DLN: 93493289001439 OMB No 1545-0047 Return of Organization Exempt From Income Tax 2018 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 C Name of organization D Employer identification number B Check if applicable Aircraft Owners & Pilots Association ☐ Address change 52-0636210 % ERICA SACCOIA SVP-FINANCE ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminate E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite □ Application pending (301) 695-2000 City or town, state or province, country, and ZIP or foreign postal code Frederick, MD  $\,$  21701  $\,$ G Gross receipts \$ 81,684,917 Name and address of principal officer H(a) Is this a group return for Mark Baker CEOPresident □Yes ☑No subordinates? 421 Aviation Way H(b) Are all subordinates Frederick, MD 21701 ☐ Yes ☐No included? Tax-exempt status 501(c)(3) **✓** 4947(a)(1) or If "No," attach a list (see instructions) 501(c) ( 4 ) ◀ (insert no ) **H(c)** Group exemption number ▶ Website: ▶ www AOPA org L Year of formation 1939 **M** State of legal domicile NJ Summary 1 Briefly describe the organization's mission or most significant activities Protect your freedom to fly by advocating, educating, supporting activities that ensure GA flight and securing sufficient resources to ensure Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 10 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 229 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . 1,425 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 6,614,938 b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 5,353,811 6,208,824 8 Contributions and grants (Part VIII, line 1h) . . 9 Program service revenue (Part VIII, line 2g) . 20,488,033 21,799,034 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . 3,424,081 2,921,231 17,913,717 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 14,651,810 47,179,642 45,580,899 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3). 386,000 186,300 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 23,570,165 24,856,444 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶212,629 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 25,484,929 25,653,129 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 49,441,094 50,695,873 19 Revenue less expenses Subtract line 18 from line 12 . -2,261,452 -5,114,974 Net Assets or Fund Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) . 105,733,150 109,207,621 21,851,004 21 Total liabilities (Part X, line 26) . 25,116,121 22 Net assets or fund balances Subtract line 21 from line 20 . 87,356,617 80.617.029 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-16 Signature of officer Sign Here ERICA SACCOIA SVP - FINANCE Type or print name and title Print/Type preparer's name Preparer's signature Date Check | If 2019-10-15 P00847851 Paid self-employed Firm's name Frant Thornton LLP Firm's EIN ▶ Preparer Use Only Firm's address ▶ 1000 WILSON BLVD SUITE 1400 Phone no (703) 847-7500 ARLINGTON, VA 22209

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions) .

Cat No 11282Y

☑ Yes ☐ No

Form	990 (2018)					Page <b>2</b>
Pa	nt III Statement	of Program Servi	ce Accomplis	hments		
	Check If Sche	edule O contains a resp	onse or note to	any line in this Part III .		🗹
1	Briefly describe the o	organization's mission				
SEE :	SCHEDULE O					
2	Did the organization	undertake any signific	ant program ser	vices during the year whi	ch were not listed on	
	the prior Form 990 o	or 990-EZ?				🗌 Yes 🗸 No
	•	ese new services on Sc				
3	Did the organization	cease conducting, or r	nake significant	changes in how it conduc	cts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the					
4	Section 501(c)(3) an		ons are required	to report the amount of	argest program services, as meas grants and allocations to others,	
4a	(Code	) (Expenses \$	44,360,747	ıncludıng grants of \$	186,300 ) (Revenue \$	21,799,034 )
	See Additional Data				, , ,	
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
	-					
4c	(Code	) (Expenses \$		ıncludıng grants of \$	) (Revenue \$	)
40	(Code	) (Expenses \$		including grants or \$	) (Revenue \$	,
	Other program servi	ces (Describe in Sched	ule O )			
-	(Expenses \$	•	luding grants of	\$	) (Revenue \$	)
4e	Total program serv		44,360,7	•		
	. 3	•	, -,.			Form <b>990</b> (2018)

	990 (2018)			Page <b>3</b>
Par	Checklist of Required Schedules		I	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C. Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?	5	Yes	
6	If "Yes," complete Schedule C, Part III 2	•	163	
	to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
	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		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or $X$ as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	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	Yes	
	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 📆	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15		No
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
		F	orm <b>99</b> 0	<b>0</b> (2018)

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 1. If "No. 10 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1. If "No. 10 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule 1. If "No. 10 and the sex exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule 1. If "No. 10 and		Checklist of Required Schedules (continued)			raye
23 Ves and former officers, directors, trustees, key employees, and highest compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines \$24b through \$24d and complete Schedule II. If "Yes," to time \$25b.  Did the organization ministian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year?  24d Did the organization and the state of the organization and the time of the organization and the state of the organization of the organization and the state of the organization of the organization and the state of the organization and the state of the organization organization of the organiz	rar	Checklist of Required Schedules (continued)		Ves	No
the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "We," go to line 25 a.  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding excrow at any time during the year of defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24c  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule L, Part I.  15b Is the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  15b Is the organization are that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior forms officers, directors, trustees, key employees, highest compensated employees, or place in the transaction has not been reported on any of the organizations prior forms officers, directors, trustees, key employees, highest compensated employees, or family member of any of these persons? If "Yes," complete Schedule L, Part II.  10b Id the organization party to a business transaction with one of the following parties (see Schedule L, Part IV.  10c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV.  12a Part IV.  12b Id the organization receive contributions of art, historical treasures, or other similar assets?  12c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule R. Part II.  12d Did the organization receive contributions of art, historical treasures, or other similar assets?  12d Part IV.  12d Did the organiza	23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			110
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year  24c  24d  25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization organization escribe that transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  15 Is the organization has not been reported on any of the organization's prior Forms 990 or 990-E2?  16 If "Yes," complete Schedule L, Part II  27 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, inglended person or any of these persons? If "Yes," complete Schedule L, Part II  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)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b In the organization receive more than \$25,000 in one-cash contributions? If "Yes," complete Schedule L, Part IV  29c The organization receive contributions of art, instructions? If "Yes," complete Schedule R, Part II  30 Did the organization one organization receive any passes of, or transfer more than \$25% of its net assets?  31 Did the organization one officer, director, trustee, or key employee? If "Yes," complete Schedule R, Part II  32 Did the organization one officer, director, trustee, or key employee (or a family member ther	24a	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and	24a		No
to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d    24d    24d    24d    24d    24d    25s    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 I, Part I    15 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization 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?  16 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, 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 "res," complete Schedule L, Part II.  18 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV    27 No at aurent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV    28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV    28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV    28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule N, Part II    29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I    29 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 an	b				
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 .  1 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization proof prome 990 or 990-E2? If "Yes," complete Schedule L, Part I .  2 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization proof proof 990-E2? If "Yes," complete Schedule L, Part II .  3 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 those persons? If "Yes," complete Schedule L, Part II .  3 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV .  3 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  3 A carrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  3 A carrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  4 A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M .  5 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .  5 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .  5 Did the organization of the schedule M, Part II .  5 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule M, Part II .  6 Ves II "Yes," complete Schedule M, Part	С		24c		
Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-E2?  If "Yes," complete Schedule L, Part II.  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, pubstantial 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.  Was the organization or produce 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.  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part II.  Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part II.  Did the organization or will only of an entity disregarded as separate from the organization under Regulations se	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If "Yes," complete Schedule L, Part II .  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 II .  8 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part II vinstructions for applicable filing thresholds, conditions, and exceptions)  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  28a N.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  28b N.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  28c Yes  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule M, Part II .  Did the organization osell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule M, Part II .  Did the organization osell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule M, Part II .  Did the organization osell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule M, Part II .  Did the organization osell ose of the security of the part II is a security of the part II is a security of the part II is a securit	b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		No
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.  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A nentity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  Bit 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 contributions? If "Yes," complete Schedule M.  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II.  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II.  A Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 T701-2 and 3	6	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?	26		No
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28a N  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28b N  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  28b N  28c Yes  29c Yes  20c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	7	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		No
Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  C An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  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 contributions? If "Yes," complete Schedule N, Part I  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  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  Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  To Did the organization on the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  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 V, lines 1  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  Statements Regarding Other IRS Filings and Tax Complainance	8				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  p Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  p Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  p Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II.  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part III, III, or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  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  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 V, line 2  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	а	<b>46.1</b>	28a		No
officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.  28c Yes  19 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.  29 Yes  10 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.  29 Yes  10 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.  20 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  21 If "Yes," complete Schedule N, Part II.  21 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.  22 Did 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  23 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  25 Did the organization have a controlled entity within the meaning of section 512(b)(13)?  26 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  26 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  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  28 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.  29 All Form 990 filers are required to complete Schedule O  30 Nother and the organization and that is treated as a partnership for federal income tax purposes? If "Yes," com	b	A& 1	28b		No
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	С		28c	Yes	
contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  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  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  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  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  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  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  Statements Regarding Other IRS Filings and Tax Compliance	9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
2 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II .  3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	0		30		No
32 N  32 N  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
33 N  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	2	If "Yes," complete Schedule N, Part II	32		No
Part V, line 1		301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
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	4	AA 1	34	Yes	
within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			35a	Yes	
organization? If "Yes," complete Schedule R, Part V, line 2	b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 **	35b	Yes	
Is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	6	organization? If "Yes," complete Schedule R, Part V, line 2	36		
All Form 990 filers are required to complete Schedule O		is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🕏	37		No
	8	All Form 990 filers are required to complete Schedule O	38	Yes	
Chack if Schodula O contains a response or note to any line in this Bort /	Pai				
		Check if Schedule O contains a response or note to any line in this Part V	• ;		✓ No

1b

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

**1**c

Yes

7с

7e 7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

Yes

Form 990 (2018)

No

7d |

10a 10b

11a

11b

12b

13b

13c

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file

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

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

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

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

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

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

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

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

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

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

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

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

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

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

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

d If "Yes," indicate the number of Forms 8282 filed during the year . . . .

Sponsoring organizations maintaining donor advised funds.

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

Section 501(c)(7) organizations. Enter

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

Page 6

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions	" resp	onse to	lines
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 10			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
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	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	ı
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			

	p	1 1		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	,
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	·.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to 12b Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in 12c Yes 13 13 Yes 14

Did the organization have a written document retention and destruction policy? . . . . . . . . . . . . . . . . 14 Yes 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? 10 18

а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
	status with respect to such arrangements?	16b	Yes	
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AL , AR , CA , CT , DC , FL , GA , HI , IL , F , MS , MO , NH , NJ , NY , NC , PA , RI , SO WI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ 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 ►ERICA SACCOIA SVP-FINANCE 421 AVIATION WAY Frederick, MD 21701 (301) 695-2000			
		F	orm <b>99</b> 0	(2018)

(16) THOMAS B HAINES

(17) KATIE AM PRIBYL

SVP - MEDIA & OUTREACH

SVP-AVIATION STRATEGY/PROGRAMS

Part VII 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)
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trus compensated employees, and former such person	stees or directo									
Check this box if neither the organization no		raanızat	ion c	omp	ens	ated a	any (	current officer, dire	ctor, or trustee	
(A)  Name and Title	(B) Average hours per week (list any hours	Positio tha pers	n (do an on on is	(C) not e bo both	) t che ox, u n an		ore	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	_				- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) WILLIAM C TRIMBLE III CHAIRMAN	1 0	×		×				0	0	0
(2) LUKE R WIPPLER TRUSTEE	1 0	×						0	0	0
(3) HERMAN NEEL HIPP JR TRUSTEE	1 0	х						0	0	0
(4) MATTHEW J DESCH TRUSTEE	1 0	х						0	0	0
(5) BURGESS H HAMLET III TRUSTEE	1 0	×						0	0	0
(6) DARRELL W CRATE VICE CHAIRMAN	1 0	х		×				0	0	0
(7) LAWRENCE D BUHL III TRUSTEE	1 0	×						0	0	0
(8) JAMES G TUTHILL JR TRUSTEE	1 0	х						0	0	0
(9) MARK R BAKER PRESIDENT/CEO	40 0 10 0	x		×				1,378,005	0	34,270
(10) AMANDA C FARNSWORTH TRUSTEE	1 0	х						0	0	0
(11) JAMES N HAUSLEIN TREASURER	1 0	×		х				0	0	0
	1.0				1	1 '				1

1 0 (12) WILLIAM S AYER Х 0 0 Trustee 0 0 40.0 (13) KENNETH M MEAD Χ 598,076 24,646 EVP/GENERAL COUNSEL 10 0 40 0 (14) ERICA J SACCOIA Х 287,474 0 20.549 SVP-FINANCE 10 0 40 0 (15) TIMOTHY J FORTUNE Х 427,616 0 438,427 Chief Administrative Officer 10 0 40 0

. . . . . . . . . . .

0.0 40 0

0 0

Χ

Х

358,529

326,190

32,626

25.039

Form 990 (2018)

0

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 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 Name and Title

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Estimated

Yes

Nο

1,072,028

857,267

578,114

504,286

295,702

Form 990 (2018)

(C)

Compensation

5

Description of services

Magazine Printing

Print/Mail Services

**Event Production** 

Print/Mail Services

Fulfillment

Page 8

	Name and Tide	hours per week (list any hours director/trustee)  hours per than one box, unless person compensation from relation any hours director/trustee)  hours per than one box, unless person compensation from relation organization (W- o				compensation from related organizations	amount of compen	of other sation the				
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	MISC)	organizat relat organiza	:ed
(18) JAI	MES W COON	40 0					×		501,073	C		23,295
SVP-GO	OVERNMENT AFFAIRS	0.0	••••				^		301,073	C	<u>'</u>	23,293
` '	OHN D HAMILTON	40 0							242.010	C		10.262
	ormation Technology	0.0	••••				×		243,819	·	,	18,263
( ) · · · -	CHARD G MCSPADDEN	40 0					×		245 520	C		19,053
	ve Director-ASI	0 0							245,529		<u>'</u>	
с То	ub-Total	/II, Section A .				1			4,366,311	0	1	636,168
2	Total number of individuals (including but of reportable compensation from the orga	t not limited to t				/e) \	vho re	ceiv	· · · · · ·	,000		
											Yes	No
	Did the organization list any <b>former</b> offici line 1a? <i>If "Yes," complete Schedule J for</i>									nployee on		No
	For any individual listed on line 1a, is the organization and related organizations gro									he		

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Position (do not check more

Reportable

Reportable

Average

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

1

Quad Graphics Inc,

PO Box 842858 BOSTON, MA 022842858 Navistar Direct Marketing LLC,

4612 Navistar Dr FREDERICK, MD 21703 Mach2 Management Inc,

PO Box 809 FOREST, VA 24551 Pro List Inc,

160 School Street Suite 3 VICTOR, NY 14564 Valtım Marketing Services,

4510 Buckeystown Pike Unit M FREDERICK, MD 21704

Section B. Independent Contractors

compensation from the organization ▶ 21

services rendered to the organization  $^{2}$  If "Yes," complete Schedule J for such person .

Name and business address

Part	VIII	Statement of	Revenue								
		Check if Schedul	le O contains a i	respo	onse or note to any l	(/	nis Part VIII A) revenue	Re e fu	(B) lated or xempt unction evenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ທ	1:	a Federated campaig	ns	1a				16	evenue		312 - 314
unts		<b>b</b> Membership dues		<b>1</b> b							
Gra mo		<b>c</b> Fundraising events		1c							
Ę, Ā		<b>d</b> Related organizatio	ons	<b>1</b> d	5,700,000						
ni <u>G</u>		e Government grants (c	ontributions)	1e	19,000						
Sin S		f All other contributions and similar amounts n	ot included								
Contributions, Gifts, Grants and Other Similar Amounts		above  9 Noncash contribution in lines 1a - 1f \$		1f	489,824 6,599						
Con		h Total. Add lines 1a	-1f								
					Business	Code	6,208,824				
Re	<b>2</b> a	MEMBERSHIP DUES				900099	19,	720,439	19,720,4	39	
Service Revenue		AIRPORT DIRECTORY &	DATA			900099	:	349,987	349,9	87	
<u>م</u>	c	AOPA FLY-INS				900099		509,088	509,0	88	
Ę.	d	EDUCATIONAL COURSE	S			900099	1,3	219,520	1,219,5	20	
S.	_										
Program	f	All other program se	rvice revenue								
Ĕ		<b>Total.</b> Add lines 2a-2			21,7	99,034					
		Investment income (i			nterest, and other	1		T			
	9	sımılar amounts) .		•	<b>•</b>		581,47	4		57,946	523,528
		Income from investment Royalties		pt bo	ond proceeds	<u> </u>	2,593,74	1			2,593,741
	3	Royaldes	(ı) Real	•	(II) Personal	<u> </u>	2,333,71	1			2,333,711
	6a	Gross rents	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(,						
		Less rental expenses		,585 ,276							
		Less Tental expenses	01-	,,2,0							
	(	Rental income or (loss)	-596	,691	0						
	c	Net rental income o	r (loss)			1	-596,69	1			-596,691
			(ı) Securitie	s	(II) Other						
	7a	Gross amount from sales of assets other than inventory	33,963	,499	3,666,000						
	t	Less cost or other basis and sales expenses	31,685		3,604,474						
		Gain or (loss)	2,278		61,526	ļ	2 220 35	_			2 220 757
		d Net gain or (loss) . Gross income from f			<u> </u>	<u> </u>	2,339,75	<del>\</del>			2,339,757
Other Revenue		(not including \$ contributions reporte See Part IV, line 18	of ed on line 1c)		0						
æ		Less direct expense		ь	0	]					
the		: Net income or (loss) • Gross income from g		-	ents •	1		4			
ō	u	See Part IV, line 19									
		• I I	_	a	0						
		Less direct expense Net income or (loss)		<b>b</b>   tiviti		]		٥			
		aGross sales of invent	tory, less								
		returns and allowand	ces	a	0						
	ŀ	Less cost of goods s	sold	ь	0						
		Net income or (loss)		١	ory	J		0			
		Miscellaneous			Business Code						
	11	LaCOST SHARING			900099		6,096,51	0			6,096,510
	ŀ	ADVERTISING INCO	ME		511190		6,556,99	2		6,556,992	
	ď	OTHER			900099		1,25	8			1,258
		A All ablance									
		d All other revenue .  Total. Add lines 11a			<u> </u>						
				•			12,654,76	0			
		<b>2 Total revenue.</b> See	manachons .		• • • •		45,580,89	9	21,799,034	6,614,938	10,958,103 Form <b>990</b> (2018)

	Pa	art IX	State	ement of	Functi	onal	Expenses
$\overline{}$				1 = 0 4 ( )			

Forr	n 990 (2018)				Page <b>10</b>
	art IX Statement of Functional Expenses tion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anızatıons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .	<u> </u>		<u> </u>
Do 7b,	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	<b>(D)</b> Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	186,300	186,300		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,800,112	2,659,801	140,311	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	17,286,215	15,465,344	1,820,871	
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	1,622,379	1,622,379		
9	Other employee benefits	729,866	694,017	35,849	
10	Payroll taxes	2,417,872	1,940,418	477,454	
11	Fees for services (non-employees)				
ā	a Management	0			_
ŀ	Legal	145,444	131,838	13,606	
(	: Accounting	277,239	255,006	22,233	
(	il Lobbying	30,000	30,000		
•	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	312,730		312,730	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,178,674	5,053,404	44,270	81,000
12	Advertising and promotion	966,707	966,557	150	
13	Office expenses	962,974	728,365	234,609	
	Information technology	1,976,248	745,271	1,230,977	
15	Royalties	0			
16	Occupancy	506,638	1,577	505,061	
	Travel	1,467,323	1,457,147	10,176	
	Payments of travel or entertainment expenses for any federal, state, or local public officials •	0		<u>`</u>	
19	Conferences, conventions, and meetings	2,494,534	2,460,149	34,385	
	Interest	239,441		239,441	
	Payments to affiliates	0			
	Depreciation, depletion, and amortization	2,257,646	1,766,273	491,373	
	Insurance	347,747	317,345	30,402	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O )	·	,	,	
	a PRINT/MAIL/POSTAGE/PREMIUM	3,794,335	3,581,168	81,538	131,629
	b MAGAZINE PRODUCTION	1,594,483	1,594,483		
	c RENTALS	1,164,331	1,026,900	137,431	
	d DUES LICENSES & SUBSCRIPTIONS	452,502	445,581	6,921	
	e All other expenses	1,484,133	1,231,424	252,709	
25	Total functional expenses. Add lines 1 through 24e	50,695,873	44,360,747	6,122,497	212,629
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				
	Check here F 11 10110Willy 30F 30-2 (A3C 330-720)				

Forn	า 990	(2018)					Page <b>11</b>
Р	art X	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX			🗹
		·			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,101,310	1	671,439
	2	Savings and temporary cash investments .		[	0	2	0
	3	Pledges and grants receivable, net		,	0	3	0
	4	Accounts receivable, net			545,732	4	711,460
	5	Loans and other receivables from current and for trustees, key employees, and highest compense Part II of Schedule L	nployees Complete	0	5	0	
S	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organization voluntary employees beneficiary organizations Part II of Schedule L	s(c)(3)(B), and of section 501(c)(9) structions) Complete	0	6	0	
ssets	8	Inventories for sale or use		0	8	0	
As	9	Prepaid expenses and deferred charges	1,524,216	9	1,928,957		
	-	Land, buildings, and equipment cost or other		,	1,024,210		1,920,937
	lua	basis Complete Part VI of Schedule D	10a	30,274,625			
	Ь	Less accumulated depreciation	10b	20,311,178	14,600,760	10c	9,963,447
	11	Investments—publicly traded securities .		27,103,455	11	41,754,045	
	12	Investments—other securities See Part IV, line	55,161,408	12	50,329,208		
	13	Investments—program-related See Part IV, line	0	13	0		
	14	Intangible assets	836,378	14	0		
	15	Other assets See Part IV, line 11	3,859,891	15	3,849,065		
	16	Total assets. Add lines 1 through 15 (must equ	105,733,150	16	109,207,621		
	17	Accounts payable and accrued expenses			4,957,815	17	5,319,526
	18	Grants payable		0	18	0	
	19	Deferred revenue			12,023,224	19	12,002,788
	20	Tax-exempt bond liabilities			0	20	0
Š	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee					
<u> </u>		persons Complete Part II of Schedule L $$ .			0	22	0
	23	Secured mortgages and notes payable to unrela	ated th	rd parties	6,202,044	23	2,554,048
	24	Unsecured notes and loans payable to unrelated	d third	parties	0	24	0
	25	Other liabilities (including federal income tax, p and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		s to related third parties,	1,933,038	25	1,974,642
	26	Total liabilities. Add lines 17 through 25	ı		25,116,121	26	21,851,004
Fund Balances	27	Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33 Unrestricted net assets		80,617,029	27	87,356,617	
Sal	28	Temporarily restricted net assets			0	28	0
Þ	29	Permanently restricted net assets			0	29	0
FILE		Organizations that do not follow SFAS 117	(ASC	958),			
Assets or F	30	check here ▶ ☐ and complete lines 30 th Capital stock or trust principal, or current funds		34.		30	
set	31	Paid-in or capital surplus, or land, building or ed	uıpme	nt fund		31	
AS	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	

87,356,617

109,207,621 Form **990** (2018)

80,617,029

105,733,150

33

34

# Net As 33 34 Total net assets or fund balances . . 34 Total liabilities and net assets/fund balances .

3a

3b

No

Form 990 (2018)

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

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

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

Audit Act and OMB Circular A-133?

### **Additional Data**

Software ID:

Software Version:

EIN: 52-0636210

Name: Aircraft Owners & Pilots Association

Form 990 (2018)

### Form 990, Part III, Line 4a:

Since 1939, the Aircraft Owners and Pilots Association (AOPA) has worked to protect the freedom to fly for general aviation (GA) pilots in the United States More than 300,000 members rely on AOPA, as the world's largest aviation and membership association, to advocate for GA interests and keep flying safe, fun, and affordable AOPA works with members of Congress and at all levels of government to enhance safety, provide tools and resources for pilots, and ensure they get the most out of their flying Beyond just the pilot community. AOPA works to educate decision makers and the public about the benefits and value of general aviation flying. One of the association's main priorities is to make sure GA remains a viable form of transportation and recreation for future generations. AOPA provides its members with an extensive portfolio of benefits that can be grouped into five areas advocacy, pilot community development, education, events, and products and services ADVOCACY AOPA's advocacy arm is divided into groups responsible for legislative affairs, regulatory affairs, operations and international affairs, airports, and advocacy. Together these groups effectively manage the many issues that affect general aviation and support member interests. In 2018, thanks to AOPA's Government Affairs team and their ongoing work on issues that matter to pilots, AOPA was named a top advocacy organization by The Hill newspaper for the fifth year in a row AOPA's Government Affairs team led a coalition to defeat the threat of air traffic control privatization, a monumental challenge faced by AOPA that came to a close this year. With support from members, more than 200,000 letters, emails, and phone calls went out to Congress opposing H R 2997 Third class medical reform, known as BasicMed, continues to be an area of focus for AOPA BasicMed became the biggest advocacy accomplishment in decades for AOPA and GA pilots- a huge victory considering only 4 percent of bills ever become law. By the end of 2018, over 43,000 pilots had been cleared to fly under the new medical certification, far surpassing expectations. In addition to AOPA's efforts on the federal level, the association has a network of seven regional managers and more than 1,400 Airport Support Network volunteers who help keep AOPA informed about the issues affecting general aviation in their communities. Working through our volunteers, regional managers, and headquarters-based staff, AOPA promotes, protects, and defends community airports, advocates to maintain sufficient state and local funding for GA airports and infrastructure, works to prevent excess state taxation on flying, and protects general aviation pilots from unnecessary or inappropriate state and local regulation. YOU CAN FLY AOPA has developed programs to support flying clubs, encourage best practices in flight training, get lapsed pilots back in the air, bring AOPA's resources and expertise to pilot groups across the country, and invite high school students to learn more about careers in aviation and aerospace. Flying clubs are a valuable part of the aviation landscape. AOPA's Flying Club Network is free to join and offers benefits including a premium listing in the AOPA Flying Club Finder, exclusive insurance rates, and access to networking events. The Network now has more than 700 listed flying clubs. AOPA's Rusty Pilots program lowers the barrier to re-entry and provides lapsed pilots a way to return to flying in a matter of hours through a free session of ground school that fulfills the FAA's flight review requirement for ground instruction. In addition, an online Rusty Pilots course was launched on September 1, 2018 to reach members where the in-person courses are not a viable option. The mission of AOPA's Aviation High School initiative is to help build and sustain aviation-based STEM programs in high schools in order to provide a quality workforce to the aviation industry. By working with schools directly, AOPA can expose and engage a more diverse group of students in aviation More than 20 high school students were awarded flight training scholarships for \$5,000 each in July EDUCATION Educating our members about the issues that affect their flying has always been at the core of AOPA's mission. Today, AOPA produces two monthly magazines, numerous electronic newsletters, a weekly video news program, streaming video, multiple web sites, meetings, and events all with the goal of educating and informing our members, the larger aviation community, and the public AOPA also communicates with and educates its members by providing both unparalleled breadth and depth of online resources that are continuously being updated to improve their compatibility with smart phones and mobile devices across multiple platforms. AOPA Online gives members round-the-clock access to news, information, flight planning resources, aircraft ownership tools, and more. For newcomers to flying, AOPA Online offers detailed information about the process and requirements for learning to fly, help finding a flight instructor and aviation medical examiner, an in-depth guide to choosing a training aircraft, and information about aviation careers. Pilots with more experience may want to take advantage of information about earning advanced ratings and certificates as well as transitioning to high performance aircraft, turboprops, and iets. For children, AOPA Online offers a collection of youth education resources that link aviation to math, science, physics, history, and technology. In addition to the online products, printed materials are available to teachers and pilots at no charge EVENTS AOPA's regional fly-ins continue to mature, engaging nearly 24,000 members and enthusiasts this year. In 2018, the Outreach team launched four all-day intensive workshops on Fridays before each fly-in. In addition to our regional fly-ins AOPA continues to expand its presence at the two major GA air shows held each year, Sun N Fun in Lakeland, Florida and AirVenture in Oshkosh, Wisconsin, as well as Women in Aviation and NBAA PRODUCTS AND SERVICES AOPA members have access to a wide range of products and services from the association and its partners. With a team of dedicated service specialists, AOPA has the resources to answer virtually any aviation-related question members may have When a member has an aviation-related question, they can call the AOPA Pilot Information Center to get fast and accurate answers. With a team of flight instructors, airline transport rated pilots, aviation mechanics, digital product specialists, aviation medical specialists, and other aviation experts on call, the Pilot Information Center takes pride in assisting AOPA members with any aviation query. AIR SAFETY INSTITUTE The AOPA Air Safety Institute (ASI) promotes safety and pilot proficiency in general aviation through quality training, education, research and analysis Since 1950, the GA accident rate has decreased by 90 percent, in no small part because of free safety education provided by the Air Safety Institute ASI creates and delivers a wide variety of online educational programs - safety videos, accident case studies, podcasts, live seminars, and flight instructor refresher courses among others 2018 was another record-breaking year for ASI's outreach, which exceeded 5.7 million uses of online and in-person safety programs-a 57 percent increase. Furthermore, ASI's impact on general aviation safety in 2018 through its education, research, and outreach contributed to an accident rate of 89 per 100,000 flight hours-a slight increase from but below the FAA's not-to-exceed target of 1 accident per 100,000 flight hours 2018 was also highlighted by the introduction of ASI's Focused Flight Review-a new scenario-based flight review curriculum developed in collaboration with industry partners that focuses on a variety of operational areas to improve fundamental stick-andrudder skills, decision making, understanding of aircraft operating envelopes, technologies, aircraft performance capabilities, and loss-of-control avoidance

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

# Political Campaign and Lobbying Activities

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

OMB No 1545-0047

DLN: 93493289001439

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

5

SCHEDULE C (Form 990 or 990-

> ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Aircraft Owners & Pilots Association 52-0636210 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2

Grassroots ceiling amount

activity

Volunteers?

1

b

Part IV

Return Reference

(b)

Amount

(a)

No

Yes

5

#### Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 Yes 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? No Did the organization agree to carry over lobbying and political expenditures from the prior year? No Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

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

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Taxable amount of lobbying and political expenditures (see instructions)

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

Supplemental Information

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

(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 <u>www.irs.gov/Form990</u> for the latest information.

**DLN: 93493289001439**OMB No 1545-0047

2018

Open to Public Inspection

	me of the organization craft Owners & Pilots Association				Emple	oyer identification number
					- 1	36210
Pa	Organizations Maintaining Donor Advi				or Acco	unts.
	Complete if the organization answered "Ye			sed funds	,	b)Funds and other accounts
1	Total number at end of year	(a) Bollo	uuv	Jed rando		by and and other decounts
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 advisor	rs in writing that th	0.300	ets held in donor a	l dviced fu	nds are the
	organization's property, subject to the organization's ex	clusive legal contro	?			☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?					
Pa	rt III Conservation Easements. Complete if the	ne organization a	rswe	red "Yes" on For	n 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the orga	nızatıon (check all t	hat a	pply)		
	$\square$ Preservation of land for public use (e g , recreation	n or education)		Preservation of ar	historic	ally important land area
	Protection of natural habitat			Preservation of a	certified	historic structure
	☐ Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservat	on co	entribution in the fo	rm of a <u>c</u>	conservation  Held at the End of the Year
а	Total number of conservation easements				2a	neid at the End of the Year
b	Total acreage restricted by conservation easements				2b	
c	Number of conservation easements on a certified histori	c structure included	ın (a	)	2c	
d	Number of conservation easements included in (c) acqu			•	2d	
	structure listed in the National Register					
3	Number of conservation easements modified, transferre tax year ▶	ed, released, exting	ıısne	a, or terminated by	tne orga	inization during the
4	Number of states where property subject to conservation	n easement is loca	ed 🕨			
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		ng, ır	spection, handling	of violati	ons,
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of vi	olatio	ns, and enforcing c	onservat	
7	Amount of expenses incurred in monitoring, inspecting,  \$ \\$	handling of violation	ns, a	nd enforcing conser	vation e	asements during the year
8	Does each conservation easement reported on line 2(d) and section $170(h)(4)(B)(II)^{2}$	above satisfy the r	equir	ements of section 1	70(h)(4)	(B)(I)
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the org				
Pai	<b>Triangment of the Organizations Maintaining Collections</b> Complete if the organization answered "Yes				er Sim	ilar Assets.
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finar	public exhibition, e	ducat	ion, or research in		
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items					
(	(i) Revenue included on Form 990, Part VIII, line 1					▶\$
C	ii)Assets included in Form 990, Part X					<b>▶</b> \$
2	If the organization received or held works of art, histori following amounts required to be reported under SFAS				ıncıal gaı	· ·
а	Revenue included on Form 990, Part VIII, line 1		٠, ٠	-		<b>▶</b> \$
b	Assets included in Form 990, Part X					▶\$
For	Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.		Cat No.	52283D	Schedule D (Form 990) 201

Par	t III	Organizations M	aintaining Col	lections o	f Art, H	istori	cal T	reası	ıres, o	r Other	Similar As	sets (conti	nued)	
3		ng the organization's acq ns (check all that apply)	uisition, accessio	n, and other	records,	check a	any of	the fo	llowing t	that are a	significant u	ise of its coll	ection	
а		Public exhibition				d		Loan	or exch	ange prog	rams			
b		Scholarly research				е		Othe	r					
С		Preservation for future	e generations											
4		vide a description of the t XIII	organization's col	llections and	explain h	ow the	y furt	her the	e organı:	zation's ex	empt purpo	se in		
5		ring the year, did the org ets to be sold to raise fui									ular	☐ Yes	□ N	o
Pa	rt I\	Escrow and Cust Complete if the or X, line 21.			" on Forr	n 990	, Part	IV, lı	ne 9, o	r reporte	ed an amou	ınt on Form	990,	Part
1a		the organization an agent luded on Form 990, Part		an or other	intermedia	ary for	contri	bution	s or oth	er assets I	not	☐ Yes	□ <b>N</b>	0
ь	If "	Yes," explain the arrange	ement in Part XIII	and comple	ete the foll	lowing	table				А	mount		_
c	Beg	ginning balance		·		_				1c				_
d	Add	ditions during the year								1d				
е	Dıs	tributions during the yea	r							1e				_
f	End	ding balance								1f				_
2a	Did	the organization include	an amount on Fo	orm 990, Par	t X, line 2	1, for	escrov	v or cu	stodial a	account lia	bility?	☐ Yes	$\square$ N	o
b	If "	Yes," explain the arrange	ement in Part XIII	Check here	e if the ex	planatı	on has	s been	provide	d in Part )	KIII			
Pa	rt V	Endowment Fun	<b>ds.</b> Complete ıf	the organ	ızatıon a	nswer	ed "Y	es" or	n Form	990, Par	t IV, line 1	.0.		
	_			(a)Currer	it year	<b>(b)</b> Pi	rior yea	ır	(c)Two y	ears back	(d)Three yea	ars back (e)F	our yea	rs back
	-	nning of year balance .												
		ributions												-
		nvestment earnings, gair												
		its or scholarships			-									
е		er expenditures for faciliti programs	es											
f		inistrative expenses .												
		of year balance												
2	Pro	vide the estimated perce	ntage of the curr	ent vear end	l balance (	(line 1	ı. colu	mn (a	)) held a	as		I		
а		ard designated or quasi-e		,	·	` -		` .	,,					
ь	Per	manent endowment 🕨												
С	Ter	nporarily restricted endo	wment ►											
	The	e percentages on lines 2a	, 2b, and 2c shou	ıld equal 100	0%									
3а		there endowment funds	not in the posses	sion of the	organizatio	on that	are h	eld an	d admın	istered fo	r the			
	_	anization by unrelated organizations										2-(:)	Yes	No
	٠,	related organizations .					•					3a(i) 3a(ii)		
ь	٠,	Yes" on $3a(\pi)$ , are the re		ns listed as r	equired o	.     . n Sche	dule R	٠,				3b		
4		scribe in Part XIII the inte	<del>-</del>		•								<u>ı</u>	
Pa	rt VI													
	_	Complete if the or												
	υes	cription of property	(a) Cost or otl (investme		(b) Cost o	otner .	uasis (	omer)	(c) Acc	umulated o	lepreciation	( <b>a)</b> B	ook valu	e
1a	Land						1,2	25,480					1	,225,480
		lings						90,807			8,453,463			3,237,344
		ehold improvements												
		pment					2,9	24,872			1,995,213			929,659
	-	r					14,4	33,466			9,862,502			1,570,964

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )

Part VII Investments—Other Securities. Complete	ıf the organizatı	on answered "Yes" or	Pa Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.			
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book v		(c) Method of valuation st or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests	· <del>                                    </del>		
A) ALTERNATIVE INVESTMENTS	50,3	329,208	F
3)			
5)			
0)			
Ξ)			
-)			
G)			
- <del>-</del>			
otal. (Column (b) must equal Form 990, Part X, col (B) line 12 )  art VIII Investments—Program Related.	▶ 50,3	329,208	
Complete if the organization answered 'Yes' or			
(a) Description of investment	<b>(b)</b> Boo	ok value Cos	(c) Method of valuation st or end-of-year market value
1)			·
2)		<del></del>	
3)			
4)			
5)			
6)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization answer	ered 'Yes' on Form	990, Part IV, line 11d	See Form 990, Part X, line 15
(a) Descrip			(b) Book value
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 15 )			
<b>Other Liabilities.</b> Complete if the organization See Form 990, Part X, line 25.	on answered 'Ye	s' on Form 990, Part	IV, line 11e or 11f.
. (a) Description of liability		(b) Book value	
1) Federal income taxes		02.256	
IRCRAFT RESERVES DEFERRED RENT LIABILITY		82,856 126,563	
IFETIME MEMBERSHIP LIABILITY		1,765,223	
4)			
5)			
5)			
7)			
8)			
9)			
otal. (Column (b) must equal Form 990, Part X, col (B) line 25 )	•	1,974,642	
<ol> <li>Liability for uncertain tax positions In Part XIII, provide the texpression of the provide the texpression of the provided that the provided the provided that the provided the provided the provided the provided that the provided that the provided the provided that the provided the provided the provided the provided the provided that the provided th</li></ol>		_	

Schedule D (Form 990) 2018

Pai		e <b>venue per Audited Financial Staten</b> Jization answered 'Yes' on Form 990, Pa		_	Return	
1		support per audited financial statements .			1	
2	Amounts included on line 1 but n	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	investments	2a			
b	Donated services and use of facili	nties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII ) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not include	ed on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII ) .		4b			
С	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12	) .		5	
Par	t XII Reconciliation of Ex	penses per Audited Financial State	ments	With Expenses pe	r Return.	
1		ization answered 'Yes' on Form 990, Pa			1	
2	Amounts included on line 1 but n				1	
		, ,	ء ا	I		
a	Donated services and use of facili		2a 2b		_	
b	Prior year adjustments		F		_	
С.	Other losses		2c		_	
d	Other (Describe in Part XIII )		2d		$\dashv$ $\Box$	
e	Add lines 2a through 2d				2e	
3					3	
4	· ·	Part IX, line 25, but not on line 1:	1.	I		
a	•	ed on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIII )		4b		<b>⊣</b> .	
С					4c	
5		4c. (This must equal Form 990, Part I, line 1	8).		5	
	t XIII Supplemental Info					
		Part II, lines 3, 5, and 9, Part III, lines 1a and s 2d and 4b Also complete this part to provide			art V, line 4, Pa	rt X, line 2, Part
	Return Reference		Ex	planation		
See A	Addıtıonal Data Table					
		+				

Page **4** 

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 52-0636210

Name: Aircraft Owners & Pilots Association

Supplemental Information

Return Reference	Explanation
FIN 48 FOOTNOTE - SCHEDULE D, PART X, LINE 2	The Association follows guidance that clarifies the accounting for uncertainty in tax positions taken or expected to be taken in a tax return, including issues relating to financia. I statement recognition and measurement. This guidance provides that the tax effects from an uncertain tax position can only be recognized in the financial statements if the position on is "more-likely-than-not" to be sustained if the position were to be challenged by a taxing authority. The assessment of the tax position is based solely on the technical merits of the position, without regard to the likelihood that the tax position may be challenged. The Association has processes presently in place to ensure the maintenance of its tax-ex empt status, to identify and report unrelated income, to determine its filing and tax obligations in jurisdictions for which it has nexus, and to identify and evaluate other matter shat may be considered tax positions. The tax years ending December 31, 2018, 2017, 2016 and 2015 are still open to audit for both federal and state purposes. The Association has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements.

SCHEDULE F	<b>-</b>						: 93493289001439
	Statem	ent of	OMB No 1545-0047				
(Form 990)	► Complete	ıf the organ	ızatıon answered "\	es" to Form 990, Part IV, I	ne 14b, 1	5, or 16.	2018
			► Attach t	o Form 990.			2010
Department of the Treasury Internal Revenue Service	<b>▶</b> Go	to www.irs.	gov/Form990 for II	nstructions and the latest in	ıformatıor	1.	Open to Public Inspection
Name of the organization						Employer ider	ntification number
Aircraft Owners & Pilots Ass	sociation					52-0636210	
	formation on Part IV, line 14		s Outside the U	<b>Inited States.</b> Comple	te if the	organization a	answered "Yes" to
1 For grantmakers.	Does the organ	nization ma	intain records to	substantiate the amount	of its gr	ants and	
other assistance, th	e grantees' elig	gibility for t	he grants or assis	stance, and the selection	criteria i	used	
to award the grants	or assistance?	,					☐ Yes ☐ No
2 For grantmakers. outside the United S		rt V the org	anızatıon's proce	dures for monitoring the	use of it	s grants and ot	her assistance
3 Activites per Region	(The following F	Part I, line 3	table can be dupli	cated if additional space is	needed )	)	
(a) Region		<b>b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a service, describe ecific type of ce(s) in region	(f) Total expenditures for and investments in region
(1) Central America and t	he	(	0	Investments			26,564,470
Caribbean ( 2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuation Part I c Totals (add lines 3a a			0 0				26,564,470 26,564,470

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . .

Schedule F (Form 990) 2018

(4) (5) (6)

(7) (8) (9) (10) (11)

(12) (13) (14) (15) (16)

(17) (18) Page 3

Schedule F (Form 990) 2018

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (h) Method of

(a) Type of grant of assistance	(b) Region	recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)							

	recipients	cash grant	aispursement	assistance	assistance	valuation (book, FMV, appraisal, other)
(1)						

(2) (3)

Sche	dule F (Form 990) 2018		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>☑</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)		
	Colporations (see Instructions for Form 54/1)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	<b>✓</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Institution for Form 5555)	☐ Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	∐ Yes	<b>✓</b> No

scneaule Fi	(Form 990) 2018	Page
Part V	amounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method expenditures per region); Part II, line 1 (accounting method); Part III (accounting mn (c) (estimated number of recipients), as applicable. Also complete this part to provide
	ReturnReference	Explanation

Schedule F (Form 990) 2018

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities** 

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

DLN: 93493289001439

**Employer identification number** 

Open to Public **Inspection** 

ırc	craft Owners & Pilots Association						52-0636210			
P	Fundraising Activi	•	_		answered "Yes" on Fo	orm 990,	Part IV, line 1	7.		
1	Indicate whether the organiza	tion raised funds thi	rough any	of the fo	ollowing activities Check	all that a	pply			
а	✓ Mail solicitations	✓ Mail solicitations e ✓ Solicitation of non-governm								
b	✓ Internet and email solicita	itions		f	Solicitation of gov	ernment <u>c</u>	grants			
c	Phone solicitations			g	Special fundraising	g events				
d	✓ In-person solicitations									
2a	Did the organization have a workey employees listed in For							s 🗆 No		
b	If "Yes," list the ten highest p to be compensated at least \$!			ndraisers)	pursuant to agreements	s under wh	nich the fundrais	er is		
i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	or refundra	nount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization		
1	Membership Mktg Partners	Advisor	Yes	<b>No</b> No			81,000			
2										
3										
4										
5										
6										
7										
8										
9										
LO										
ot	tal			<b></b>			81,000			
3	List all states in which the organ	nization is registered	or licens	ed to sol	cit contributions or has b	peen notifi	ed it is exempt f	rom registration or		

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MN, MS, MO, NH, NJ, NY, NC, ND, OH, OK, PA, RI, SC, TN, UT, VA, WA, WV, WI

Sche	dule G (Form 990 or 990-EZ) 2018					F	Page <b>3</b>		
11	Does the organization conduct gaming	activities with nonmembe	ers?		□Yes	□No			
12	Is the organization a grantor, beneficial formed to administer charitable gaming		a member of a partnership or other entity		□Yes				
13	Indicate the percentage of gaming acti	vity conducted in							
а	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 records								
	Name •								
	Address •								
15a	Does the organization have a contract revenue?	with a third party from wh	hom the organization receives gaming		□Yes	□No			
Ь		f "Yes," enter the amount of gaming revenue received by the organization > \$ and the mount of gaming revenue retained by the third party > \$							
c	If "Yes," enter name and address of the	e third party							
	Name ▶								
	Address ►								
16	Gaming manager information								
	Name ▶								
	Gaming manager compensation ▶ \$								
	Description of services provided ▶								
	☐ Director/officer	☐ Employee	☐ Independent contractor						
17	Mandatory distributions								
	•	e law to make charitable o	distributions from the gaming proceeds to		☐Yes	Пы			
b	Enter the amount of distributions requi		buted to other exempt organizations or spent  \$ \$		L Tes				
Par	t IV Supplemental Information	n. Provide the explana	ations required by Part I, line 2b, columns plicable. Also provide any additional infor				S.		
	Return Reference		Explanation	_					
Part : Partr	I, Line 2(b)(1) Membership Marketing iers	a fundraiser for AOPA Mo pertaining to AOPA meml during the year for variou	Mill Road, Suite 310 Fairfax, VA 22030 Members embership Marketing Partners was hired to prov bership notices Membership Marketing Partners us services Services for our membership marke undraising totaled \$81,000	/ide co s was p	nsulting ad paid a total	vice of \$158,9			

DLN: 93493289001439 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Aircraft Owners & Pilots Association 52-0636210 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (2)(4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Dat	a -	DLN: 9349	9328	9001	.439
Sch	edule J	C	ompensat	ion Information	ОМЕ	3 No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Kev Employees, and Highest						
		Complete if the ore		ated Employees vered "Yes" on Form 990, Part IV, lir	ne 23.	2()	18	}
Б	64 7		► Attach	to Form 990. instructions and the latest informat			o Pul	
•	tment of the Treasurv al Revenue Service	P Go to <u>www.ns.qc</u>	<u> </u>	mistractions and the latest mormat			ectio	
	ne of the organiza raft Owners & Pilots			En	nployer identification	on nu	mber	
				52	-0636210			
Pa	rt I Questi	ons Regarding Compensa	ition					
1a	Check the appro	oniate hov(es) if the organization	n provided any of	the following to or for a person listed o	n Form		Yes	No
Ia				y relevant information regarding these i				
		s or charter travel		Housing allowance or residence for per	rsonal use			
	_	companions	님	Payments for business use of personal				
		nification and gross-up payment	ts 📙	Health or social club dues or initiation f				
	☐ Discretion	nary spending account	Ц	Personal services (e g , maid, chauffeu	ir, chet)			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding paymen iplete Part III to explain	t or reimbursement	<b>1</b> b	Yes	
2				or allowing expenses incurred by all	.,	2	Yes	
	directors, truste	ees, officers, including the CEO/	executive Directo	r, regarding the items checked in line 1a	1			
3				ed to establish the compensation of the				
				not check any boxes for methods CEO/Executive Director, but explain in P	Part III			
		-		•				
		ation committee ent compensation consultant	<b>✓</b>	Written employment contract Compensation survey or study				
	·	of other organizations	<b>7</b>	Approval by the board or compensation	n committee			
_		-						
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the filing	g organization or a			
а	Receive a sever	ance payment or change-of-cor	itrol payment?			4a		No
b		r receive payment from, a supp		ified retirement plan?		4b		No
С	Participate in, o	r receive payment from, an equ	ity-based compe	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Part III	I			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-9				
5			-	the organization pay or accrue any				
	compensation c	ontingent on the revenues of						
а	The organization	n?				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section Ontingent on the net earnings o		the organization pay or accrue any				
а	The organization				<u> </u>	6a		No
b	Any related orga					6b		No
_	•	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Ye		the organization provide any nonfixed rt III		7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," desci	ribe	8	Yes	
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in Reg	gulations section	9	Yes	
For I	Danerwork Bedi	iction Act Notice, see the Inc	tructions for Fo	orm 990. Cat No 500	53T Schedule J (	Form	990)	2018

Schedule J (Form 990) 2018 Page 2 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 are not 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 (F) Compensation in (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns other deferred benefits (B)(i)-(D)column (B) reported (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 KENNETH M MEAD 417.619 (i) 165,820 14,637 0 0 598,076 EVP/GENERAL COUNSEL (ii) 2 ERICA J SACCOIA 224,077 (i) 60,679 2,718 18,673 1,876 308,023 SVP-FINANCE (ii) 3 TIMOTHY J FORTUNE 302,844 (i) 118,932 5,840 20,763 8,715 457,094 Chief Administrative Officer 408,949 408,949 (ii) 4 THOMAS B HAINES 267,308 (i) 80,686 10,535 20,725 11,901 391,155 SVP - MEDIA & OUTREACH (ii) 5 MARK R BAKER 893,749 (i) 437,500 46,756 20,763 13,507 1,412,275 PRESIDENT/CEO 6 8 9

	(ii)							
6 KATIE AM PRIBYL SVP-AVIATION	(i)	246,614	78,406	1,170	19,585	5,454	351,229	
STRATEGY/PROGRAMS	(ii)							
<b>7</b> JAMES W COON SVP-GOVERNMENT AFFAIRS	(i)	363,846	107,682	29,545	20,763	2,532	524,368	
	(ii)							
8 JOHN D HAMILTON VP-Information Technology	(i)	204,308	36,859	2,652	16,531	1,732	262,082	
	(ii)							
9 RICHARD G MCSPADDEN Executive Director-ASI	(i)	204,445	37,244	3,840	16,618	2,435	264,582	
	(ii)							
							Schedule	J (Form 990) 2018

Schedule J (Form 990) 2018	Page <b>3</b>				
Part III Supplemental Information					
Provide the information, explanation, or	descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information				
Return Reference	Explanation				

Return Reference	Explanation
,	THE COMPENSATION LEVELS AND SALARY RANGES FOR OFFICERS AND CERTAIN EMPLOYEES OF THE ORGANIZATION ARE ESTABLISHED BASED ON COMPETITIVE MARKET DATA OBTAINED THROUGH PERIODIC SALARY SURVEYS PERFORMED BY OUTSIDE COMPENSATION EXPERTS ENGAGED BY THE ORGANIZATION THESE INDEPENDENT SURVEYS PROVIDE GUIDANCE FOR ESTABLISHING REASONABLE COMPENSATION RATES AS COMPARED TO COMPENSATION PAID BY SIMILARLY SITUATED ORGANIZATIONS FOR POSITIONS OF SIMILAR SCOPE OF RESPONSIBILITY ALL POSITIONS ARE EVALUATED AND PLACED IN THE APPROPRIATE GRADES/SALARY RANGES AN INDIVIDUAL EMPLOYEE'S SALARY, WITHIN THEIR ASSIGNED RANGE, VARIES DEPENDING PRIMARILY UPON EXPERIENCE AND PERFORMANCE THE ORGANIZATION HAS ADOPTED A "PAY FOR PERFORMANCE" PHILOSOPHY ALLOWING MANAGERS TO AWARD MERIT INCREASES BASED ON AN INDIVIDUAL'S PERFORMANCE AGAINST PRE-ESTABLISHED GOALS THE ORGANIZATION'S ANNUAL MERIT INCREASE BUDGET IS APPROVED BY THE BOARD OF TRUSTEES BASED ON MARKET SURVEYS OFFICERS AND CERTAIN EMPLOYEES ALSO PARTICIPATE IN THE ORGANIZATION'S INCENTIVE PAY PROGRAM

Return Reference	Explanation
,	TARGET INCENTIVE AMOUNTS, AS A PERCENTAGE OF BASE SALARY, ARE ESTABLISHED BASED ON THE PARTICIPANT'S POSITION THE ACTUAL BONUS PAID IS PROPOSED BY THE EXECUTIVE MANAGEMENT TEAM AND THE PRESIDENT BASED ON THEIR ASSESSMENT OF THE PARTICIPANT'S INDIVIDUAL PERFORMANCE AND THAT OF THE ORGANIZATION AGAINST PRE-ESTABLISHED GOALS THE BOARD OF TRUSTEES AND COMPENSATION COMMITTEE REVIEW AND MAKE A FINAL DETERMINATION AS TO THE ACTUAL BONUS AMOUNT PAID TO PARTICIPANTS NONE OF THE PERSONS MENTIONED ABOVE PARTICIPATE IN THE DELIBERATION OF THEIR COMPENSATION ARRANGEMENT THE DELIBERATIONS AND DECISIONS OF THESE COMPENSATION ARRANGEMENTS ARE MAINTAINED IN CONTEMPORANEOUS DOCUMENTATION WITH OUR HUMAN RESOURCES DEPARTMENT

Return Reference	Explanation
,	THE PRESIDENT/CEO IS PAID PURSUANT TO A BOARD APPROVED EMPLOYMENT CONTRACT THAT WAS BASED ON COMPETITIVE MARKET DATA FROM OUTSIDE COMPENSATION EXPERTS

\_\_\_

2018 Schedule 1

### **Additional Data**

(11)

Additional Data	3							
			Software ID:					
			<b>Software Version:</b>					
			EIN:	52-0636210				
			Name:	Aircraft Owners & Pilo	ots Association			
Form 990, Schedule	J,	Part II - Officers, Di	rectors, Trustees, Ko	ey Employees, and H	lighest Compensate	d Employees		
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
KENNETH M MEAD EVP/GENERAL COUNSEL	(I)	417,619	165,820	14,637	0	0	598,076	
ERICA J SACCOIA SVP-FINANCE	(1)	224,077	60,679	2,718	18,673	1,876	308,023	
	(11)							
TIMOTHY J FORTUNE Chief Administrative Officer	(1)	302,844	118,932	5,840	20,763	8,715	457,094	
	(11)				408,949		408,949	
THOMAS B HAINES SVP - MEDIA & OUTREACH	(1)	267,308	80,686	10,535	20,725	11,901	391,155	
	(11)							
MARK R BAKER PRESIDENT/CEO	(1)	893,749	437,500	46,756	20,763	13,507	1,412,275	
	(11)							
KATIE AM PRIBYL SVP-AVIATION	(1)	246,614	78,406	1,170	19,585	5,454	351,229	
STRATEGY/PROGRAMS	(11)							
JAMES W COON SVP-GOVERNMENT AFFAIRS	(1)	363,846	107,682	29,545	20,763	2,532	524,368	
	(11)							
JOHN D HAMILTON VP-Information Technology	(1)	204,308	36,859	2,652	16,531	1,732	262,082	
	(II)							
RICHARD G MCSPADDEN Executive Director-ASI	(1)	204,445 	37,244	3,840	16,618	2,435	264,582	

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chedule L Form 990 or 990	-EZ) ► C	Complet	e if the org	anizati 28b, d	ion an or 28c	swered "Yes , or Form 99	on Form 9	d Persor 90, Part IV, li , line 38a or 4	nes 2	25a, 2	25b, 26		мв No <b>2</b> (		-0047 <b>Q</b>
epartment of the Tre			<b>⊳</b> Go t					st informatio	n.				Open	to Pi	ublic
ternal Revenue Serv Name of the org Aircraft Owners & F	anızatıon	tion								•	yer ide	entifica		oecti numb	
			•		•	, , ,,	, ,, ,,	501(c)(29) oi 25b, or Form	ganız	ations	only)	ne 40h			
	) Name of (	_		4 103		elationship be		lified person ar		(c) [	escript ansacti	on of	n of <b>(d)</b> Correc		
Part II Loa Cor rep (a) Name of	ans to an nplete if the orted an an (b) Relati	unt of tax, if any, on line 2, above  Is to and/or From Interest lete if the organization answered ted an amount on Form 990, Part (b) Relationship (c) Purpose of loan		ested red "Ye Part X, (d) L	d Persons. Yes" on Form 990-EZ, Part V, line 38a, (, line 5, 6, or 22  Loan to or from the organization?  (e)Original principal amount				90, Pa	(g) In default Approved board committe			(i)Written agreement?		
otal						•	\$								
	nplete if th	ne orga		swere between and	d "Yes	sted Person on Form S (c) Amount o	990, Part IV,	line 27.	of assi	stanc	:e	<b>(e)</b> Pu	rpose (	of assi	ıstance
								1			- 1				

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Si organiz rever	of zation's
				Yes	No
(1) Mark Baker Baker Planes LLC	President/Aircraft Rental	177,268	Aircraft Rental		No
(2) James Hauslein Rays Leasing LLC	Treasurer	3,650,000	Aircraft Purchase		No

**Supplemental Information** 

Provide additional information for responses to questions on Schedule L (see instructions)								
Return Reference	Explanation							
. ,	When appropriate, AOPA utilizes employee-owned aircraft for business purposes. Reimbursement for fuel & operating costs are based on industry determined rates dependent on type of aircraft. These types of aircraft are documented on contracts and help minimize the on-going costs of maintaining an							

organization owned fleet Schedule I (Form 990 or 990-F7) 2018

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493289001439 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Aircraft Owners & Pilots Association 52-0636210 **Types of Property** (b) (c) (d) (a) Method of determining Check if Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests Books and publications Clothing and household goods . . . . . Cars and other vehicles 104,940 FMV Boats and planes . . Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . Qualified conservation contribution—Historic structures . . . . 14 Qualified conservation contribution—Other . Real estate—Residential . 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy . . . . 21 22 Historical artifacts . . . 23 Scientific specimens . 24 Archeological artifacts . . 1,659 FMV 25 Other ▶ ( Χ Simulator ) 26 Other ▶ ( \_ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Νo **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page <b>2</b>									
Part II Supplemental Info										
	Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part									
	imber of contributions, the number of items received, or a combination of both. Also complete									
this part for any add	itional information.									
Return Reference	Explanation									
	Schedule M (Form 990) (2018)									

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SCHEDUL	ΕO	0		t- F 200 0	00 57	OMB No 1545-0047
(Form 990 or EZ)		Supplement Complete to pro Form 990 o	ons on	2018		
Department of the T	Treasury	▶ Go to <u>v</u>		Open to Public Inspection		
Name Brtherorg					Employer identi	fication number
Aircraft Owners & I	Pliots Associatio	n			52-0636210	
Return Reference				Explanation		
Part III, LINE 1	ZATION, EF NS, AND AF ULARITY O ATING ON I ORTING AC	FECTIVELY SERVES T RTICULATES POSITION F FLIGHT IN GENERAL BEHALF OF OUR MEM CTIVITIES THAT ENSUR	THE INTERESTS AND NOF LEADERSHIP T LAVIATION AIRCRAF BERS, EDUCATING F RE THE LONG-TERM	, A NOT-FOR-PROFIT INDIVIDU D NEEDS OF ITS MEMBERS AN O PROMOTE THE ECONOMY, IT AOPA PRESERVES THE FR PILOTS, NONPILOTS, AND POI HEALTH OF GENERAL AVIATI LING SUFFICIENT RESOURCES	ND ESTABLISHES SAFETY, UTILITY REEDOM TO FLY E LICY MAKERS ALI ION, FIGHTING TO	, MAINTAI AND POP BY ADVOC KE, SUPP D KEEP G

Return Explanation Reference

Part VI. There are two trustees (Mr. Trimble and Mr. Crate) who have a business relationship outsid SECTION A.

e of AOPA These two trustees are partners in the same company. Another trustee, Mr. Hausl LINE 2 ein, served on a board with Mr. Crate until June 2018

Return Explanation
Reference

990 Schedule O, Supplemental Information

PART VI,
Section A,
Lines 6 and

At the annual meeting of members, AOPA members in good standing are entitled to vote for t
he AOPA Board of Trustees AOPA members are entitled to one vote Each member entitled to
vote may do so either in person or by proxy

Explanation Return Reference

PART VI.  $^{\dagger}$  IN CONJUNCTION WITH GRANT THORNTON LLP TAX SPECIALISTS, AOPA MANAGEMENT REVIEWS THE FORM  $^{9}$ I 90 WITH THE AUDIT COMMITTEE PRIOR TO PRESENTING THE RETURN TO OUR BOARD OF TRUSTEES FOR RE Section B. VIEW Lines 11a

and 11b

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, Section B, Line 12c	THE AIRCRAFT OWNERS & PILOTS ASSOCIATION'S BOARD IS PROVIDED A WRITTEN "Code of Ethics, CO NFLICT OF INTEREST QUESTIONNAIRE AND DISCLOSURE FORM" ("FORM") THE FORM REQUIRES PERSONS COVERED (OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES) TO ANNUALLY DISCLOSE AND UPDATE THE FORM AND PROVIDE TO LEGAL COUNSEL INTERESTS THAT COULD GIVE RISE TO CONFLICT(S) LEGAL COUNSEL REVIEWS THE ANNUAL DISCLOSURES BY ALL COVERED PERSONS DISCLOSURES ARE REGULARY M ONITORED BY COUNSEL, ANY POTENTIALLY CONFLICTING OR OTHERWISE QUESTIONABLE RESPONSES ARE F LAGGED AND THE ETHICS POLICY IS ENFORCED

Return Reference	Explanation
PART VI, Section B, Lines 15a and 15b	THE COMPENSATION FOR THE PRESIDENT IS SET BY THE BOARD OF TRUSTEES AND COMPENSATION COMMIT TEE AND CONTRACTUALLY CONFIRMED THROUGH AN EMPLOYMENT AGREEMENT BETWEEN THE BOARD AND THE INCUMBENT THE BASE SALARY FOR THIS POSITION MAY BE ADJUSTED BY THE BOARD FROM TIME TO TIM E AT ITS SOLE DISCRETION THE PRESIDENT IS ALSO CONSIDERED ANNUALLY BY THE BOARD FOR AN IN CENTIVE BONUS WHICH IS A PERCENT OF BASE SALARY THE ACTUAL BONUS PAID IS DETERMINED BY TH E BOARD BASED ON ITS ASSESSMENT OF THE PRESIDENT'S PERFORMANCE AND THAT OF THE ORGANIZATIO N AGAINST APPROPRIATE GOALS SET BY THE COMPENSATION COMMITTEE AND THE PRESIDENT PERIODIC INDEPENDENT REVIEWS OF THE PRESIDENT'S COMPENSATION ARE CONDUCTED BY OUTSIDE COMPENSATION EXPERTS TO ENSURE THAT THE COMPENSATION PAID IS REASONABLE BASED ON APPROPRIATE DATA AS TO COMPARABILITY OF COMPENSATION PAID BY SIMILAR ORGANIZATIONS FOR POSITIONS OF SIMILAR SCOP E OF RESPONSIBILITY THE COMPENSATION LEVELS AND SALARY RANGES FOR OFFICERS AND CERTAIN EM PLOYEES OF THE ORGANIZATION ARE ESTABLISHED BASED ON COMPETITIVE MARKET DATA OBTAINED THRO UGH PERIODIC SALARY SURVEYS PERFORMED BY OUTSIDE COMPENSATION EXPERTS ENGAGED BY THE ORGAN IZATION THESE SURVEYS PROVIDE GUIDANCE FOR ESTABLISHING REASONABLE COMPENSATION RATES AS COMPARED TO COMPENSATION PAID BY SIMILARLY SITUATED ORGANIZATIONS FOR POSITIONS OF SIMILAR SCOPE OF RESPONSIBILITY ALL POSITIONS ARE EVALUATED AND PLACED IN THE APPROPRIATE GRADES (SALARY RANGES AN INDIVIDUAL EMPLOYEE'S SALARY, WITHIN THEIR ASSIGNED RANGE, VARIES DEPEN DING PRIMARILY UPON EXPERIENCE AND PERFORMANCE THE ORGANIZATION HAS ADOPTED A "PAY FOR PE RFORMANCE" PHILOSOPHY ALLOWING MANAGERS TO AWARD MERIT INCREASES BASED ON AN INDIVIDUAL'S PERFORMANCE AGAINST PRE-ESTABLISHED GOALS THE ORGANIZATION'S ANNUAL MERIT INCREASE BUDGET IS APPROVED BY THE BOARD OF TRUSTEES BASED ON MARKET SURVEYS OFFICERS AND CERTAIN EMPLOY ESS ALSO PARTICIPATE IN THE ORGANIZATION'S INCENTIVE PAY PROGRAM TARGET INCENTIVE AMOUNTS , AS A PERCENTAGE OF BASE SALARY, ARE ESTABLISHED BASED ON THE P

Return Explanation
Reference

PART VI,
Section B,
Lines 16a
and 16b

The organization does have a written management policy to evaluate all contracts and agree ments to ensure that all contract and joint venture arrangements are in accordance with fe deral, state, and local laws and related regulations. In addition, all joint venture agree ments are required to be reviewed by the organization's General Counsel. There were no Joint Venture agreements during the year.

## 990 Schedule O, Supplemental Information Explanation

Reference	Explanation
PART VI,	The organization does make available its conflict of interest policy, financial statements
Section C,	, Form 990 returns, and Form 1024 to the general public. The organization makes available
Lines 18 and	its governing documents to the extent required by law. The public can receive copies by co
19	ntacting the organization's headquarters Copies of the returns can be obtained at www aop
	a org/about-aona/governance and www.guidestar.org

Return Explanation
Reference

PART VII,
Hours
Mark Baker, Kenneth Mead, Erica Saccoia, and Timothy Fortune are full-time employees of Ai
rcraft Owners & Pilots Association (AOPA), although they devote approximately ten hours pe
r week to the related 501(c)(3) public charity organization. The AOPA Foundation, Inc
foundation,

990 Schedule O, Supplemental Information

Inc

Return Explanation

Reference PART XI.

This increase in net assets is the result of a \$20.750.000 dividend received from a wholly Line 9 -owned subsidiary offset by an \$836,378 goodwill impairment and a rounding adjustment

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** 

### **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

**Employer identification number** 

52-0636210

Open to Public Inspection

DLN: 93493289001439

OMB No 1545-0047

2018

Internal Revenue Service Name of the organization Aircraft Owners & Pilots Association

(Form 990)

Department of the Treasury

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a) (b) (c) (d) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations Complete If the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization (b) (c) (d) (g) Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1)THE AOPA FOUNDATION INC CHARITABLE MD 501(C)(3) AOPA Yes **421 AVIATION WAY** FREDERICK, MD 21701 20-8817225 (2) AOPA POLITICAL ACTION COMMITTEE PAC 527 N/A AOPA **421 AVIATION WAY** FREDERICK, MD 21701 56-3014117 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50135Y Schedule R (Form 990) 2018

Part III Identification of Related Orgone or more related organization				e if the org	janizatio	n ansv	wered "Y	es" on Form	1 990,	Part I\	/, line 34 b	ecau	se ıt	had	
(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	ng   income(related		(f) Share o total incor		Disprop	h) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	( <b>j)</b> eral or laging tner?		ntage
					J.	¬,			Yes	No		Yes	No		
												1			
Part IV Identification of Related Org because it had one or more related one one or more related one or more related organization		s a corporation ( Le dom (state o		st during th	ne tax ye	eār. (e	e) f entity S corp,	(f) Share of total income	Share	(g) of end-o year ssets	of- Perce	h) entage ership	s (:	(i) Section (13) con entit	512(b) trolled
(1)AOPA INSURANCE AGENCY	INSURANCE	М		AHC		C CORP		25,323,701	1 8,210,1		170 100 000		-	Yes	110
421 Aviation Way Frederick, MD 21701 52-1813554															
(2)AOPA HOLDINGS CORPORATION  421 AVIATION WAY FREDERICK, MD 21701 46-1036265	Holdings Corp	D	E	AOPA		C CORP		-893,207		3,323,26	100 0	00 %		Yes	
											Cahadula D	/E	00	0) 20	4.0

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			$t^-$
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	1
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f	Yes	
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	t
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	1
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	+
o Sharing of paid employees with related organization(s)	10	Yes	
p Reimbursement paid to related organization(s) for expenses	1p		No

Page 3

		- 1	1	1
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
0	Sharing of paid employees with related organization(s)	10	Yes	
р	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q	Reimbursement paid by related organization(s) for expenses	1q	Yes	
r	Other transfer of cash or property to related organization(s)	1r	Yes	
		4 -	1	T

1s | No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds See Additional Data Table (a) Name of related organization (b) Transaction type (a-s) (d) Method of determining amount involved (c) Amount involved

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

		<del></del>															
(a) Name, address, and EIN of entity	(b) Primary activity		(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)			(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
İ			514)	Yes	No	ļ ,		Yes	No		Yes	No					
		Schedule R (Form 990) 2018															



#### **Additional Data**

AOPA HOLDINGS CORPORATION

THE AOPA FOUNDATION INC

AOPA INSURANCE AGENCY

THE AOPA FOUNDATION INC

AOPA HOLDINGS CORPORATION

AOPA HOLDINGS CORPORATION

AOPA HOLDINGS CORPORATION

AOPA INSURANCE AGENCY

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

# Software ID: Software Version: EIN: 52-0636210

Name: Aircraft Owners & Pilots Association

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a)

(b)

Transaction
type(a-s)

(c)

Amount Involved
(d)

Method of determining amount involved

(1) THE AOPA FOUNDATION INC

5,094,214

1,059,230

4,486,903

79,229

5,721,451

1,799,407

20,750,000

91,371

R

L,N,O

Q

R

N,O,Q

Μ

F

FMV

FMV

FMV

FMV

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FMV

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