146,217	80,689	
c SPONSORSHIP		900099	9,174,497	9,174,497		
d SAG/AFTRA		900099	2,699,206	2,699,206		
e ALLIANCE FOR FAMILY ENTERTAINMENT		900099	2,658,610	2,658,610		
f All other program service revenue			1,944,519	1,944,519		
g Total. Add lines 2a-2f			49,736,036			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			457,261			457,261
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			58,141			58,141
	6a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses	52,500					
	c Rental income or (loss)	52,500					
	d Net rental income or (loss)			52,500			52,500
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses	7,637,332					
	c Gain or (loss)	7,576,538					
	d Net gain or (loss)	60,794		60,794			60,794
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	Business Code						
11a EQUITY IN EARNINGS - AD ID	900099		875,000			875,000	
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			875,000				
12 Total revenue. See Instructions			51,239,732	49,655,347	80,689	1,503,696	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	43,250			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	8,921,707			
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 Other salaries and wages.	9,428,727			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	86,968			
9 Other employee benefits.	1,340,653			
10 Payroll taxes.	1,124,681			
11 Fees for services (non-employees)				
a Management.				
b Legal.	1,635,891			
c Accounting.	107,200			
d Lobbying.	527,308			
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	99,160			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	3,287,288			
12 Advertising and promotion.	680,040			
13 Office expenses.	433,926			
14 Information technology.	942,689			
15 Royalties.				
16 Occupancy.	2,992,309			
17 Travel.	835,908			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	12,051,965			
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	477,184			
23 Insurance.	110,374			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LEADERSHIP INITIATIVES	1,842,631			
b BAD DEBT	1,832,880			
c RESEARCH	390,782			
d DMA PREFERENCE SERVICE	346,320			
e All other expenses	422,793			
25 Total functional expenses. Add lines 1 through 24e.	49,962,634			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

			(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	2,219,422	1	1,994,619	
	2	Savings and temporary cash investments	6,273,007	2	6,687,277	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	2,322,238	4	3,613,690	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges	452,463	9	525,672	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	6,054,996			
	b	Less accumulated depreciation	3,892,347	1,960,597	10c	2,162,649
	11	Investments—publicly traded securities	8,750,659	11	10,352,806	
	12	Investments—other securities See Part IV, line 11	400,000	12	555,000	
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	335,559	15	505,691	
16	Total assets. Add lines 1 through 15 (must equal line 34)	22,713,945	16	26,397,404		
Liabilities	17	Accounts payable and accrued expenses	4,131,452	17	7,118,017	
	18	Grants payable		18		
	19	Deferred revenue	10,087,366	19	11,047,528	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	1,514,096	25	1,943,165	
	26	Total liabilities. Add lines 17 through 25	15,732,914	26	20,108,710	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets	3,008,387	27	2,330,430	
	28	Temporarily restricted net assets	3,972,644	28	3,958,264	
	29	Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	Retained earnings, endowment, accumulated income, or other funds		32		
33	Total net assets or fund balances	6,981,031	33	6,288,694		
34	Total liabilities and net assets/fund balances	22,713,945	34	26,397,404		

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,239,732
2	Total expenses (must equal Part IX, column (A), line 25)	2	49,962,634
3	Revenue less expenses Subtract line 2 from line 1	3	1,277,098
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,981,031
5	Net unrealized gains (losses) on investments	5	-969,123
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1,000,312
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,288,694

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 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," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 13-0453230

Name: ASSOCIATION OF NATIONAL ADVERTISERS INC

Form 990 (2018)

Form 990, Part III, Line 4a:

PROFESSIONAL DEVELOPMENT ANA HOLDS CONFERENCES/FORUMS, SCHEDULED TRAINING SESSIONS, ONSITE TRAINING SESSIONS, WEBINARS, REGIONAL MEETINGS AND HALF-DAY WORKSHOPS TO KEEP ITS MEMBERS ON THE LEADING-EDGE OF MARKETING TRENDS AND BEST PRACTICES AND TO HELP MARKETERS BUILD THEIR BRANDS ANA OFFERED COMMITTEE MEETINGS TO MEMBERS FOR SHARING BEST PRACTICES THE OPPORTUNITY FOR PEER-TO-PEER NETWORKING/BENCHMARKING, AND THE ABILITY TO LEARN ABOUT NEW INDUSTRY DEVELOPMENTS THROUGH THE EXCHANGE OF IDEAS WITH GUEST SPEAKERS AND OTHER COMMITTEE MEMBERS [SEE CONTINUATION ON SCHEDULE O]ANA PROVIDED AN ONLINE INFORMATION RESEARCH CENTER (MARKETING KNOWLEDGE CENTER) TO MEMBERS WITH BROAD BASED RESEARCH CAPABILITIES TO GET MARKETING AND ADVERTISING INFORMATION

Form 990, Part III, Line 4b:

ALLIANCE FOR INCLUSIVE & MULTICULTURAL MARKETING (AIMM) AIMM SEEKS TO BRING TOGETHER SENIOR THOUGHT LEADERS FROM THE AFRICAN-AMERICAN, HISPANIC, ASIAN, LGBTQ AND GENERAL MARKET COMMUNITIES TO CREATE A UNITED BLUEPRINT FOR THE EVOLUTION OF MULTICULTURAL AND DIVERSE-SEGMENT MARKETING IN AMERICA

Form 990, Part III, Line 4c:

GOVERNMENT RELATIONS & INDUSTRY REPRESENTATION ANA'S WASHINGTON DC OFFICE PROTECTS MEMBERS' RIGHTS TO EFFECTIVELY MARKET AND ADVERTISE PRODUCTS AND SERVICES IT SERVED AS A LEADING INDUSTRY VOICE BEFORE FEDERAL, STATE AND LOCAL GOVERNMENTS, ADDRESSED A BROAD RANGE OF ISSUES CRITICAL TO MEMBERS SUCH AS COMMERCIAL FREE SPEECH, PRIVACY AND BEHAVIORAL ADVERTISING, INTERNET CORPORATION ON ASSIGNED NAMES AND NUMBERS (ICANN), OBESITY AND STATE TAXES ON ADVERTISING ANA ALSO REPRESENTED ADVERTISERS' INTERESTS BEFORE KEY AGENCIES (FTC, FCC, FDA, ETC) IN CONGRESSIONAL COMMITTEES, THE COURTS AND INDUSTRY COUNCILS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code) (Expenses \$ including grants of \$) (Revenue \$)

AD-ID ANA AND AAAA (AMERICAN ASSOCIATION OF ADVERTISING AGENCIES) DEVELOPED AND OWNED A NEW SYSTEM THAT PROVIDED MARKETING AND ADVERTISING INDUSTRY WITH A NEW DIGITAL IDENTIFICATION STANDARD FOR THEIR ADVERTISING ASSETS AD-ID SYSTEM ENSURES THAT THE CODE IS UNIQUE AND PROVIDES A COMMON, AUTHORITATIVE SOURCE FOR ALL FORMS OF MEDIA

(Code) (Expenses \$ including grants of \$) (Revenue \$)

ANA ALLIANCE FOR FAMILY ENTERTAINMENT IN 2016, THE AFE, THROUGH RESEARCH AND IDENTIFYING THE GAPS IN FAMILY PROGRAMMING AND CONTENT, INITIATED THE #SEEHER MOVEMENT ITS MISSION IS TO INCREASE THE PERCENTAGE OF ACCURATE PORTRAYALS OF WOMEN AND GIRLS IN U S ADVERTISING AND MEDIA BY 20% BY 2020, THE 100TH ANNIVERSARY OF WOMEN WINNING THE RIGHT TO VOTE THIS RELATES TO HIGH QUALITY CONTENT THAT THE ENTIRE FAMILY CAN ENJOY ON MULTIPLE DISTRIBUTION PLATFORMS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code) (Expenses \$ including grants of \$) (Revenue \$)

SAG/AFTRA ANA, THROUGH ITS JOINT POLICY COMMITTEE, NEGOTIATES THE ADVERTISING INDUSTRY'S THREE YEAR CONTRACT WITH THE COMMERCIAL TALENT UNIONS' SCREEN ACTOR'S GUILD (SAG) AND AMERICAN FEDERATION OF TELEVISION AND RADIO ARTISTS (AFTRA) AND ALSO SEARCHES FOR A NEW COMPENSATION MODEL THE NEXT NEGOTIATION WILL COMMENCE IN 2019

(Code) (Expenses \$ including grants of \$) (Revenue \$)

DMA PREFERENCE SERVICES DMACHoice IS AN ONLINE TOOL DEVELOPED TO HELP CONSUMERS MANAGE THEIR MAIL PREFERENCES IT IS PART OF A LARGER PROGRAM DESIGNED TO RESPOND TO CONSUMERS' CONCERN ABOUT THE AMOUNT OF UNWANTED MAIL THEY RECEIVE, AN INDUSTRY SELF-REGULATORY PROGRAM IN PLACE SINCE 1971 COMPANIES AND ORGANIZATIONS ARE ASKED TO FOLLOW CONSUMER REQUESTS TO BE OPTED OUT OF FUTURE MAIL THROUGH THIS MAIL PREFERENCE PROGRAM IT IS OFFERED TO COMPANIES TO ENSURE CONSUMER CHOICES ARE HONORED AND SO THAT BUSINESSES KNOW WHICH CONSUMERS NO LONGER WISH TO RECEIVE MARKETING MAIL MEMBERS AND NONMEMBER UTILIZE THE SERVICE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARC PRITCHARD CHAIR	4 00	X		X				0	0	0
DEBORAH WAHL VICE CHAIR THRU FEB 2018	4 00	X		X				0	0	0
PAUL ALEXANDER TREASURER	4 00	X		X				0	0	0
ROBERT D LIODICE CEO & DIRECTOR	35 00	X		X			1,105,574	0	48,778	
FRANCES ALLEN DIRECTOR THRU FEB 2018	1 00	X						0	0	0
MARYAM BANIKARIM DIRECTOR THRU FEB 2018	2 00	X						0	0	0
DOUWE BERGSMA DIRECTOR	2 00	X						0	0	0
LYNNE BIGGAR DIRECTOR	2 00	X						0	0	0
LINDA BOFF DIRECTOR	2 00	X						0	0	0
CHRIS BRANDT DIRECTOR	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
AMANDA BRINKMAN DIRECTOR	2 00	X						0	0	0
EMILY CALLAHAN DIRECTOR	2 00	X						0	0	0
FIONA CARTER DIRECTOR	2 00	X						0	0	0
SUZY DEERING DIRECTOR	2 00	X						0	0	0
NORMAN DE GREVE DIRECTOR	2 00	X						0	0	0
JOHN DILLON DIRECTOR	2 00	X						0	0	0
PAM EL DIRECTOR	2 00	X						0	0	0
DEANIE ELSNER DIRECTOR	2 00	X						0	0	0
ALICIA ENCISO DIRECTOR	2 00	X						0	0	0
J RUSSELL FINDLAY DIRECTOR	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MORGAN FLATLEY DIRECTOR	2 00	X						0	0	0
RICK GOMEZ DIRECTOR	2 00	X						0	0	0
ANDREW FRICK DIRECTOR THRU OCT 2018	2 00	X						0	0	0
JON IWATA DIRECTOR THRU FEB 2018	2 00	X						0	0	0
GERALD E JOHNSON II DIRECTOR	2 00	X						0	0	0
DENISE KARKOS DIRECTOR	2 00	X						0	0	0
KEIRA KRAUSZ DIRECTOR	2 00	X						0	0	0
WES LAIRD DIRECTOR	2 00	X						0	0	0
JOHN KENNEDY JR DIRECTOR THRU OCT 2018	2 00	X						0	0	0
RICH LEHRFELD DIRECTOR THRU FEB 2018	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KRISTIN LEMKAU DIRECTOR	2 00	X						0	0	0
ALISON LEWIS DIRECTOR	2 00	X						0	0	0
ANTONIO LUCIO DIRECTOR THRU OCT 2018	2 00	X						0	0	0
MARCEL MARCONDES DIRECTOR	2 00	X						0	0	0
ROB MASTER DIRECTOR	2 00	X						0	0	0
NADINE MCHUGH DIRECTOR	2 00	X						0	0	0
BRIAN OWENS DIRECTOR THRU MAY 2018	2 00	X						0	0	0
MICHELLE PELUSO DIRECTOR	2 00	X						0	0	0
SUSAN POPPER DIRECTOR THRU MAY 2018	2 00	X						0	0	0
RAJA RAJAMANNAR DIRECTOR	1 00 2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC REYNOLDS DIRECTOR	2 00	X						0	0	0
TONY ROGERS DIRECTOR	2 00	X						0	0	0
ELIZABETH RUTLEDGE DIRECTOR	2 00	X						0	0	0
DIEGO SCOTTI DIRECTOR	2 00	X						0	0	0
HEATHER STEWART DIRECTOR	2 00	X						0	0	0
NUNO TELES DIRECTOR	2 00	X						0	0	0
LILIAN TOMOVICH DIRECTOR	2 00	X						0	0	0
JIM TREBILCOCK DIRECTOR THRU OCT 2018	2 00	X						0	0	0
MATT VANDYKE DIRECTOR	2 00	X						0	0	0
MEREDITH VERDONE DIRECTOR	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KAREN WALKER DIRECTOR	2 00	X						0	0	0
EUGENE WILLEMSSEN DIRECTOR	2 00	X						0	0	0
JOCELYN WONG DIRECTOR	2 00	X						0	0	0
CHRISTINE MANNA SECRETARY & PRESIDENT & COO	35 00			X				538,749	0	32,785
KENNETH BEAULIEU SENIOR VICE PRESIDENT	35 00			X				166,720	0	42,091
THOMAS BENTON GROUP EXECUTIVE VICE PRESIDENT	35 00			X				186,189	0	17,924
EDWARD BERG VICE PRESIDENT	35 00			X				144,565	0	48,146
XENIA BOONE SENIOR VICE PRESIDENT	35 00			X				100,343	0	2,887
SHEPARD BRYANT-KRAMER SENIOR VICE PRESIDENT	35 00			X				152,233	0	42,452
CHRISTINA CURRY VICE PRESIDENT	35 00			X				161,069	0	20,266

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BRIAN DAVIDSON SENIOR VICE PRESIDENT	35 00			X				157,505	0	30,334
KRISTINA DESROSIERS VICE PRESIDENT	35 00			X				181,900	0	3,342
WILLIAM DUGGAN GROUP EXECUTIVE VICE PRESIDENT	35 00			X				402,812	0	49,658
LOUIS FANELLI EXECUTIVE VICE PRESIDENT	35 00			X				323,596	0	30,493
EVE FROUXIDES VICE PRESIDENT	35 00			X				130,627	0	16,098
MARK GALLIHER VICE PRESIDENT	35 00			X				131,564	0	14,987
MARNI GORDON SENIOR VICE PRESIDENT	35 00			X				186,830	0	3,010
LISA GUHANICK VICE PRESIDENT	35 00			X				161,339	0	31,723
KATHLEEN HUNTER EXECUTIVE VICE PRESIDENT	35 00			X				240,781	0	16,624
DANIEL JAFFE GROUP EXECUTIVE VICE PRESIDENT	35 00			X				545,110	0	36,747

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
EDWARD KABAK SENIOR VICE PRESIDENT	35 00			X				235,966	0	7,603
MICHAEL KAUFMAN SENIOR VICE PRESIDENT	35 00			X				185,579	0	31,562
ANDREA KISLAN SENIOR VICE PRESIDENT	35 00			X				208,675	0	19,371
MARK J LIEBERT VICE PRESIDENT	35 00			X				135,204	0	44,257
BARBARA MARKFIELD VICE PRESIDENT	35 00			X				135,023	0	19,935
LANA MAVRESHKO VICE PRESIDENT	35 00			X				161,266	0	42,483
KRISTEN MCDONOUGH SENIOR VICE PRESIDENT	35 00			X				180,080	0	50,047
CHRISTOPHER OSWALD SENIOR VICE PRESIDENT	35 00			X				109,218	0	9,045
TRACEY OWENS SENIOR VICE PRESIDENT	35 00			X				169,838	0	23,344
LAN PHAN SENIOR VICE PRESIDENT	35 00			X				141,735	0	39,051

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
NICHOLAS PRIMOLA SENIOR VICE PRESIDENT	35 00			X				206,666	0	43,570
ROBERT ROTHE GROUP EXECUTIVE VICE PRESIDENT	35 00			X				361,760	0	47,396
KEITH SCARBOROUGH SENIOR VICE PRESIDENT	35 00			X				199,407	0	19,881
BILL TUCKER EXECUTIVE VICE PRESIDENT	35 00			X				364,775	0	47,097
WILLIAM C ZENGEL VICE PRESIDENT	35 00			X				159,946	0	16,077
KIMBERLY STEVENS DIRECTOR	35 00					X		191,150	0	27,276
MEITAL R ROFE SALERNO DIRECTOR	35 00					X		179,370	0	17,613
JOHN R CAMPBELL SENIOR DIRECTOR	35 00					X		143,859	0	3,941
ROBERT MAROLD SENIOR DIRECTOR	35 00					X		143,822	0	28,218
DONNA L MADDUX DIRECTOR	35 00					X		130,781	0	25,518

SCHEDULE C
 (Form 990 or 990-EZ)
 Department of the Treasury
 Internal Revenue Service

Political Campaign and Lobbying Activities
 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.

OMB No 1545-0047
2018
Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
 ● Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
 ● Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
 ● Section 527 organizations Complete Part I-A only
If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
 ● Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
 ● Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
 ● Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization ASSOCIATION OF NATIONAL ADVERTISERS INC	Employer identification number 13-0453230
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

	(a) Filing organization's totals	(b) Affiliated group totals
--	----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
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 Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
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).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	Yes

Part III-B 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 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	23,032,298
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	2a	1,769,646
b Carryover from last year	2b	636,789
c Total	2c	2,406,435
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	2,303,230
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?	4	103,205
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

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 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number
13-0453230

Part I 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)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 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 conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 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 Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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

b If the organization elected, as permitted under SFAS 116 (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

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 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 SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|-----|----|
| (i) unrelated organizations | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		2,472,179	1,547,327	924,852
d Equipment		3,582,817	2,345,020	1,237,797
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				2,162,649

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
RENT PAYABLE	1,943,165
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	1,943,165

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	49,208,839
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-969,123	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	-962,610	
e	Add lines 2a through 2d		2e	-1,931,733
3	Subtract line 2e from line 1		3	51,140,572
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	99,160	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	99,160
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	51,239,732

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	52,148,634
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d	2,285,160	
e	Add lines 2a through 2d		2e	2,285,160
3	Subtract line 2e from line 1		3	49,863,474
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	99,160	
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	99,160
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	49,962,634

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 13-0453230

Name: ASSOCIATION OF NATIONAL ADVERTISERS INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE ORGANIZATION FOLLOWS THE US GAAP ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME TAXES, WHICH PROVIDES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN USING THIS GUIDANCE, AN ENTITY MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION IN ITS FINANCIAL STATEMENTS ONLY IF IT IS MORE LIKELY-THAN-NOT (I E A LIKELIHOOD OF MORE THAN 50%) THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION MANAGEMENT HAS EVALUATED THE ORGANIZATION'S TAX POSITIONS AND BELIEVES THERE ARE NO UNCERTAIN POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS AS OF DECEMBER 31, 2018 AND 2017 THE ORGANIZATION'S TAX RETURNS FOR ALL YEARS SINCE 2015 REMAIN OPEN TO EXAMINATION BY THE RESPECTIVE TAXING AUTHORITIES THERE ARE CURRENTLY NO TAX EXAMINATIONS IN PROGRESS

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	REVENUE ATTRIBUTED TO RELATED ORGANIZATION-AEF -962,610

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES ATTRIBUTED TO RELATED ORGANIZATION-AEF 2,058,532 PENSION RELATED LOSS OTHER THAN PENSION BENEFIT 226,628

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number

13-0453230

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EUROPE	0	0	PROGRAM SERVICES	MEMBERSHIP DUES-ADVERTISING INDUSTRY PROGRAMS AND INITIATIVES	40,000
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			40,000
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	0			40,000

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	EXPENDITURES WERE ACCOUNTED FOR USING THE ACCRUAL METHOD

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

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Name of the organization
ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number
13-0453230

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PARTNERSHIP FOR DRUG-FREE KIDS 352 PARK AVENUE SOUTH 9TH FLOOR NEW YORK, NY 10010	13-3413627	501(C)3	6,250				ADVERTISING INDUSTRY PROGRAM AND INITIATIVES
(2) THE ADVERTISING COUNCIL INC 815 2ND AVE 9 FL NEW YORK, NY 10017	13-0417693	501(C)3	37,000				ADVERTISING INDUSTRY PROGRAM AND INITIATIVES

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 2

3 Enter total number of other organizations listed in the line 1 table 0

Part III 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

(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)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE ORGANIZATION REQUIRES GRANT RECIPIENTS TO ADHERE TO REPORTING REQUIREMENTS AS OUTLINED IN THE INDIVIDUAL GRANT AGREEMENTS BETWEEN THE ORGANIZATION AND EACH RECIPIENT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number
13-0453230

Part I Questions Regarding Compensation

	Yes	No		
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b			
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2			
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No		
	4b	No		
	4c	No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a			
	5b			
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a			
	6b			
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7			
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8			
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9			

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Additional Data

Software ID:
Software Version:
EIN: 13-0453230
Name: ASSOCIATION OF NATIONAL ADVERTISERS INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROBERT D LIODICE CEO & DIRECTOR	(i)	626,510	475,500	3,564	4,500	44,278	1,154,352	0
	(ii)	0	0	0	0	0	0	0
CHRISTINE MANNA SECRETARY & PRESIDENT & COO	(i)	434,707	102,800	1,242	4,501	28,284	571,534	0
	(ii)	0	0	0	0	0	0	0
KENNETH BEAULIEU SENIOR VICE PRESIDENT	(i)	148,606	15,924	2,190	2,963	39,128	208,811	0
	(ii)	0	0	0	0	0	0	0
THOMAS BENTON GROUP EXECUTIVE VICE PRESIDENT	(i)	184,818	0	1,371	0	17,924	204,113	0
	(ii)	0	0	0	0	0	0	0
EDWARD BERG VICE PRESIDENT	(i)	135,077	7,550	1,938	1,771	46,375	192,711	0
	(ii)	0	0	0	0	0	0	0
SHEPARD BRYANT-KRAMER SENIOR VICE PRESIDENT	(i)	144,130	6,958	1,145	0	42,452	194,685	0
	(ii)	0	0	0	0	0	0	0
CHRISTINA CURRY VICE PRESIDENT	(i)	151,937	8,600	532	2,503	17,763	181,335	0
	(ii)	0	0	0	0	0	0	0
BRIAN DAVIDSON SENIOR VICE PRESIDENT	(i)	148,226	8,500	779	3,015	27,319	187,839	0
	(ii)	0	0	0	0	0	0	0
KRISTINA DESROSIER VICE PRESIDENT	(i)	167,808	13,300	792	3,150	192	185,242	0
	(ii)	0	0	0	0	0	0	0
WILLIAM DUGGAN GROUP EXECUTIVE VICE PRESIDENT	(i)	331,048	68,200	3,564	4,500	45,158	452,470	0
	(ii)	0	0	0	0	0	0	0
LOUIS FANELLI EXECUTIVE VICE PRESIDENT	(i)	274,532	45,500	3,564	4,500	25,993	354,089	0
	(ii)	0	0	0	0	0	0	0
MARNI GORDON SENIOR VICE PRESIDENT	(i)	172,000	14,020	810	3,010	0	189,840	0
	(ii)	0	0	0	0	0	0	0
LISA GUHANICK VICE PRESIDENT	(i)	146,588	12,628	2,123	2,884	28,839	193,062	0
	(ii)	0	0	0	0	0	0	0
KATHLEEN HUNTER EXECUTIVE VICE PRESIDENT	(i)	210,399	28,060	2,322	4,012	12,612	257,405	0
	(ii)	0	0	0	0	0	0	0
DANIEL JAFFE GROUP EXECUTIVE VICE PRESIDENT	(i)	446,666	93,500	4,944	4,500	32,247	581,857	0
	(ii)	0	0	0	0	0	0	0
EDWARD KABAK SENIOR VICE PRESIDENT	(i)	213,383	17,639	4,944	2,973	4,630	243,569	0
	(ii)	0	0	0	0	0	0	0
MICHAEL KAUFMAN SENIOR VICE PRESIDENT	(i)	165,909	16,106	3,564	2,914	28,648	217,141	0
	(ii)	0	0	0	0	0	0	0
ANDREA KISLAN SENIOR VICE PRESIDENT	(i)	187,331	17,780	3,564	1,942	17,429	228,046	0
	(ii)	0	0	0	0	0	0	0
MARK J LIEBERT VICE PRESIDENT	(i)	123,001	11,212	991	2,554	41,703	179,461	0
	(ii)	0	0	0	0	0	0	0
BARBARA MARKFIELD VICE PRESIDENT	(i)	125,378	8,690	955	1,679	18,256	154,958	0
	(ii)	0	0	0	0	0	0	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
LANA MAVRESHKO VICE PRESIDENT	(i)	147,650	11,400	2,216	798	41,685	203,749	0
	(ii)	0	0	0	0	0	0	0
KRISTEN MCDONOUGH SENIOR VICE PRESIDENT	(i)	165,504	14,036	540	2,392	47,655	230,127	0
	(ii)	0	0	0	0	0	0	0
TRACEY OWENS SENIOR VICE PRESIDENT	(i)	144,585	24,148	1,105	0	23,344	193,182	0
	(ii)	0	0	0	0	0	0	0
LAN PHAN SENIOR VICE PRESIDENT	(i)	135,830	5,421	484	2,710	36,341	180,786	0
	(ii)	0	0	0	0	0	0	0
NICHOLAS PRIMOLA SENIOR VICE PRESIDENT	(i)	181,306	24,550	810	3,642	39,928	250,236	0
	(ii)	0	0	0	0	0	0	0
ROBERT ROTHE GROUP EXECUTIVE VICE PRESIDENT	(i)	291,578	68,940	1,242	4,388	43,008	409,156	0
	(ii)	0	0	0	0	0	0	0
KEITH SCARBOROUGH SENIOR VICE PRESIDENT	(i)	182,917	11,786	4,704	3,600	16,281	219,288	0
	(ii)	0	0	0	0	0	0	0
BILL TUCKER EXECUTIVE VICE PRESIDENT	(i)	301,953	60,500	2,322	4,352	42,745	411,872	0
	(ii)	0	0	0	0	0	0	0
WILLIAM C ZENGEL VICE PRESIDENT	(i)	156,541	0	3,405	2,308	13,769	176,023	0
	(ii)	0	0	0	0	0	0	0
KIMBERLY STEVENS DIRECTOR	(i)	175,870	14,740	540	2,675	24,601	218,426	0
	(ii)	0	0	0	0	0	0	0
MEITAL R ROFE SALERNO DIRECTOR	(i)	99,151	79,961	258	1,856	15,757	196,983	0
	(ii)	0	0	0	0	0	0	0
ROBERT MAROLD SENIOR DIRECTOR	(i)	134,075	6,240	3,507	650	27,568	172,040	0
	(ii)	0	0	0	0	0	0	0
DONNA L MADDUX DIRECTOR	(i)	100,043	30,000	738	1,983	23,535	156,299	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Name of the organization

ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number

13-0453230

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION CONTINUED	ANA COMMANDS THE INDUSTRY AGENDA, SHAPES THE FUTURE OF MARKETING, CHAMPIONS MARKETING EXCELLENCE, ENHANCES TALENT DEVELOPMENT AND ADVANCES, PROMOTES AND PROTECTS THE INTEREST OF MARKETERS ANA FUELS SMARTER MARKETING AND DRIVES INDUSTRY CHANGE AND BUSINESS GROWTH

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	DURING CALENDAR YEAR 2018, ANA AMENDED ITS BY-LAWS AS THE FOLLOWING 1 EXPANDS MEMBERSHIP ELIGIBILITY AND PARTICIPATION INTERNATIONALLY 2 RENAMED ASSOCIATE MEMBERS TO MARKETING SOLUTION PROVIDERS MEMBERS 3 MEMBERS OF ANA'S EXECUTIVE COMMITTEE TO BE APPOINTED BY 3/4 OF THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ANA'S MEMBERS INCLUDES 1,100 COMPANIES REPRESENTING 20,000 BRANDS THAT COLLECTIVELY SPEND \$400 BILLION IN MARKETING AND MEDIA ANNUALLY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE GOVERNING BODY IS ELECTED BY MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	KEY GOVERNANCE DECISIONS ARE SUBJECT TO APPROVAL BY MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	ANA HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE INFORMATION REPORTED IS COMPLETE AND ACCURATE THE SVP, FINANCE AND PRESIDENT/COO/CFO REVIEW THE FORM 990 AFTER THE DRAFT IS PREPARED ONCE APPROVED BY MANAGEMENT, A DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE FINANCE COMMITTEE (IN LIEU OF THE FULL BOARD) ELECTRONICALLY FOR THEIR REVIEW PRIOR TO FILING WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ANA CURRENTLY HAS IN PLACE A CONFLICT OF INTEREST POLICY THAT APPLIES TO ALL DIRECTORS, OFFICERS, AND KEY PERSONS INDIVIDUALS ARE REQUIRED TO DISCLOSE ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST WITH THE GOVERNING BOARD AFTER DISCLOSURE, THE INDIVIDUAL IN QUESTION MUST RECUSE THEMSELVES FROM VOTING ON THE MATTER SUCH MATTERS INVOLVING THE EXISTENCE OF CONFLICTS OF INTEREST ARE TO BE DOCUMENTED IN THE MINUTES OF THE GOVERNING BOARD ON AN ANNUAL BASIS, EACH INDIVIDUAL IS REQUIRED TO SIGN A STATEMENT WHICH AFFIRMS THAT THEY RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION OF THE ORGANIZATION'S OFFICERS WAS DETERMINED BY THE BOARD OF DIRECTORS USING COMPENSATION DATA FROM SIMILARLY SITUATED NON-PROFIT ORGANIZATIONS CONTEMPORANEOUS DOCUMENTATION WITH RESPECT TO THE DELIBERATION AND VOTE IS RETAINED IN THE MINUTES OF THE GOVERNING BOARD THIS PROCESS WAS LAST UNDERTAKEN IN 2018

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	ANA'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILA BLE TO THE PUBLIC UPON REQUEST AT 155 EAST 44TH STREET, NEW YORK, NY 10017

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION RELATED CHANGES OTHER THAN PENSION BENEFIT -226,628 NET LIABILITY ASSUMED IN ACQUISITIONS -773,684

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
ASSOCIATION OF NATIONAL ADVERTISERS INC

Employer identification number
13-0453230

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ADVERTISING EDUCATIONAL FOUNDATION 155 EAST 44TH STREET NEW YORK, NY 10017 13-3228986	SUPPORT AND BRIDGE THE ADVERTISING INDUSTRY WITH THE ACADEMIC COMMUNITY	NY	501(C)3	PF	ASSOCIATION OF NATIONAL ADVERTISERS INC	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ADVERTISING EDUCATIONAL FOUNDATION	Q	103,748	COST
(2) ADVERTISING EDUCATIONAL FOUNDATION	N	140,000	COST

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation