EXTENDED TO JULY 15, 2020

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.

Intern	al Reve	■ Go to www.irs.gov/Form990 for instructions and the late	est information. I / Inspection				
A F	or th	e 2018 calendar year, or tax year beginning JUL 1, 2018 and ending	JUN 30, 2019\				
	heck if		D Employer identification number				
	Addre	SS AMEDICAN ACCION ECONO TAIC					
	Name	Doing business as	27-0567765				
\vdash	Initial	Number and street (or P.O. box if mail is not delivered to street address) Room/su					
 	_ireturn ∏F≀nal	· · ·	· ·				
L	return termir						
	ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 3,613,310.				
L	_Amen _return	WASHINGTON, DC 20000	H(a) is this a group return				
	Application	F Name and address of principal officer DOUGLAS HOLTZ-EAKIN	for subordinates? Yes X No				
	pendi	SAME AS C ABOVE	H(b) Are all subordinates included? Yes No				
	`av-av		27 If "No," attach a list. (see instructions)				
		te: NWW.AMERICANACTIONFORUM.ORG					
			H(c) Group exemption number				
			ear of formation: 2009 M State of legal domicile DE				
Ра	rt I	Summary					
	1	Briefly describe the organization's mission or most significant activities AMERICAN	ACTION FORUM IS AN				
ဦ		INDEPENDENT, NONPARTISAN POLICY RESEARCH AND	EDUCATION INSTITUTION.				
Governance	2	Check this box if the organization discontinued its operations or disposed of mo					
ē							
Š		Number of voting members of the governing body (Part VI, line 1a)					
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 9				
Se	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 45				
įį	6	Total number of volunteers (estimate if necessary)	6 12				
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.				
Ř		Net unrelated business taxable income from Form 990-T, line 38	7b 0.				
_		Not different beginning taxable mooths from 500 1, into 50	Prior Year Current Year				
		Court by the second of the sec	3,748,970. 3,508,025.				
e	8	Contributions and grants (Part VIII, line 1h)					
en	9	Program service revenue (Part VIII, line 2g)	100,655. 88,079.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	8,208. 17,206.				
E	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 0.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,857,833. 3,613,310.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0. 0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.				
		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	2,547,229. 2,581,806.				
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					
Su S	16a	Professional fundraising fees (Part IX, column (A), line 11e)	220,200. 182,900.				
Expenses	b	Total fundraising expenses (Fart IX, column (D), line 25) 218, 256.	A 186 7 C 9 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1				
ű	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f ₂ 24e)	1,175,061. 952,897.				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (AREGEIVED	3,942,490. 3,717,603.				
		Revenue less expenses Subtract line 18 from line 12	-84,657104,293.				
<u></u>	_	101					
Net Assets or		Total assets (Part X, line 16)	Beginning of Current Year End of Year 1,535,026. 1,300,371.				
SSE	20	1 1					
₹ġ	21	Total liabilities (Part X, line 26)	243,888. 113,526.				
鶗	22	Net assets or fund balances Subtract line 21 from line 20 OGDEN, UT	1,291,138. 1,186,845.				
Pa	rt II	Signature Block	·				
Unde	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules and state	ements, and to the best of my knowledge and belief, it is				
	-	t, and complete. Declaration of preparer (other than officer) is based on all information of which prepa					
1100,	00	Doualas Holtz-Cakin	July 2, 2020				
_		Signature of officer	Date				
Sigr			butt				
Here	e	DOUGLAS HOLTZ-EAKIN, PRESIDENT					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature	Date Check PTIN				
Paid		RENAE DUNCAN CHAE DIMON CAA	7/1/2020 self-employed P01257722				
Prep		Firm's name ATCHLEY & ASSOCIATES, LLP	Firm's EIN > 74-2920819				
-			THIIISLIN D / T ZJZOOLJ				
Use	only	Firm's address 1005 LA POSADA DRIVE	/F12\24C 200C				
		AUSTIN, TX 78752	Phone no. (512)346-2086				
May	the II	RS discuss this return with the preparer shown above? (see instructions)	X Yes No				

LHA For Paperwork Reduction Act Notice, see the separate instructions. 832001 12-31-18

Form 990 (2018)

	990 (2018) AMERICAN ACTION FORUM, INC.	27-0567765	Page 2
Pa	rt IIII 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		
	AAF IS DEDICATED TO BROAD, PUBLIC EDUCATION ON DOMESTIC A	AND ECONOMIC	
	ISSUES, USING MODERN COMMUNICATION TOOLS TO ENGAGE THE PU		
	PROPOSE POLICY SOLUTIONS. IT ENGAGES IN POLICY RESEARCH E		
	AND PROVIDES COMMENTARY ON DOMESTIC ECONOMIC POLICY IDEAS		
		·	
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	X 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	X 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 n	neasured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expenses, an	ıd
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 3,329,985. including grants of \$) (Revenue	es 88,0	079.)
	AAF HAS CORE AREAS OF POLICY RESEARCH IN THE FOLLOWING IS		,
	REGULATORY POLICY, IMMIGRATION, HEALTH CARE, LABOR MARKET		
	ENERGY, FISCAL POLICY, EDUCATION, FINANCIAL SERVICES, TEC		
			- I C
		ID TRADE. AAI	
	RESEARCH TEAM, SUPPORTED BY COMMUNICATIONS AND DIGITAL ST		
	DATA-DRIVEN RESEARCH AND ANALYSIS TO EDUCATE AND ENGAGE I		<u>, </u>
	THOUGHT LEADERS, ACADEMICS, MEDIA, AND THE GENERAL PUBLIC		
	VARIETY OF COMMUNICATION STRATEGIES ARE USED TO REACH THE	SE AUDIENCES	<u> </u>
	EFFECTIVELY AND IN A TIMELY WAY. AAF FOCUSES ITS RESOURCE		ON
	ECONOMIC RESEARCH AND ALSO SPONSORS SURVEY RESEARCH TO BE	TTER	
	UNDERSTAND THE PUBLIC'S VIEWS ON SPECIFIC POLICY ISSUES.	,	
•			
4b	(Code) (Expenses \$	<u> </u>	١
76	(Code / (Expended 5 / (Neventum g grants or 5 / (Neventum g g grants or 5 / (Neventum g g grants or 5 / (Neventum g g g g g g g g g g g g g g g g g g g		<i>'</i>
			
	•		
4-	/6		
4c	(Code) (Expenses \$) (Revenu	e \$,
			
			_
			1
			,
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 3,329,985.		
		Form Qf	90 (2018)

Form 990 (2018) AMERICAN ACTION FORUM, INC.

Part IV Checklist of Required Schedules

•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1		
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	_5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			٠,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	х	
	Schedule D, Parts XI and XII	12a	Δ.	_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		v
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	Did the organization maintain an office, employees, or agents outside of the United States?			X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes." complete Schedule F. Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	. 78		<u> </u>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
-	column (A), lines 6 and 11e? If "Yes." complete Schedule G. Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes." complete Schedule G. Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
		Гания	000	(2010)

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•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			١.
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
, b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ĺ '
•	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"		ſ	
	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	14/1000	X
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)	<u> </u>	\$1548 A. 1/2	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	-	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		х
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30		30		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ٽ		
-	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
•	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
-	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
[®] Pai				
	Check if Schedule O contains a response or note to any line in this Part V	-		لما
	1 1 4-	~ Brake	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 15		デスト デッイ 漫	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		. Walley	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		X	1.7/2
20000	(gambling) winnings to prize winners?	1c Form		(2018)
032004	· 12-31-18	- Ontil		(

832004 12-31-18

Form 990 (2018)

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

If "Yes," complete Form 4720, Schedule O

AMERICAN ACTION FORUM, INC. 27-0567765 Form 990 (2018) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 9 b Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7h 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done Х 12c Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review 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 15a b Other officers or key employees of the organization 15b 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? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed NONE
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 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
	TOM RYAN - (202) 559-6420

1747 PENNSYLVANIA AVENUE NW 5TH FL, WASHINGTON, DC

Form **990** (2018)

PartiVII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)		(C)					(D)	(E)	(F)	
Name and Title	Average				Sition k more than one			Reportable	Reportable	Estimated	
	hours per	box	, unle	ss per	son (s both	an	compensation	compensation	amount of	
	week	_	cerar	d a d	recto	r/trus	(00)	from	from related	other	
	(list any	rector						the	organizations	compensation	
	hours for	or d	8			ated		organization	(W-2/1099-MISC)	from the	
	related organizations	nstee	trust		a	eu eu		(W-2/1099-MISC)		organization and related	
	below	ual tr	tronal		yold	t con	_			organizations	
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) JAMES BARKSDALE	1.00	_	_								
DIRECTOR		X						0.	0.	0.	
(2) NORM COLEMAN	1.00										
DIRECTOR		Х						0.	0.	0.	
(3) C. BOYDEN GRAY	1.00								= -		
DIRECTOR		Х						0.	0.	0.	
(4) WENDY GRUBBS	1.00										
DIRECTOR, SECRETARY, TREASURER		Х	<u>_</u>	X				0.	0.	0.	
(5) BOBBIE KILBERG	1.00										
DIRECTOR		X				L.		0.	0.	0.	
(6) LAUREN MADDOX	1.00	}									
DIRECTOR		X				L_		0.	0.	0.	
(7) JOHN MCKERNAN	1.00										
CHAIRMAN (AS OF 3/24/19)		Х	Ш	Х		Ш		0.	0.	0.	
(8) FRED MALEK	1.00								_		
CHAIRMAN (THROUGH 3/24/19)		Х		Х				0.	0.	0.	
(9) MICHAEL CHERTOFF	1.00	l							_	_	
DIRECTOR		X						0.	0.	0.	
(10) BILLY PITTS	1.00	۱							•		
DIRECTOR	40.00	х	 					0.	0.	0.	
(11) DOUGLAS HOLTZ-EAKIN	40.00			,,				200 000	0	2 400	
PRESIDENT (12) SARAH HALE SMITH	40.00	_		X				300,000.	0.	2,400.	
COO	40.00			х				164,002.	0.	6,873.	
(13) ROBERT G GRAY	40.00	\vdash	\vdash	^				104,002.	0.	0,0/3.	
DIRECTOR OF FISCAL POLICY	40.00					х		133,670.	0.	5,558.	
(14) CHRISTOPHER W HOLT	40.00	\vdash				1		133,070.	- 0.	3,330.	
DIRECTOR OF HEALTH CARE POLICY	=0.00	Ì				x		111,840.	0.	16,020.	
(15) THOMAS DANIEL RYAN	40.00	_	\vdash	-		 ^	_			20,020.	
DIRECTOR OF FINANCE & TECHNOLOGY						x		152,673.	0.	20,197.	
(16) ANGELA KUCK	40.00										
DIRECTOR OF COMMUNICATIONS						х		134,129.	0.	5,957.	
(17) DANIEL BOSCH	40.00							-,		<u>, </u>	
DIRECTOR OF REGULATION POLICY						x		121,336.	0.	8,676.	
832007 12-31-18										Form 990 (2018	

	90 (2018)		CAN ACTION								27-0	<u> 567</u>	765	P	age l
Part '	Part VII Section A. Officers, Directors, Trustees, Key En (A) Name and title Average hours per				nployees, and Highest C (C) Position (do not check more than one box, unless person is both an				one n an	(D) Reportable compensation	(E) Reportable compensation				
			week (list any hours for related organizations below line)	tee or director	Institutional trustee			Highest compensated		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MI	าร	comp fro orga	m the inizat relate	e ion ed
				_											
	_ _			1_	_					·					
										•					-
1b S	ub-total			_					▶	1,117,650.		0.	65	, 6	81.
<u>d T</u>	otal from continuat otal (add lines 1b a	nd 1c)	•	2050	lieto	d at	2010) wh	> >	0. 1,117,650. acceived more than \$100,	000 of reportable	0.	6 5	, 6	0. 81.
	ompensation from the	-								note than \$100,	- Coo of reportable			Yes	No
lu	ne 1a? <i>If</i> "Yes," com	plete Schedule	J for such individual					-		highest compensated er ner compensation from t	•		3 3 金沙		X
5 C	id any person listed	on line 1a rece	an \$150,000? <i>If</i> "Yes eive or accrue compe s." complete Schedu	nsatı	on fi	rom	any	unre		or such individual ed organization or individ	dual for services		4 5	X	málit. X
1 0		or your five high								nat received more than \$ the organization's tax y		pensat	ion froi	m	
		Name and bu	(A) usiness address	<u></u>		.g	1211			(B) Description of s		С	(C) ompen		n
	OORBEEK GR GAMETTS F		HAYMARKET,	V	Ά_	<u>20</u>	16	9		FUNDRAISING	SERVICES		244	.,9(00.
													•	_	

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded from tax under (B) Related or Total revenue business exempt function sections 512 - 514 revenue revenue Federated campaigns 1b b Membership dues c Fundraising events 1c 1d d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and ,508,025. similar amounts not included above Noncash contributions included in lines 1a-1f \$,508,025 Total. Add lines 1a-1f Business Code 900099 80,000. 80,000 2 a RESEARCH SERVICES Program Service 4,579. 4,579. **b** REIMBURSEMENTS 900099 c HONORARIA EVENTS 900099 3,500. 3,500. All other program service revenue 88,079. Total, Add lines 2a-2f investment income (including dividends, interest, and 17,206. 17,206. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory "飘走,停住 Miscellaneous Revenue **Business Code** 11 a d All other revenue nt frank fra 1866 fra Signal Control of the Total. Add lines 11a-11d 17,206. 3,613,310. Total revenue. See instructions Form **990** (2018) 832009 12-31-18

Form 990 (2018) AMERICAN ACTION FORUM, INC. 27-0567765 Page 10
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mplete column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		<u> </u>		7. 10. 19 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	-		Marine Comment	DO SIAMO
	individuals See Part IV, line 22			多先 第	
3	Grants and other assistance to foreign			The state of the s	
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				The wall of the state of the st
4	Benefits paid to or for members				MARK TO THE TRAINING
5	Compensation of current officers, directors,				
	trustees, and key employees	474,509.	418,280.	50,013.	6,216.
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	1,828,305.	1,807,499.	4,190.	16,616.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	33,994.	29,966.	3,583.	445.
9	Other employee benefits	87,692.	77,300.	9,243.	1,149.
10	Payroll taxes	157,306.	138,665.	16,580.	2,061.
11	Fees for services (non-employees)				
а	Management				
b	Legal	50,839.	44,817.	5,357.	665.
C	Accounting	18,088.		18,088.	<u> </u>
d	, 3	100 000	38 " 7.5" yn 198 75 m "14 i	75. 7. 77 , 224/36, 16, 78 Pm 3	150 000-
е	Professional fundraising services. See Part IV, line 17	182,900.	# # # # # # # # # # # # # # # # # # #		182,900.
f	Investment management fees			<u> </u>	
g	Other (If line 11g amount exceeds 10% of line 25,	084 200	074 200		
	column (A) amount, list line 11g expenses on Sch O.)	274,380.	274,380.		_
12	Advertising and promotion	65. 11,040.	65. 9,794.	1 100	120
13	Office expenses	16,666.		1,108. 1,756.	138. 218.
14	Information technology	10,000.	14,692.	1,750.	210.
15	Royalties	392,021.	345,584.	41,310.	5,127.
16	Occupancy	13,566.	13,380.	12.	174.
17	Travel	13,300.	13,380.	14.	1/4.
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials Conferences, conventions, and meetings				-
19 20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,844.	23,664.	2,829.	351.
23	Insurance	4,247.		4,247.	
24	Other expenses Itemize expenses not covered		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
•	above. (List miscellaneous expénses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	UBIT TAXES	1,441.	1997 B. SSR	1,441.	
b	OPERATING EXPENSES	62,364.	51,010.	9,210.	2,144.
C	WEBSITE	24,041.	24,041.		
d	EVENTS	21,838.	21,838.		
е	All other expenses	35,457.	35,010.	395.	52.
25	Total functional expenses. Add lines 1 through 24e	3,717,603.	3,329,985.	169,362.	218,256.
26	$\ensuremath{\text{\textbf{Joint costs.}}}$ Complete this line only if the organization		•		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)		<u> </u>	<u> </u>	
			•		Form 990 (2018)

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رم ريا -	תָּיָא.	balance Sneet					
•		Check if Schedule O contains a response or not	e to an	y line in this Part X			
				t	(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			243,546.	1	213,272.
	2	Savings and temporary cash investments			938,105.	2	890,440.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	225,682.	4	90,037.		
	5	Loans and other receivables from current and fo	rmer o	ficers, directors,		A COL	
		trustees, key employees, and highest compensa	ted em	ployees Complete		1	
		Part II of Schedule L	(mh)= (c/h/h/// /c/mi/d/d	5	W. A. A		
	6	Loans and other receivables from other disqualif	าบาทบาทีที่เพื่อเลือนกับบายการเกียบกับกับกับกับกับกับกับกับกับกับกับกับกับ	Township or	ก เมื่อเก็บการใช้เก็บแบบโรยที่ได้เก็บกระบบกับนี้ใช้เก็บกับกับเก็บเก็บ รายเก็บกับการใช้เก็บการใช้เก็บกับกับการเก็บการเก็บการเก็บกับการเก็บการเก็บการเก็บการเก็บการเก็บการเก็บการเก็บก		
		section 4958(f)(1)), persons described in section	งเกาะสาทางกับกับการเกาะกระที่กับการเรียกการเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสาม เกาะการเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกาะสามารถเกา	iggyrommnyo Ajeriyaan	សេដីវិសាល់យកដោយយោកដែលប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុ សេដ្ឋារីស្រាល់ ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជាក្នុង ប្រជាជិក្សា ប្រជាជិក្សា ប្រជាជ		
		employers and sponsoring organizations of secti	on 501	(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr)	Compl	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			0.	9	1,480.
	10a	Land, buildings, and equipment cost or other		550 004	โดยมาเมียนเป็นในให้เกิดเกิดเกิดให้เกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิด	້. ກ່ອນການເໜື່ອນ	The state of the s
		basis Complete Part VI of Schedule D	10a	298,906.		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	b	Less accumulated depreciation	10b	216,171.	105,286.	10c	82,735.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities See Part IV, line 1			12		
	13	Investments - program-related See Part IV, line			13		
	14	Intangible assets	20.405	14	00 107		
	15	Other assets See Part IV, line 11	22,407.	15	22,407.		
	16	Total assets. Add lines 1 through 15 (must equa	1,535,026.	16	1,300,371.		
	17	Accounts payable and accrued expenses	243,888.	17	113,526.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		(0.1.1.1.5)		20	_
	21	Escrow or custodial account liability Complete F			TO COMMENT OF COMMENTS	21	MONEY TOURS T. MINE
es	22	Loans and other payables to current and former				di dah	
Liabilities		key employees, highest compensated employee Complete Part II of Schedule L	s, and	disquaimed persons	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	22	daddig inggan samming galer sa tindar ingkard
<u> </u>	22	•		22	 		
	23	Secured mortgages and notes payable to unrela Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, page					
	23	parties, and other liabilities not included on lines					
		Schedule D	24)	Complete Full X Of		25	
	26	Total liabilities. Add lines 17 through 25			243,888.	26	113,526.
	 _	Organizations that follow SFAS 117 (ASC 958)), cher	k liere ▶ X and	month of all the - y to - the - 1985	Inamamum	การและเกิดเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะ
10		complete lines 27 through 29, and lines 33 and					
ĕ	27	Unrestricted net assets			1,257,672.	27	1,059,307.
la la	28	Temporarily restricted net assets	33,466.	28	127,538.		
å	29	Permanently restricted net assets		29	1		
Net Assets or Fund Balances	-	Organizations that do not follow SFAS 117 (AS	A LONDON MARKAGO CONTRACTOR CONTR	¥ , ' ; '	TO THE REPORT OF THE PARTY OF T		
Ē		and complete lines 30 through 34.		<i>.</i>	S. M.	granders)n	with the state of
ts o	30	Capital stock or trust principal, or current funds			The second secon	30	77. 100.000
sse	31	Paid-in or capital surplus, or land, building, or eq	uipmei	nt fund		31	
ř.	32	Retained earnings, endowment, accumulated in				32	
Ž	33	Total net assets or fund balances	·		1,291,138.	33	1,186,845.
	34	Total liabilities and net assets/fund balances			1,535,026.	34	1,300,371.
							Form 990 (2018)

Form	990 (2018) AMERICAN ACTION FORUM, INC.	27-	<u>0567765</u>	Page 12
Pa	Reconciliation of Net Assets			
_ `	Check if Schedule O contains a response or note to any line in this Part XI		<u>-</u>	
	•	i I		_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,613	
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,717	
3	Revenue less expenses. Subtract line 2 from line 1		,293.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,291	<u>,138.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	i I		
	column (B))	10	1,186	,8 4 5.
Pa	Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	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?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	120	
	consolidated basis, or both		1/2 1/2	
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	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?			X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		2 37	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud		
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t	
	or guidita, evaluin juhu in Cahadula A and describe any stane taken to undergo guidi audita		i au i	

832012 12-31-18

Form **990** (2018)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

12490630 796448 09249

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 Öpen to Public

Inspection

Name of the organization Employer identification number AMERICAN ACTION FORUM, INC. 27-0567765 Part 1 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. J Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (iii) Type of organization (v) Amount of monetary (i) Name of supported (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

Schedule A (Form 990 or 990-EZ) 2018 AMERICAN ACTION FORUM, INC. 27-0567 [Part II] Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")	5477016.	4176619.	5312269.	3748970.	3508025.	22222899.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf					<u></u>	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5477016.	4176619.	5312269.	3748970.	3508025.	22222899.
5	The portion of total contributions						
	by each person (other than a	The State of the S	with the fift.	The State of the S	in the state of		
	governmental unit or publicly	Serialization in a sale reco		الزيريان والمراجع وأمري والاراجع والمراجع			
	supported organization) included						
	on line 1 that exceeds 2% of the			The state of the state of the	事以 持 事。1970年		
	amount shown on line 11,			WAXWAY	经验证		252524
	column (f)	THE RESERVE THE STATE OF THE ST	moderation than a second of the the	ayayaanayaanayaayaa	Symmologiinamiijingiaagiyyddyyddig	สากกุลที่อุดเลกกล่างต่องการกับกับการครั้งร้ายเล	3785301.
	Public support. Subtract line 5 from line 4	4		กับกลักษณะเกิดและเกิดและเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิดเกิด	<u>ເຂົ້າແກກກ່າວເມັນການແຂອງທີ່ເຄດີເຫຼົ່ນເກີກຖາຄົດເຊີຊີນີນ</u>	amatilitatia di mangana di manangana di mana	18437598.
	ction B. Total Support			4 3 2242	4 11 2247		
	ndar year (or fiscal year beginning in)	(a) 2014 5477016.	(b) 2015 4176619.	(c) 2016 5312269.	(d) 2017 3748970.	(e) 2018 3508025.	(f) Total 22222899.
-	Amounts from line 4	34//010.	41/0019.	3312203.	3/403/0.	3506025.	ZZZZZO99.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources	4,965.	4,240.	3,596.	8,208.	17,206.	38,215.
9	Net income from unrelated business	. 4,303.	4,240.	3,330.	0,200.	17,200.	
9	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						·
10	or loss from the sale of capital						,
	assets (Explain in Part VI)						<u> </u>
11		177, 111 11 12	34 / 18/ La 48 / 1			The state of the s	22261114.
12				2017 C 95 S 25 2 25 16 15 C	1/ /** \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	12	455,312.
	First five years. If the Form 990 is fo	•	•	d fourth or fifth ta	x vear as a section		133,320.
	organization, check this box and stop		mot, boooma, trim	3, 1001111, 01 111111111	ix your do a doorior	. 661(6)(6)	
Sec	ction C. Computation of Publi	ic Support Per	centage				<u> </u>
14	Public support percentage for 2018 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	82.82 %
	Public support percentage from 2017			.,,	1	15	82.20 %
16a	33 1/3% support test - 2018. If the	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppr	orted organization				▶ X
b	33 1/3% support test - 2017. If the	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ition			ightharpoons
17a	10% -facts-and-circumstances test	- 2018. If the org	anization did not d	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstanc	ces" test, check th	is box and stop h	i ere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test The organizat	ion qualifies as a p	oublicly supported	organization		ightharpoons
b	10% -facts-and-circumstances test	- 2017. If the org	anization did not d	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explair	in Part VI how the	<u></u> ,
	organization meets the "facts-and-circ	cumstances" test 1	The organization q	ualifies as a public	ly supported organ	nization	▶□
18	Private foundation. If the organization	on did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2018

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

Section A. Public Support	elow, please comp	iete Part II)	-			
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						f
membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions,				-		
merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513				. /		
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge				1		
6 Total. Add lines 1 through 5			/	<u> </u>		
7a Amounts included on lines 1, 2, and				· · · 		
3 received from disqualified persons						•
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		/		`		
c Add lines 7a and 7b				1		
8 Public support. (Subtract line 7c from line 6) Section B. Total Support		The second second	ar tra st to	1/4 - 17 - 18	18 // Fg	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	(=/ = 5 · ·		1	1-7	15/	<u> </u>
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	/					
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 Total support. (Add lines 9, 10c, 11, and 12)			1	<u> </u>		<u> </u>
14 First five years. If the Form 990 is fo	r the organization's	first, second, thi	rd, fourth, or fifth ta	ax year as a section	n 501(c)(3) organiz	ation,
check this box and stop here						
Section C. Computation of Publi						
15 Public support percentage for 2018 (=	column (f))		15	
16 Public support percentage from 2017					16	%
Section D. Computation of Inves				_	TT -	
17 Investment income percentage for 20			line 13, column (f))		17	%
18 Investment income percentage from					18	%
19a 33 1/3% support tests - 2018. If the more than 33 1/3%, check this box at	nd stop here. The	organization qua	lifies as a publicly s	upported organiza	tion	▶□
b 33 1/3% support tests - 2017. If the	_					
line 18 is not more than 33 1/3%, che 20 Private foundation. If the organization						
832023 10-11-18	an did not check a	SOX OIT IIITE (4, 18	oa, or 100, check th		edule A (Form 99	0 or 990-EZ) 2018

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

_		Vac	Na
		Yes	No
	2	·.	
	3a	<u> </u>	
	3b	, ,	
	3c	\$394 <u>8</u>	12 19 19 19 19 19 19 19 19 19 19 19 19 19
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	46	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	5a5b	2	. ji
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	9b		300
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	10a 10b		122

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Schedule A (Form 990 or 990-EZ) 2018

Sche	dule-A (Form 990 or 990-EZ) 2018 AMERICAN ACTION FORUM, INC.	<u>27-056776</u>	5 _{Ра}	age 5
	t:IV Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	£3.1 * *	- "Mile"	, I
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1900 N		
u	below, the governing body of a supported organization?	11a	- XXX	لتمسخب
				
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Seci	tion B. Type I Supporting Organizations			Γ
		<i>an</i> .	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		14	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	ALS T		4,81
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	\$1.53°," #1.70°		" ´r' , 1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	F3	(\$7.5°	
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	\$5 m	2, 113	forgo,
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,	7.74		}
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
000	tion of Type it oupporting organizations		V	N _a
		8	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		14/11/11	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			-1,
	or management of the supporting organization was vested in the same persons that controlled or managed	6h	4 7 224	<u> </u>
0	the supported organization(s).	[1]		Ц
Sec	tion D. All Type III Supporting Organizations			
		z ; /	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	#P 27.5	11	" سرد کو سو
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		1	1000
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		7	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	# Selection		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			4/23/19/1
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	green fifty and	1.1	7 /
	significant voice in the organization's investment policies and in directing the use of the organization's			1 122
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	を		- 1/2 /2
	supported organizations played in this regard.	3		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structions).		
' a	The organization satisfied the Activities Test Complete line 2 below	a dodonoj.		
a b	The organization is the parent of each of its supported organizations Complete line 3 below			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity	4		
C		ty (see instructions),	Yes	Na
2	Activities Test Answer (a) and (b) below.	77,7	res ∴್‰*	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			5
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		The state of the s	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	157		1 1
	how the organization was responsive to those supported organizations, and how the organization determined		1 1/2	الشتخ
	that these activities, constituted substantially all of its activities	2a	* III II. III	771
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			'm (4)"
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	18 29 7 S. 1 18 29 7 S. 1	. 	
	reasons for the organization's position that its supported organization(s) would have engaged in these	-122	- 17	
	activities but for the organization's involvement	2b_		
3	Parent of Supported Organizations Answer (a) and (b) below.	\$ 7 H	ָרֶלְיִינְ קַלְיִינְ	-
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	Zing ,	2 60	
-	trustees of each of the supported organizations? Provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		7" 1111	5 ()
~	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
832025		A (Form 990 or 99	0-EZ\	2018
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Sche	edule A (Form 990 or 990 EZ) 2018 AMERICAN ACTION FORUM,	INC.	2	7-0567765 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga		
1'	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust o	n Nov 20, 1970 (explain in P	art VI) See instructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	γ
Sect	con A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	rion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	اللاد		
	instructions for short tax year or assets held for part of year)	J. 10		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	/_ '3 r		
	factors (explain in detail in Part VI)	ril Lo		A The second of
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
8	Mınimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	Transition of the second secon	
2	Enter 85% of line 1	2	Starte thing as 1 / st Sold the start can be	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5	LAND THE STATE OF	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Charle have if the assument year in the average transfer first on a non-first and	lu intoas	stad Tuna III augmenting aven	auton laca

Schedule A (Form 990 or 990-EZ) 2018

instructions)

	dule-A (Form 990 or 990-EZ) 2018 AMERICAN ACTI			7-0567765 Page 7
Pa	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
_3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	<u></u>	1
_4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)		<u></u>	
_6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI) See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·		
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	A Professional Strain Strain	The second of th	
2	Underdistributions, if any, for years prior to 2018 (reason-	The state of the s	, and the same of	
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018	The state of the s		
a	From 2013		"路"是"上"的"三"。	The state of the s
b	From 2014		Marine Marine San	JAN BUNGAN
	From 2015			
	From 2016			
	From 2017			等于。"约二、《第八号》,为《
f				
	Applied to underdistributions of prior years	近之艺 "野川智"的 浅角		建筑是"地"。"在 你可
	Applied to 2018 distributable amount	The There was the second of the		,
i				源 等 第二
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D,			
	line 7 \$			
a	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount	产业发展的是 <i>的</i> 通过模型	Balancia San San San San San San San San San Sa	
	Remainder Subtract lines 4a and 4b from 4			STATE OF THE STATE
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h	为"块线"。"然后"的"C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.C.		
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2019. Add lines 3			TO THE PARTY OF TH
-	and 4c			
8	Breakdown of line 7			The Land State of the Land of
	Excess from 2014	17 大小	The state of the s	SE THE MEETING
	Excess from 2015	PROFESSION AND A CONSTITUTE	Salas Cate Color Color Carlos Color Color Color	Mark Control of the Control
	Excess from 2016			
	Excess from 2017	Mr. The Shart Shart Shart Shart	William Salar Salar Mar Solitores da	The State of the S
		" f / - 1/2" - 1/2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the state of the sail and and the	MATERIAL STATES

Schedule A (Form 990 or 990-EZ) 2018

e Excess from 2018

Schedule _' A	(Form 990 or 990-EZ) 201	IS AMERICAN	ACTION FORU	JM. INC.	27-0567765 Page 8
Part VI	Supplemental Info	rmation Provide	the evaluations requi	ared by Part II line 10 Part II	Line 17a or 17b. Part III. line 12
	Part IV Section A lines	1 2 2b 3c 4b 4c	The explanations requ	11h and 11c Part IV Section	I, line 17a or 17b, Part III, line 12, on B, lines 1 and 2, Part IV, Section C,
•	line 1 Part IV Section C	1, 2, 30, 30, 40, 40, 1 lines 2 and 3 Part	3d, 6, 3d, 3D, 3C, 11d, IV Section F lines 1c	2a 2h 3a and 3h Part V I	line 1, Part V, Section B, line 1e, Part V,
,	Section D. Image E. C. an	d 9 and Dort V Soci	tv, Section E, lines 10,	, 2a, 2b, 3a, and 3b, Part V, i 6 Also complete this part for	any additional information
	(See instructions)	u o, and Fart V, Sec	HOH E, IMES 2, 3, and C	Also complete this part for	any additional information
	(See instructions)				
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832028 10-11-18

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

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-B

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

		, or (6) organiz <u>a</u>	tions Complete Part III			
Nar	me of organization				Empl	oyer identification number
_		AMERICA	N ACTION FORUM,	INC.		<u> 27-0567765</u>
P	art I-A Comple	ete if the org	janization is exempt und	der section 501(c)	or is a section 527 org	ganization.
2	Political campaign a	activity expendit		ical campaign activities i		
3	Volunteer hours for	political campa	gn activities			
P	art I-B Comple	ate if the ord	janization is exempt und	der section 501(c)(3)	
			incurred by the organization un			
		•	incurred by organization manage		▶ \$	
		•	n 4955 tax, did it file Form 4720	-	,	Yes No
	a Was a correction ma			5 70. u.u.b you.		Yes No
	b If "Yes," describe in					
	art I-C Comple	ete if the org	janization is exempt und	der section 501(c),	except section 501(c	(3).
1	Enter the amount di	rectly expended	by the filing organization for s	ection 527 exempt funct	tion activities > \$	
2	Enter the amount of	f the filing organ	ization's funds contributed to c	ther organizations for se	ection 527	
	exempt function act	tivities			▶\$	
3	Total exempt function	on expenditures	Add lines 1 and 2 Enter here	and on Form 1120-POL	i	
	line 17b				▶\$	Yes No
4	Did the filing organi	zation file Form	1120-POL for this year?			Yes No
5	made payments Fo	or each organiza ed that were pr	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	aid from the filing organize a separate political organizer	zation's funds Also enter the anization, such as a separate	amount of political
	(a) Name	, ,	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Maine	•	(b) Address	(c) LIN	filing organization's funds If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Sche	dule,C (Form 990 or 990-EZ) 2018	AMERI	CAN AC	TION FORUM,	INC.	27-0	567765 Page 2
	rt II-A Complete if the org	anizatio	n is exer	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under
•	section 501(h)).						
A CI			_	_	Part IV each affiliated	group member's name	e, address, EIN,
	expenses, and sha			•			
B C	heck I if the filing organiza	ation check	ed box A ar	nd "Iimited control" pro	visions apply	<u> </u>	
	Limi	its on Lob	bying Expe	nditures		(a) Filing	(b) Affiliated group totals
	-			ınts paid or incurred.)		organization's totals	totais
1a	Total lobbying expenditures to infl	uence pub	lic opinion (grass roots lobbying)		,	
b	Total lobbying expenditures to infli	uence a le	gislative boo	dy (direct lobbying)			
С	Total lobbying expenditures (add li	ines 1a and	d 1b)				
d	Other exempt purpose expenditure	es			•	3,511,992.	
е	Total exempt purpose expenditure	s (add line	s 1c and 1d)		3,511,992.	•
f	Lobbying nontaxable amount Enti-	er the amo	unt from the	e following table in both	columns	325,600.	
	If the amount on line 1e, column (a) o	or (b) is:	The lob	bying nontaxable am	ount is:	""""""""""""""	
	Not over \$500,000		20% of	the amount on line 1e			
	Over \$500,000 but not over \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000		
	Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exce	ss over \$1,500,000		งเลาระงายเขาทนทนที่สุดที่มีที่มีกับเทาที่สุดเลาเห็กถูกกัดเ
	Over \$17,000,000	·	\$1,000,	000			
	Grassroots nontaxable amount (er	nter 25% of	fine 1ft			81,400.	1512 11 1/2/2 x 2 4
_	Subtract line 1g from line 1a If zer		•			0.	
	Subtract line 1f from line 1c If zero					0.	
i	If there is an amount other than ze			line 1i. did the organiza	ation file Form 4720		
	reporting section 4911 tax for this						Yes No
				eraging Period Under			
	(Some organizations t					of the five columns be	low.
				ate instructions for lir			
		Lob	bying Expe	nditures During 4-Yea	ir Averaging Period	1	
	Calendar year (or fiscal year beginning in)	(a)	2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount	40	0,580.	378,400.	335,969.	325,600.	1,440,549.
	Lobbying ceiling amount			第25年第	F 1/2 - 1	· 1.7%	
	(150% of line 2a, column(e))	งกุกแสมุมของกุลเลือ	นับสัญนักษณะคลสุดภูกิจากับ	gyักในทุกทางออกแบบกับแก้นี้ที่คนที่กับกับกับกุดกุลกากกับ	งบบต์กลังก็เกียกกับกับเกียกกับกับกับกับกับกับกับกับกับกับกับกับกับ	<u>จับบทหม่างหมืใช้เกิดเกลื้อจึงเกลส์เกละเสล็ตระดัสสใต้เกิดเ</u>	2,160,824.
_	Total lobbying expenditures					0.	
	Total lobbying expenditures	-				0.	
d	Grassroots nontaxable amount	10	0,145.	94,600.	83,992.	81,400.	360,137.
	Grassroots ceiling amount	17.18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	And the other of				
	(150% of line 2d, column (e))						540,206.
_						-	
f	Grassroots lobbying expenditures	L					

Schedule C (Form 990 or 990-EZ) 2018

Schedule,C (Form 990 or 990 EZ) 2018 AMERICAN ACTION FORUM, INC. 27-0567765 Page 3
Part 12B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	- (b)
of the	e lobbying activity	Yes	No	Amo	ount '
	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 Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
	Mailings to members, legislators, or the public?	<u>-</u> .			
	Publications, or published or broadcast statements?				<u>, </u>
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?				-
!	Other activities?				
J	Total Add lines 1c through 1:	29 29 79W MENN	LINGTH BARANGE		Weds -
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912			V 14 14 11 11 11 11 11 11 11 11 11 11 11	//////////////////////////////////////
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	723 225260000.7///KY	CHESARCH - P/		
_	Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	- 4
	501(c)(6).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		,
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	ne prior vear			
	Complete if the organization is exempt under section 501(c)(4), section			tion	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3, is
	answered "Yes."		<u> </u>		
1	Dues, assessments and similar amounts from members		<u>1</u>		
2	Section 162(e) nondeductible lobbying and political expenditures. (do not include amounts of political expenditures.)	cai	W.F.		
_	expenses for which the section 527(f) tax was paid). Current year		2a		
	Carryover from last year		2b		
C	Total		2c		
વ	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess	(Frida		
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	,	
Par	Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group actions), and Part II-B, line 1. Also, complete this part for any additional information	list), Part II-	A, lines 1 a	nd 2 (see	
			-		
			-		
		-			
	·				
		Schedu	ile C (Form	990 or 99	0-EZ) 2018

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 instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN ACTION FORUM, INC.

Employer identification number 27-0567765

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 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 advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be ι	sed only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, P	art IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	• • •	
	violations, and enforcement of the conservation easements it		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
_	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easements during the year
_	\$) (A) (B) (B)
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(n	······ — —
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes tr	ne organization's accounting for
Par	conservation easements t III Organizations Maintaining Collections of	Art. Historical Treasures, or Oth	ner Similar Assets
	Complete if the organization answered "Yes" on Form	· ·	
10	If the organization elected, as permitted under SFAS 116 (AS		ent and balance cheet works of art
14	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that descri		ce of public service, provide, in Fart Alli,
h	If the organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art, historical
D	treasures, or other similar assets held for public exhibition, ed	·	
	relating to these items	ducation, or research in former affect or pub.	ne service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		S
2	If the organization received or held works of art, historical tre-	asures or other similar assets for financial	
~	the following amounts required to be reported under SFAS 1	·	g, p. 0 1.00
а	Revenue included on Form 990, Part VIII, line 1	and the state of t	▶ \$
	Assets included in Form 990, Part X		> \$
		for Form 800	Schedule D (Form 990) 2018

Sche	dule-D (Form 990) 2018 AMERICA	N ACTION F	ORUM	, INC.		_		<u> 27-05</u>	<u>67</u> 765	Page	2
Par					asures, or	Other S	Simila	r Assets	(continu	ed)	
3,	Using the organization's acquisition, accession	on, and other record	ls, check	any of the f	ollowing that	are a sign	ificant u	se of its c	ollection it	ems	
	(check all that apply)										
а	Public exhibition	C	• 🗀	Loan or exc	hange progra	ms					
b	Scholarly research	6	• 📖	Other							_
C	Preservation for future generations										
4	Provide a description of the organization's co							se in Part	XIII		
5	During the year, did the organization solicit o					r sımılar as	ssets		7		
D	to be sold to raise funds rather than to be ma								Yes	N	<u>-</u>
Par			ete if the	e organizatio	n answered "	Yes" on Fo	orm 990	, Part IV,	ine 9, or		
_	reported an amount on Form 990, Par										—
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contributions	s or other ass	ets not inc	iuaea		7 v		_
	on Form 990, Part X?	and complete the fo	llauma t	abla				<u> </u>	_ Yes	N	0
В	If "Yes," explain the arrangement in Part XIII	and complete the lo	nowing t	able					Amount		—
_	Beginning balance						1c		Amount		_
	Additions during the year						1d				_
	Distributions during the year						1e				_
f	Ending balance						1f				_
	Did the organization include an amount on Fe	orm 990. Part X. line	21. for	escrow or cu	istodial accou	unt liability			Yes	□ N	_
	If "Yes," explain the arrangement in Part XIII					_				$\overline{\Box}$	-
Par							_				_
		(a) Current year		rior year	(c) Two year) Three y	ears back	(e) Four y	ears back	<u>к</u>
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										_
f	Administrative expenses										_
g	End of year balance				L						_
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1ç	g, column (a)) held as						
	Board designated or quasi-endowment		%								
	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c short	•									
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held ar	nd administer	ed for the	organiza	ation			—
	by									es No	<u>`</u>
	(i) unrelated organizations								3a(i)	+	—
	(ii) related organizations If "Yes" on line 3a(ii), are the related organiza	tions listed as year w	rad an C	ahadula D2					3a(ii) 3b	-+	_
D 4	Describe in Part XIII the intended uses of the	•							[30]		—
Par	t VI Land, Buildings, and Equipm		Willelit	unus							_
<u> </u>	Complete if the organization answere		D. Part IV	/. line 11a S	ee Form 990.	Part X. lin	e 10				
	Description of property	(a) Cost or o		1	or other		umulate	ed b	(d) Book	value	_
	beasingtion of property	basis (investr			(other)		eciation		(u) 200	V-0.00	
1a	Land					•					_
	Buildings										_
	Leasehold improvements			18	9,059.	11	11,2	72.	77	,787	-
	Equipment				9,847.		4,89			,948	_
	Other										
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colun	nn (B), line 1	Oc.)			ightharpoonup	82	,735	

Schedule D (Form 990) 2018

(3) Other

(B) (C) (D) (E) (F) (G) (H)

(1) (2)(3)(4) (5) (6)(7) (8) (9)

(1) (2) (3) (4) (5) (6)(7) (8) (9)

1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2)			
(3)			
(4)			
(5)			
(6)	<u>-</u>		
(7)	·		
(8)			
(9)			
Total. (Column	(b) must equal Form 990. Part X. col. (B) line 25.)	<u></u>	The state of the s

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 X

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 AMERICAN ACTION FORUM, INC. Part XIII Supplemental Information (continued)	27-0567765 Page
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	·····
	Schedule D (Form 990) 201

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization					E	mployer ide	ntification number
AMERICA	N ACTION FORUM, IN	c.			_ 2	27-0567	765
Part I Fundraising Activities required to complete this par	Complete if the organization answer t	ered "Y	es" or	Form 990, Part IV, I	ine 17	Form 990-EZ	filers are not
 1 Indicate whether the organization rais a Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individendmental compensated at least \$5,000 by the 	sed funds through any of the following with a Solicitary of the Solicitary of the following with a Solicitary of the Sol	ation of ation of I fundra I (includ professi	non-g gover using ling of onal fi	overnment grants nment grants events ficers, directors, trus undraising services?		X Yes	'
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) funda have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	to (or	mount paid retained by) ndraiser d in col (i)	(vi) Amount paid to (or retained by) organization
THE OORBEEK GROUP - 9593 SPRINGS ROAD, WARRENTON, VA	SOLICITING DONATIONS FROM ORGANIZATIONS AND	Yes	No X	815,000.		182,900.	632,100.
		<u> </u>					
		<u> </u>					
	·						<u>-</u>
Total 3 List all states in which the organization	on is registered or licensed to solicit	contrib	utions	815,000. or has been notified	ıt ıs ex	182,900. empt from reg	632,100. gistration
or licensing DC							
				,,			· · · · · · · · · · · · · · · · · · ·
-							
-							
<u> </u>						<u>-</u>	
							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2018

832081 10-03-18

		e.G (Form 990 or 990-EZ) 2018 AMERICA			27-	0567765 Page 2
Pa	rt I					
<u></u>		of fundraising event contributions and gro				s greater than \$5,000
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col (c))
ης			(event type)	(eveni type)	(total flames)	
Revenue	1	Gross receipts			·	<u>.</u>
	2	Less Contributions				
\Box	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				`
s	5	Noncash prizes				
bense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Δ	8	Entertainment	İ			
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	• •		•	
لے	11				<u> </u>	
Pa	πι		answered "Yes" on Form	i 990, Part IV, line 19, or i	eported more than	
\neg		\$15,000 on Form 990-EZ, line 6a	1	(b) Pull tabs/instant		(d) Total gaming (add
e			(a) Bingo	bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue						,, <u> </u>
	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
ect Ey	4	Rent/facility costs				
ā		·				
-	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes %	Yes% No	
	7	Direct expense summary Add lines 2 through	ı 5 ın column (d)		•	
	8	Net gaming income summary Subtract line 7	from line 1, column (d)		>	
						•
		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming ac No," explain		states?	_	Yes No
	_					
		re any of the organization's gaming licenses re			ear?	Yes No
-	_					
	_					m 990 or 990 E7) 2019

Schedule_G (Form 990 or 990-EZ) 2018 AMERICAN ACTION FORUM, INC.	27-0567765 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No.
12. Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	_ `
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and recor	ds
Name	
Address -	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the am	ount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name	
Address >	
16 Gaming manager information	
Garning manager information	
Name ▶	· · · · · · · · · · · · · · · · · · ·
Common management of the Common management of	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	ın the
organization's own exempt activities during the tax year > \$	
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v) 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions), and Part III, lines 9, 9b, 10b,
COMPONED OF THE PARTY OF THE PA	T G T D G
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRA	ISERS:
(I) NAME OF FUNDRAISER: THE OORBEEK GROUP	
(I) ADDRESS OF FUNDRAISER: 9593 SPRINGS ROAD, WARRENTON, VA	20186
/TT \ 200TUTMV. GOLTGIMING BOWNTONG BROW ORGANIZATIONS	AIDTUTDUS C
(II) ACTIVITY: SOLICITING DONATIONS FROM ORGANIZATIONS AND I	NDIVIDUALS
	
	•
832083 10-03-18 . Schedule	e G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) AMERICAN ACTION FORUM, INC.	27-0567765 Page 4
Schedule G (Form 990 or 990 EZ) AMERICAN ACTION FORUM, INC. Part IV Supplemental Information (continued)	
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	0.1.1.0.0
	Schedule G (Form 990 or 990-EZ

SCHEDULE J (Form 990)

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

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

AMERICAN ACTION FORUM, INC.

Employer identification number 27-0567765

Pa	art 🎼 Questions Regarding Compensation		:	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,	11/2	7. 7.	
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		18434	37.5
	First-class or charter travel Housing allowance or residence for personal use	12.30	A CONTRACT	
	Travel for companions Payments for business use of personal residence		William I	() () () () () () () () () ()
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	(1)	ا م ا القور	
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		م القالمة م القالمة الم	1 2 2
		£2.	35-	7.7
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			رين مستارين الم
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	11/2/2	41/2	(r - 1
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
		1/2	37,	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	100		
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	4 .		\$152°,
	establish compensation of the CEO/Executive Director, but explain in Part III	William C.	in.	in in
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study	Ži.r.	SE UT' -	29
	X Approval by the board or compensation committee			A X
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	To The	1 - V.
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			18/12/20
	organization or a related organization			, 19r. //
а	Receive a severance payment or change-of-control payment?	4a		X
b		4b		X
c		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		第799 9	
		100	7.2	****
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	10 mm		199
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	E	1. 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	contingent on the revenues of	7	in the second	4
а	The organization?	5a		X
b		5b		Х
	If "Yes" on line 5a or 5b, describe in Part III	Winds.	Grand or 1	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		Same 1	
	contingent on the net earnings of	19 Jan 1		
а	The organization?	6a		X
	Any related organization?	6b		х
	If "Yes" on line 6a or 6b, describe in Part III	ENERGY WILL	A P	10000
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		201	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	111, 7	*//. ~ / */	1/217
-	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	1/4 / 1	(6/1)	
-	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
				,	other deferred		(a)·(i)(B)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DOUGLAS HOLTZ-EAKIN	(1)	300,000	0	0	2,400.	0	302,400.	0.
PRESIDENT	Ξ	0	0	0	0	0	0	0
(2) SARAH HALE SMITH	Ξ	164,002.	0	0	1,840.	5,033.	170,875.	0
000	Ξ	0	0.	0	0	0	0	0
(3) THOMAS DANIEL RYAN	Ξ	152,673.		• 0	138.	20,059.	172,870.	0
DIRECTOR OF FINANCE & TECHNOLOGY	 (ii)	0		0.	0.	0.	0.	0
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Schedule J (Form 990) 2018

Schedule J (Form 990) 2018 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

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

AMERICAN ACTION FORUM, INC.	<u>27-0567765</u>
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND	REVIEWED BY THE
PRESIDENT, COO, AND DIRECTOR OF FINANCE OF THE ORGANIZATION	N, IN
CONSULTATION WITH LEGAL PROFESSIONALS. THE FINAL VERSION OF	F THE FORM IS
PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW (WITH CONFIDE	ENTIAL PORTIONS
REDACTED, BUT AVAILABLE TO THEM FOR REVIEW ON PREMISES), PI	RIOR TO BEING
FILED WITH THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C:	, ,
THE ORGANIZATION ASKS THE BOARD MEMBERS ANNUALLY TO DISCLOS	SE INTERESTS THAT
MAY GIVE RISE TO POTENTIAL CONFLICTS OF INTEREST UNDER THE	CONFLICTS OF
INTEREST POLICY. IT DOES SO IN CONJUNCTION WITH ASKING FOR	INFORMATION
ABOUT ARRANGEMENTS THAT MAY NEED TO BE DISCLOSED ON THE FOR	RM 990.
FORM 990, PART VI, SECTION B, LINE 15A:	
THE BOARD (OR A COMMITTEE THEREOF) REVIEWS COMPENSATION AT	COMPARABLE
ORGANIZATIONS TO DETERMINE APPROPRIATE COMPENSATION LEVELS	FOR THE
PRESIDENT. FOR OTHER EMPLOYEES, THE CHIEF OPERATING OFFICE	R REVIEWS
COMPENSATION FOR SIMILAR WORK AT PEER INSTITUTIONS TO DETER	RMINE
COMPENSATION LEVELS. THE PRESIDENT REVIEWS AND APPROVES ALI	L STAFF
COMPENSATION DECISIONS.	
	
FORM 990, PART VI, SECTION C, LINE 19:	
THE CERTIFICATE OF INCORPORATION AND CONFLICT OF INTEREST I	POLICY ARE
PROVIDED UPON REQUEST.	

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

Schedule Q (Form 990 or 990-EZ) (2018) Name of the organization	Page 2 Employer identification number
AMERICAN ACTION FORUM, INC.	27-0567765
FORM 990, PART IX, LINE 11G:	
THESE EXPENSES INCLUDE OUTSIDE TECHNICAL SUPPORT FOR OUR O	COMMUNICATIONS
ACTIVITIES, WEBSITE, AND ONLINE PRESENCE (\$192,880); TEMPO	DRARY
CONTRACTS FOR RESEARCH PAPERS BEYOND THE SCOPE OF OUR IN H	HOUSE EXPERTS
(\$75,000); HONORARIA (\$6,500).	
FORM 990, PART XII, LINE 2C:	
THE OVERSIGHT POLICIES AND SELECTION OF AN INDEPENDENT ACC	COUNTANT BY
THE AUDIT COMMITTEE HAS NOT CHANGED SINCE PRIOR YEAR.	
	