

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

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **09-01-2018**, and ending **08-31-2019**

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

C Name of organization
AMERICAN BANKERS ASSOCIATION

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
1120 CONNECTICUT AVE NW

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20036

D Employer identification number
52-1001304

E Telephone number
(202) 663-5054

F Name and address of principal officer
ROBERT S NICHOLS
1120 CONNECTICUT AVE NW
WASHINGTON, DC 20036

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

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

J Website: ▶ WW ABA COM

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1875

M State of legal domicile DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities (SEE SCHEDULE O) THE AMERICAN BANKERS ASSOCIATION IS A BUSINESS LEAGUE THAT PURSUES ADVOCACY, PROVIDES EDUCATION, PRODUCTS AND SOLUTIONS TO ITS MEMBERSHIP AND THE FINANCIAL SERVICES INDUSTRY GENERALLY

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

3 Number of voting members of the governing body (Part VI, line 1a)	31
4 Number of independent voting members of the governing body (Part VI, line 1b)	30
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	420
6 Total number of volunteers (estimate if necessary)	1,200
7a Total unrelated business revenue from Part VIII, column (C), line 12	1,465,332
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	662,300	983,315
9 Program service revenue (Part VIII, line 2g)	79,460,302	81,414,709
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,240,077	15,410,316
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,879,598	37,516,763
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	121,242,277	135,325,103
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	365,645	372,227
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	66,023,100	70,189,971
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	44,128,644	49,403,663
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	110,517,389	119,965,861
19 Revenue less expenses Subtract line 18 from line 12	10,724,888	15,359,242
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	218,048,967	224,230,935
21 Total liabilities (Part X, line 26)	139,711,719	177,375,232
22 Net assets or fund balances Subtract line 21 from line 20	78,337,248	46,855,703

Part II Signature Block

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

Sign Here

Signature of officer: *****
Date: 2020-07-12

KARIN PETERSEN FLYNN CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____

Check if self-employed PTIN P00369217

Firm's name ▶ RSM US LLP Firm's EIN ▶ 42-0714325

Firm's address ▶ 9801 WASHINGTONIAN BLVD STE 500
GAITHERSBURG, MD 20878 Phone no (301) 296-3600

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

(SEE SCHEDULE O)THE ABA'S MISSION IS TO BE A MEMBER-FOCUSED ORGANIZATION THAT PROVIDES ADVOCACY, EDUCATION, BUSINESS SOLUTIONS, AND FORUMS FOR AN EXCHANGE OF VIEWS AND INFORMATION THAT ASSISTS OUR MEMBERS IN PROVIDING FINANCIAL SERVICES TO THEIR COMMUNITIES IN COMPLIANCE WITH THE COMPLEX AND CHALLENGING REGULATORY AND STATUTORY ENVIRONMENT THAT GOVERNS THEIR OPERATIONS

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

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

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

If "Yes," describe these changes on Schedule O

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

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

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

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

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

4e Total program service expenses ►

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	No
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 to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26	No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	431
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 420			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a	Yes	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b	Yes	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8 Sponsoring organizations maintaining donor advised funds.				
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		15	Yes	
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16		No

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (31); 1b Enter the number of voting members included in line 1a, above, who are independent (30); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O (No)

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (No); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (Yes); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? (Yes)

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply
Own website Another's website [X] Upon request Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, address, and telephone number of the person who possesses the organization's books and records
BARRY EPSTEIN 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 (202) 663-5054

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	983,315		
	g Noncash contributions included in lines 1a - 1f \$ _____				
h Total. Add lines 1a-1f		983,315			

Program Service Revenue			Business Code			
	2a MEMBERSHIP DUES		813910	41,007,918	41,007,918	
b SCHOOL & IN-BANK TRAIN		813910	16,283,363	16,233,731		49,632
c CONFERENCE & CONVENTIO		813910	13,150,119	7,586,929	459,750	5,103,440
d DUES & FEES ARRANGEMEN		813910	6,008,744	6,008,744		
e PUBLICATIONS & SUBSCRI		813910	792,208	518,247	45,034	228,927
f All other program service revenue			4,172,357	4,125,547	46,810	
g Total. Add lines 2a-2f			81,414,709			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,915,162			1,915,162
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties			36,501,445		913,738	35,587,707
	6a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses			87,552,327			
	c Gain or (loss)			74,057,173			
	d Net gain or (loss)			13,495,154			13,495,154
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
b Less cost of goods sold	b		1,186,235				
c Net income or (loss) from sales of inventory			1,015,318	1,015,318			
Miscellaneous Revenue	Business Code						
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See Instructions			135,325,103	76,496,434	1,465,332	56,380,022	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	372,227			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	10,196,026			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.	42,557,287			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	9,981,568			
9 Other employee benefits.	4,140,414			
10 Payroll taxes.	3,314,676			
11 Fees for services (non-employees)				
a Management.				
b Legal.	1,274,824			
c Accounting.	130,775			
d Lobbying.	2,015,610			
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	506,643			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	13,833,014			
12 Advertising and promotion.	3,061,662			
13 Office expenses.	2,017,813			
14 Information technology.	1,846,052			
15 Royalties.	1,887,808			
16 Occupancy.	6,787,024			
17 Travel.	4,537,081			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	7,448,105			
20 Interest.	4,384			
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	2,279,604			
23 Insurance.	790,853			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SPONSORSHIP, MEMBERSHIP	971,190			
b PRINTING & PUBLICATIONS	889,589			
c FEDERAL & STATE TAXES	431,709			
d ALLOCATED OVERHEAD	-4,790,105			
e All other expenses	3,480,028			
25 Total functional expenses. Add lines 1 through 24e.	119,965,861			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	16,908,092	2	30,927,240
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	11,185,140	4	12,744,145
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	45,958	8	21,640
	9 Prepaid expenses and deferred charges	2,922,485	9	2,997,574
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 23,350,001		
	b Less accumulated depreciation	10b 16,786,762	5,171,558	10c 6,563,239
	11 Investments—publicly traded securities	149,507,945	11	138,437,643
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	32,307,789	15	32,539,454
16 Total assets. Add lines 1 through 15 (must equal line 34)	218,048,967	16	224,230,935	
Liabilities	17 Accounts payable and accrued expenses	9,696,576	17	12,357,337
	18 Grants payable		18	
	19 Deferred revenue	46,936,469	19	48,299,399
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	83,078,674	25	116,718,496
	26 Total liabilities. Add lines 17 through 25	139,711,719	26	177,375,232
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	78,337,248	27	45,313,987
	28 Temporarily restricted net assets		28	1,541,716
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	78,337,248	33	46,855,703	
34 Total liabilities and net assets/fund balances	218,048,967	34	224,230,935	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	135,325,103
2	Total expenses (must equal Part IX, column (A), line 25)	2	119,965,861
3	Revenue less expenses Subtract line 2 from line 1	3	15,359,242
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	78,337,248
5	Net unrealized gains (losses) on investments	5	-11,356,657
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-35,484,130
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	46,855,703

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

Additional Data

Software ID:

Software Version:

EIN: 52-1001304

Name: AMERICAN BANKERS ASSOCIATION

Form 990 (2018)

Form 990, Part III, Line 4a:

CONVENTION, CONFERENCES, SCHOOLS, PROFESSIONAL CERTIFICATIONS AND REMOTE LEARNING OPPORTUNITIES THE FINANCIAL SERVICES INDUSTRY IS A HIGHLY REGULATED INDUSTRY THAT REQUIRES CONSTANT EDUCATION ON THE CHANGING RULES INCLUDING NEW OR ENHANCED REGULATION, SUPERVISION AND OVERSIGHT ABA OFFERS OPPORTUNITIES FOR GAINING INSIGHT AND GREATER UNDERSTANDING THROUGH IN-PERSON MEETINGS, ONSITE SCHOOLS, CERTIFICATIONS AND AT-THE-DESK OFFERINGS INCLUDING TELEPHONE BRIEFINGS, WEBINARS AND INTERNET CLASSES

Form 990, Part III, Line 4b:

MEMBERSHIP RELATIONS AND COMMUNICATIONS ABA OUTREACHES TO ITS MEMBERSHIP THROUGH A NUMBER OF COMMUNICATION TOOLS INCLUDING DAILY EMAIL NEWS, WEEKLY SUMMARIES, ITS WEBSITE, AND BRIEFINGS ON THE CHANGING ADVOCACY AND REGULATORY ISSUES THESE EFFORTS FACILITATE THE DEVELOPMENT OF ABA'S POLICY POSITIONS AND PROVIDE THE MEMBERSHIP AND OTHERS WITH THE BACKGROUND AND TOOLS FOR FURTHER USE IN THEIR LOCAL COMMUNITIES

Form 990, Part III, Line 4c:

PUBLICATIONS, PRODUCTS AND SERVICES THE ABA OFFERS BOOKS, TOOL KITS, SEVERAL MAGAZINES, E-BULLETINS, AND A VARIETY OF PRODUCTS AND SERVICES IN AN EFFORT TO EDUCATE AND FACILITATE THE CONTINUED COMPLIANCE AND COMPETITIVENESS OF THE INDUSTRY IT SERVES

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Insttutchnal Trustee	Officer	Key employee	Highest compensated employee	Former			
JEFFREY M SZYPERSKI CHAIRMAN	1 00	X		X				0	0	0
LAURIE STEWART CHAIRMAN- ELECT	1 00	X		X				0	0	0
JAMES J EDWARDS JR VICE CHAIRMAN	1 00	X		X				0	0	0
LUTHER DEATON JR TREASURER	1 00	X		X				0	0	0
RICHARD M ADAMS JR BOARD MEMBER	1 00	X						0	0	0
STACEY J BENTLEY BOARD MEMBER	1 00	X						0	0	0
PEDRO A BRYANT BOARD MEMBER	1 00	X						0	0	0
KENNETH L BURGESS BOARD MEMBER	1 00	X						0	0	0
GREG D CARMICHAEL BOARD MEMBER	1 00	X						0	0	0
JILL CASTILLA BOARD MEMBER	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LUANNE CUNDIFF BOARD MEMBER	1 00	X						0	0	0
HOWARD M HEADLEE BOARD MEMBER	1 00	X						0	0	0
KRISTIE HOLOCH BOARD MEMBER	1 00	X						0	0	0
W WESLEY HOSKINS BOARD MEMBER	1 00	X						0	0	0
PATRICIA A HUSIC BOARD MEMBER	1 00	X						0	0	0
D BRYAN JORDAN BOARD MEMBER	1 00	X						0	0	0
BRYAN LUKE BOARD MEMBER	1 00	X						0	0	0
MATT C PACKARD BOARD MEMBER	1 00	X						0	0	0
BRADFORD C PAIGE BOARD MEMBER	1 00	X						0	0	0
DOUGLAS B PETNO BOARD MEMBER	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTOPHER W PINKHAM BOARD MEMBER	1 00	X						0	0	0
JAMES A REUTER BOARD MEMBER	1 00	X						0	0	0
DANIEL D ROBB BOARD MEMBER	1 00	X						0	0	0
DANIEL J SCHRIDER BOARD MEMBER	1 00	X						0	0	0
ANDREA B SMITH BOARD MEMBER	1 00	X						0	0	0
LOUISE WALKER BOARD MEMBER	1 00	X						0	0	0
PATRICIA W WEIGEL BOARD MEMBER	1 00	X						0	0	0
E PHILIP WENGER BOARD MEMBER	1 00	X						0	0	0
H MCCALL WILSON JR BOARD MEMBER	1 00	X						0	0	0
DANIEL C YATES BOARD MEMBER	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT S NICHOLS PRESIDENT AND CEO	36 50 1 00	X		X				2,831,782	0	314,178
ROBERT G EADY CHIEF FINANCIAL OFFICER	36 50 1 00			X				669,074	0	366,783
NAOMI CAMPER CHIEF POLICY OFFICER	37 50 1 00				X			357,143	0	44,957
PETER C COOK CHIEF COMMUNICATION OFFICER	36 50 1 00				X			483,782	0	63,667
ALETHIA BAGGETT CHIEF HR OFFICER	37 50 1 00				X			428,934	0	56,860
WAYNE ABERNATHY EXECUTIVE VICE PRESIDENT	37 50 1 00				X			950,802	0	553,647
JAMES G EDRINGTON EXECUTIVE VICE PRESIDENT	37 50 1 00				X			734,728	0	443,321
ROBERT SCHMERMUND EXECUTIVE VICE PRESIDENT	37 50 1 00				X			452,892	0	40,507
DAWN CAUSEY GENERAL COUNSEL	37 50 1 00					X		659,929	0	382,656
ROBERT R DAVIS EXECUTIVE VICE PRESIDENT	37 50 1 00					X		609,437	0	51,686

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMES BALLENTINE EXECUTIVE VICE PRESIDENT	37 50					X		509,453	0	744,587
KENNETH CLAYTON EXECUTIVE VICE PRESIDENT	37 50					X		491,547	0	670,671
JIM CHESSEN EXECUTIVE VICE PRESIDENT	37 50					X		447,827	0	746,366
JEFFREY OWEN FORMER CHIEF OPERATING OFFICER	37 50						X	427,361	0	784,574
CHRISTINE WALIKA FORMER EXECUTIVE VICE PRESIDENT	37 50						X	173,177	0	343,573
PAUL KATZ FORMER EXECUTIVE VICE PRESIDENT	37 50						X	410,769	0	52,049

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

OMB No 1545-0047

2018

Open to Public Inspection

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization AMERICAN BANKERS ASSOCIATION	Employer identification number 52-1001304
--	--

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ 662,956

3 Volunteer hours for political campaign activities (see instructions) 0

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ 662,956

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ 0

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ 662,956

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

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

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

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

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

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

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

Yes No

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

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

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

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	44,824,540
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	10,137,508
a Current year	2b	-2,002,052
b Carryover from last year	2c	8,135,456
c Total	3	13,102,992
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	5	-4,967,536
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
PART I-A, LINE 1	THE ORGANIZATION'S POLITICAL CAMPAIGN ACTIVITIES DURING THE TAX YEAR CONSISTED OF INDEPENDENT ADVERTISING CAMPAIGNS IN SUPPORT OF VARIOUS CANDIDATES FOR PUBLIC OFFICE
SCHEDULE C, PART III-B, LINE 1	FOR LOBBY REPORTING WE ADDED AN ADDITIONAL \$1,107,682 OF SERVICE MEMBERSHIPS WHICH IS INCLUDED IN PART VIII LINE 2D "DUES AND FEE ARRANGEMENTS AND \$2,708,940 OF NON-DEDUCTIBLE SPECIAL ASSESSMENTS WHICH IS INCLUDED IN PART VIII, LINE 2F "ALL OTHER PROGRAM SERVICE FEE REVENUE "

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
AMERICAN BANKERS ASSOCIATION

Employer identification number
52-1001304

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

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

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

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

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

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

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

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

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

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

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		11,066,342	8,753,105	2,313,237
d Equipment		6,842,742	3,670,439	3,172,303
e Other		5,440,917	4,363,218	1,077,699
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				6,563,239

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

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

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

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

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

(a) Description	(b) Book value
(1) RECEIVABLES FROM RELATED ORGANIZATION	4,180,788
(2) LIFE INSURANCE POLICIES	27,044,538
(3) COURSEWARE DEVELOPMENT	1,108,035
(4) SECURITY DEPOSIT	57,800
(5) CASH ADVANCES	58,488
(6) METROCHECK	14,805
(7) OTHER ASSETS	75,000
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	▶ 32,539,454

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

(a) Description of liability	(b) Book value
(1) Federal income taxes	
ACCRUED PENSION LIABILITY	104,026,749
DEFERRED RENT AND LEASE INCENTIVES	6,230,746
DEFERRED COMPENSATION	5,726,760
PAYABLES TO RELATED ORGANIZATION	734,241
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 116,718,496

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	125,807,257
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-11,356,657
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	2,187,733
e	Add lines 2a through 2d	2e	-9,168,924
3	Subtract line 2e from line 1	3	134,976,181
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	519,839
b	Other (Describe in Part XIII)	4b	-170,917
c	Add lines 4a and 4b	4c	348,922
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	135,325,103

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

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

1	Total expenses and losses per audited financial statements	1	157,308,935
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	37,862,913
e	Add lines 2a through 2d	2e	37,862,913
3	Subtract line 2e from line 1	3	119,446,022
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	519,839
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	519,839
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	119,965,861

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-1001304
Name: AMERICAN BANKERS ASSOCIATION

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	<p>ABA, ABASA AND BAFT ARE CLASSIFIED FOR TAX PURPOSES AS TAX-EXEMPT BUSINESS LEAGUES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE (IRC) ABACEF IS EXEMPT UNDER SECTION 501(C)(3) OF THE IRC AND IS CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN PROVIDED FOR THESE ENTITIES IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS, EXCEPT FOR THAT RESULTING FROM THE ASSOCIATION'S UNRELATED BUSINESS INCOME UNRELATED BUSINESS INCOME TAX EXPENSE WAS APPROXIMATELY \$434,000 FOR THE YEAR ENDED AUGUST 31, 2019 BANKPAC IS TAXED AT STATUTORY RATES ON ITS INVESTMENT INCOME, NET OF CERTAIN EXPENSES POLITICAL CONTRIBUTIONS RECEIVED ARE EXEMPT FROM INCOME TAXES UNDER IRC SECTION 527 BANKPAC HAD NO INCOME TAXES FOR THE YEAR ENDED AUGUST 31, 2019 CAB IS A SINGLE MEMBER LLC FOR FEDERAL AND STATE INCOME TAX PURPOSES, AND AS SUCH, IS TREATED AS A DISREGARDED ENTITY FOR INCOME TAX REPORTING PURPOSES THE FEDERAL AND STATE INCOME TAXES OF CARD ARE FILED ON A STAND-ALONE BASIS CARD HAD NO INCOME TAX EXPENSE FOR THE YEAR ENDED AUGUST 31, 2019 CBM IS A MULTI-MEMBER LLC AND FILES A DISTRICT OF COLUMBIA RETURN AND PAID THE MINIMUM TAX OF \$250 CAB IS TAXED ON ITS PROPORTIONAL SHARE OF FEDERAL INCOME REPORTED BY CBM MANAGEMENT EVALUATED THE ASSOCIATION'S TAX POSITIONS AND CONCLUDED THAT THE ASSOCIATION HAS TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE CONSOLIDATED FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE GENERALLY, THE ASSOCIATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2016</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	ELIMINATION ENTRY BETWEEN ABA AND CAB 2,187,733

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	COST OF GOODS SOLD REPORTED ON PART VIII LINE 10B -170,917

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	ELIMINATION ENTRY BETWEEN ABA AND CAB 2,207,866 COST OF GOODS SOLD REPORTED ON PART VII LINE 10B 170,917 PENSION-RELATED CHANGES OTHER THAN NET PERIODIC 35,484,130

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

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No 1545-0047

2018

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization

AMERICAN BANKERS ASSOCIATION

Employer identification number

52-1001304

Part I General Information on Grants and Assistance

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 9

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	ABA MAINTAINS RECORDS TO SUBSTANTIATE THE AMOUNT OF THE CHARITABLE CONTRIBUTIONS AS SHOWN ON PART II THE RECIPIENTS ARE SECTION 501(C)(3) ENTITIES AND ARE THUS ELIGIBLE FOR CHARITABLE CONTRIBUTIONS

Additional Data

Software ID:
Software Version:
EIN: 52-1001304
Name: AMERICAN BANKERS ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOLDEN VALLEY BANK COMMUNITY FOUNDATION 190 COHASSET ROAD CHICO, CA 95926	20-8398003	501(C)(3)	15,000				CA CAMP FIRE RELIEF DONATION
NORTH CAROLINA BANKERS ASSOCIATION FOUNDATION 3601 HAWORTH DRIVE RALEIGH, NC 27609	56-1391773	501(C)(3)	101,400				HURRICANE FLORENCE DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRI COUNTIES BANK EMPLOYEE DISASTER FUND 63 CONSTITUTION DR CHICO, CA 95973	94-2792841		15,000				CA CAMP FIRE RELIEF DONATION
UNITED WAY BAY AREA 550 KEARNY ST STE 1000 SAN FRANCISCO, CA 94108	94-1312348	501(C)(3)	15,000				CA CAMP FIRE RELIEF DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOLUNTEER FLORIDA FOUNDATION 3800 ESPLANADE WAY STE 180 TALLAHASSEE, FL 32311	01-0973168	501(C)(3)	100,000				HURRICANE MICHAEL DONATION
JEFFREY & DIANA OWEN SCHOLARSHIP FOR EMERGING COMMUNITY BANK LEADERS INC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036	82-3857091	501(C)(3)	50,000				SCHOLARSHIP FUND DONATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST OLAF COLLEGE 1520 ST OLAF AVE NORTHFIELD, MN 55057	41-0693979	501(C)(3)	15,000				THE MARK W OLSON ENDOWED SCHOLARSHIP
NCSL FOUNDATION FOR STATE LEGISLATURES 444 N CAPITOL ST NW SUITE 515 WASHINGTON, DC 20001	74-2232576	501(C)(3)	11,197				2019 SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEBRASKA COMMUNITY FOUNDATION 8100 SOUTH 15TH STREET SUITE A LINCOLN, NE 68512	47-0769903	501(C)(3)	25,000				NEBRASKA FLOOD RECOVERY EFFORT
NATIONAL MULTIPLE SCLEROSIS SOCIETY 1800 M STREET NW SUITE 750 SOUTH WASHINGTON, DC 20006	13-5661935	501(C)(3)	5,290				MS WALK 2019

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
AMERICAN BANKERS ASSOCIATION

Employer identification number
52-1001304

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
<input checked="" type="checkbox"/>	First-class or charter travel		
<input checked="" type="checkbox"/>	Travel for companions		
<input checked="" type="checkbox"/>	Tax indemnification and gross-up payments		
<input type="checkbox"/>	Discretionary spending account		
<input type="checkbox"/>	Housing allowance or residence for personal use		
<input type="checkbox"/>	Payments for business use of personal residence		
<input checked="" type="checkbox"/>	Health or social club dues or initiation fees		
<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III		
<input checked="" type="checkbox"/>	Compensation committee		
<input checked="" type="checkbox"/>	Independent compensation consultant		
<input type="checkbox"/>	Form 990 of other organizations		
<input type="checkbox"/>	Written employment contract		
<input checked="" type="checkbox"/>	Compensation survey or study		
<input checked="" type="checkbox"/>	Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	
b	Any related organization?	5b	
If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	
b	Any related organization?	6b	
If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

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
PART I, LINE 1A	FIRST-CLASS TRAVEL & TRAVEL FOR COMPANIONS CERTAIN OFFICERS OF THE ORGANIZATION (FIVE IN TOTAL) ARE ALLOWED TO FLY FIRST CLASS AND MAY BRING A COMPANION AT THEIR DISCRETION TAX INDEMNIFICATION AND GROSS-UP PAYMENTS CERTAIN MEMBERS OF EXECUTIVE LEADERSHIP INVOLVED IN SERP'S (DESCRIBED IN 4B BELOW) HAVE VESTED BUT UNPAID AMOUNTS INCLUDED IN COMPENSATION A GROSS UP OF 12 25% OF THE TAXABLE AMOUNT IS PAID TO THE EXECUTIVE SOCIAL CLUB DUES SOCIAL CLUB DUES ARE PROVIDED FOR BUSINESS USE ONLY

Return Reference	Explanation
PART I, LINES 4A-B	<p>PAUL KATZ RECEIVED SEVERANCE PAYMENT IN THE AMOUNT OF \$230,844 THIS IS INCLUDED IN SCHEDULE J, PART II, COLUMN B(III) THE ASSOCIATION PROVIDES NON-QUALIFIED RETIREMENT BENEFITS TO THE EXECUTIVE LEADERSHIP DESIGNED AS BENEFIT RESTORATION FOR THE QUALIFIED DEFINED BENEFIT AND DEFINED CONTRIBUTION PLANS SPONSORED BY THE ASSOCIATION THE FOLLOWING OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES PARTICIPATED IN A NONQUALIFIED SUPPLEMENTAL EMPLOYEE RETIREMENT PLAN AND/OR A SUPPLEMENTAL LIFE INSURANCE PLAN WITH ACCRUED PRESENT VALUE ESTIMATED BENEFITS FOR THE YEAR - ROBERT S NICHOLS \$265,800 - ROBERT G EADY \$88,172 - NAOMI G CAMPER \$500 - PETER COOK \$20,000 - ALETHIA BAGGETT \$14,500 - WAYNE ABERNATHY \$265,468 - JAMES G EDRINGTON \$145,936 - ROBERT SCHMERMUND \$1,118 - DAWN CAUSEY \$50,144 - ROBERT R DAVIS \$4,325 - JAMES BALLENTINE \$378,600 - KENNETH CLAYTON \$162,379 - JIM CHESSEN \$178,764 FOLLOWING EMPLOYEES RECEIVED A PAYMENT FROM SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN FOR THE CALENDAR YEAR 2018 - ROBERT G EADY \$128,128 - WAYNE ABERNATHY \$205,332 - JAMES G EDRINGTON \$166,264 - ROBERT SCHMERMUND \$14,582 - DAWN CAUSEY \$161,356 - ROBERT R DAVIS \$26,775 - KENNETH CLAYTON \$97,021 - JIM CHESSEN \$9,236 - PAUL KATZ \$111,702</p>



SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018**Open to Public Inspection**

Department of the Treasury

Name of the organization

AMERICAN BANKERS ASSOCIATION

Employer identification number

52-1001304

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE AMERICAN BANKERS ASSOCIATION (ABA) IS A 501(C)(6) NONPROFIT BUSINESS LEAGUE INCORPORATED IN THE DISTRICT OF COLUMBIA ITS MEMBERSHIP IS COMPOSED OF NATIONAL BANKS, STATE-CHARTERED BANKS, SAVINGS BANKS, SAVINGS AND LOAN ASSOCIATIONS, TRUST COMPANIES, AND OTHER BANKING ENTITIES SITUATED WITHIN THE UNITED STATES AND ITS DEPENDENCIES, THAT HAVE FILED AN APPLICATION FOR FEDERAL DEPOSIT INSURANCE CORPORATION INSURANCE OF ACCOUNTS ("REGULAR MEMBERS")

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OF THE ABA ANNUALLY ELECT THE ORGANIZATION'S OFFICERS AND BOARD OF DIRECTORS, WHICH ACTS AS THE ASSOCIATION'S GOVERNING BODY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	IN ADDITION TO THE ANNUAL ELECTIONS, MEMBERS VOTE ON MAJOR CORPORATE ACTIONS SUCH AS A MERGER OR ACQUISITION AND IN THE EVENT OF A POSSIBLE DISSOLUTION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	ABA'S MANAGEMENT, WHICH INCLUDES CERTIFIED PUBLIC ACCOUNTANTS, CONDUCTED SEVERAL INTERNAL REVIEWS OF THE FORM 990 RETURN PREPARED BY OUTSIDE ACCOUNTING FIRM A COPY OF THE FORM 990 INCLUDING ALL REQUIRED SCHEDULES WAS PROVIDED TO THE AUDIT COMMITTEE OF THE ABA IN ELECTRONIC FORM PRIOR TO ITS FILING WITH THE IRS PER ABA BOARD ADOPTED POLICY, THE AUDIT COMMITTEE WAS DELEGATED THE RESPONSIBILITY FOR REVIEWING THE TAX RETURN IN ADVANCE OF ITS FILING THE AUDIT COMMITTEE REPORTS TO THE ASSOCIATION'S GOVERNING BODY AND IS COMPRISED OF BOARD OF DIRECTOR MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ABA MONITORS AND ENFORCES ITS CONFLICTS OF INTEREST POLICY BY, AT LEAST ANNUALLY, HAVING EACH OFFICER, MEMBER OF THE BOARD OF DIRECTORS, AND ALL EMPLOYEES ATTEST BY SIGNATURE THAT THEY HAVE READ, UNDERSTAND, AND ARE IN COMPLIANCE WITH THE POLICY ON AN ANNUAL BASIS, THE BOARD IS PROVIDED A COPY OF THE POLICY, OFFERED AN OPPORTUNITY TO DISCUSS ITS REQUIREMENTS, AND HAVE ANY QUESTIONS ANSWERED STAFF ATTENDS THE MEETINGS OF THE BOARD IN ORDER TO MONITOR COMPLIANCE WITH THE REQUIREMENTS AND THAT THE MINUTES OF THE MEETINGS FAIRLY REPRESENT THE DISCUSSIONS OF THE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	ABA'S COMPENSATION COMMITTEE, COMPRISED OF BOARD OF DIRECTOR MEMBERS, IS RESPONSIBLE FOR REVIEWING THE COMPENSATION OF THE ASSOCIATION'S CEO, ITS OTHER OFFICERS AND ITS KEY EMPLOYEES AND MAKES THE FINAL COMPENSATION RECOMMENDATION TO THE BOARD OF DIRECTORS, WHICH HAS FINAL APPROVAL THE PROCESS USED BY THE COMPENSATION COMMITTEE IS MADE IN CONJUNCTION WITH AN OUTSIDE INDEPENDENT CONSULTING FIRM THAT CONDUCTED A COMPREHENSIVE COMPENSATION STUDY FOR THE ASSOCIATION THE METHODOLOGY USED INCLUDED THE FOLLOWING - UTILIZING SALARY SURVEYS, INCLUDING THOSE FROM MERCER, WATSON WYATT, PRM CONSULTING, QUATT ASSOCIATES AND ASAE, JOBS WERE BENCHMARKED TO COMPARABLE POSITIONS - THE OUTSIDE COMPENSATION CONSULTING FIRM REVIEWED APPLICABLE MARKET DATA AND THE BENCHMARKED POSITION INFORMATION AND DEVELOPED A MARKET-BASED PAY STRUCTURE - ADDITIONAL FACTORS CONSIDERED WERE POSITION REQUIREMENTS, ORGANIZATIONAL IMPACT, AND JOB COMPLEXITY - MINUTES ARE KEPT OF THE COMPENSATION COMMITTEE'S DELIBERATIONS AND DECISIONS REGARDING COMPENSATION ARRANGEMENTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	ABA DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR ITS FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THE ORGANIZATION'S FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	CONSULTANT 7,765,935 OUTSIDE SERVICES 6,067,079

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION-RELATED CHANGES OTHER THAN NET PERIODIC BENEFIT COSTS -35,484,130

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2018

**Open to Public
Inspection**

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

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
AMERICAN BANKERS ASSOCIATION

Employer identification number

52-1001304

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CORPORATION FOR AMERICAN BANKING LLC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 84-1724126	MARKETING	DE	3,777,472	10,678,919	AMERICAN BANKERS ASSOCIATION

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1)ABA COMMUNITY ENGAGEMENT FOUNDATION 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 83-0397856	EDUCATION	DC	501(C)(3)	LINE 12A, I	AMERICAN BANKERS ASSOCIATION	Yes	
(2)ABA SECURITIES ASSOCIATION 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 52-1935145	ADVOCACY	DE	501(C)(6)		AMERICAN BANKERS ASSOCIATION	Yes	
(3)BAFT INC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 11-3642835	EDUCATION, ADVOCACY	DE	501(C)(6)		AMERICAN BANKERS ASSOCIATION	Yes	
(4)INTERNATIONAL MONETARY CONFERENCE 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 23-7244320	INTERNATIONAL BANKING	DC	501(C)(6)		N/A		No
(5)ABA VEBA 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 52-1767808	RETIREE BENEFITS	DC	501(C)(9)		AMERICAN BANKERS ASSOCIATION	Yes	
(6)JEFFREY AND DIANA OWEN SCHOLARSHIP FOR EMERGING COMMUNITY BANK LEADERS INC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 82-3857091	EDUCATIONAL ACTIVITIES	DC	501(C)(3)	LINE 12A, I	AMERICAN BANKERS ASSOCIATION	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) COMMUNITY BANK MORTGAGE LLC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 84-1717504	SECONDARY MORTGAGE	DE	CAB	UNRELATED	-28,130	86,434		No	-28,130		No	50 000 %

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) ABA CARD SOLUTIONS INC 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036 36-3515025	BUSINESS SERVICES	DE	CORPORATION FOR AMERICA BANKING	C	1,261,268	8,127,451	100 000 %	Yes	

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

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

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

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)	(c) Amount involved	(d) Method of determining 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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-1001304
Name: AMERICAN BANKERS ASSOCIATION

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

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	ABA COMMUNITY ENGAGEMENT FOUNDATION (83-0397856)	N	75,799	ALLOCATION
(1)	ABA COMMUNITY ENGAGEMENT FOUNDATION (83-0397856)	O	398,932	ALLOCATION
(2)	ABA COMMUNITY ENGAGEMENT FOUNDATION (83-0397856)	Q	731,109	ACTUAL/CASH
(3)	ABA SECURITIES ASSOCIATION (52-1935145)	N	29,154	ALLOCATION
(4)	ABA SECURITIES ASSOCIATION (52-1935145)	O	297,949	ALLOCATION
(5)	ABA SECURITIES ASSOCIATION (52-1935145)	Q	498,670	ACTUAL/CASH
(6)	ABA SECURITIES ASSOCIATION (52-1935145)	S	437,000	ACTUAL/CASH
(7)	BAFT INC (11-3642835)	N	291,535	ALLOCATION
(8)	BAFT INC (11-3642835)	O	2,299,824	ALLOCATION
(9)	BAFT INC (11-3642835)	Q	4,402,843	ACTUAL/CASH
(10)	BAFT INC (11-3642835)	S	4,399,284	ACTUAL/CASH
(11)	INTERNATIONAL MONETARY CONFERENCE (23-7244320)	N	76,239	ALLOCATION
(12)	INTERNATIONAL MONETARY CONFERENCE (23-7244320)	O	163,649	ALLOCATION
(13)	INTERNATIONAL MONETARY CONFERENCE (23-7244320)	Q	843,821	ACTUAL/CASH
(14)	ABA CARD SOLUTIONS INC (36-3515025)	N	55,432	ALLOCATION
(15)	ABA CARD SOLUTIONS INC (36-3515025)	O	209,402	ALLOCATION
(16)	ABA CARD SOLUTIONS INC (36-3515025)	Q	679,373	ACTUAL/CASH
(17)	COMMUNITY BANK MORTGAGE LLC (84-1717504)	N	9,896	ALLOCATION
(18)	COMMUNITY BANK MORTGAGE LLC (84-1717504)	O	37,788	ALLOCATION
(19)	COMMUNITY BANK MORTGAGE LLC (84-1717504)	Q	88,921	ACTUAL/CASH
(20)	ABA VEBA (52-1767808)	Q	2,783,938	ACCRUAL