

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
2019
Open to Public Inspection

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

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

C Name of organization: NATIONAL MINING ASSOCIATION
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 101 CONSTITUTION AVENUE NW NO 500E
 City or town, state or province, country, and ZIP or foreign postal code: WASHINGTON, DC 200012133

D Employer identification number: 52-1916480
E Telephone number: (202) 463-2600
G Gross receipts \$ 14,901,718

F Name and address of principal officer:
 RICH NOLAN
 101 CONSTITUTION AVENUE NW NO 500E
 WASHINGTON, DC 200012133

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: ▶ WWW.NMA.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1995 **M** State of legal domicile: DE

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND MINERAL INDUSTRY ON PUBLIC POLICY ISSUES BEFORE CONGRESS, THE EXECUTIVE BRANCH, AND THE JUDICIARY, AND PREPARE AND DISTRIBUTE INFORMATION TO CARRY OUT THESE PURPOSES.

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) | 3 | 60 |
| 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 59 |
| 5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) | 5 | 32 |
| 6 Total number of volunteers (estimate if necessary) | 6 | 59 |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0 |
| b Net unrelated business taxable income from Form 990-T, line 39 | 7b | 0 |

| | Prior Year | Current Year |
|---|------------|--------------|
| 8 Contributions and grants (Part VIII, line 1h) | 0 | 0 |
| 9 Program service revenue (Part VIII, line 2g) | 7,992,570 | 8,035,774 |
| 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 1,751,595 | 1,336,918 |
| 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | -17,088 | -23,716 |
| 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 9,727,077 | 9,348,976 |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 0 | 0 |
| 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0 | 0 |
| 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 7,625,006 | 7,662,988 |
| 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0 | 0 |
| b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0 | | |
| 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 7,397,862 | 6,269,135 |
| 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) | 15,022,868 | 13,932,123 |
| 19 Revenue less expenses. Subtract line 18 from line 12 | -5,295,791 | -4,583,147 |

| | Beginning of Current Year | End of Year |
|--|---------------------------|-------------|
| 20 Total assets (Part X, line 16) | 39,545,043 | 51,619,297 |
| 21 Total liabilities (Part X, line 26) | 9,288,321 | 22,133,749 |
| 22 Net assets or fund balances. Subtract line 21 from line 20 | 30,256,722 | 29,485,548 |

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: 2020-07-14

ROGER ROBERTS TREASURER/SVP F
Type or print name and title

Paid Preparer Use Only

| | | | | |
|---|----------------------|------------|---|--------------------------|
| Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| Firm's name ▶ RSM US LLP | | 2020-07-10 | | P00290720 |
| Firm's address ▶ 2021 L STREET NW 400 WASHINGTON, DC 20036 | | | Firm's EIN ▶ 42-0714325 | Phone no. (202) 293-2200 |

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:

NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL SUPPORT FOR THE MINING INDUSTRY, AND TO HELP THE NATION REALIZE THE ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE THE PUBLIC POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT, AND UTILIZE THE NATION'S VAST COAL AND MINERAL RESOURCES. NMA SERVES ITS MEMBERSHIP BY: -PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES PRODUCED BY THE US MINING INDUSTRY, -ESTABLISHING A STRONG POLITICAL PRESENCE IN THE NATION'S CAPITAL ON BEHALF OF NMA'S MEMBERSHIP, -SERVING AS THE INFORMATION CENTER FOR, AND A SINGLE VOICE OF, THE US MINING INDUSTRY, AND-ADDRESSING THE CURRENT AND FUTURE NEEDS OF THE INDUSTRY, MINING EQUIPMENT MANUFACTURERS, AND SUPPORT SERVICES FOR MEMBERS OF THE ASSOCIATION.

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, and Yes/No response. Rows include questions 1 through 21, with sub-questions a through f for items 11 and 14. Questions cover topics like political campaign activities, lobbying, donor advised funds, conservation easements, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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 []

Table with 3 main columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Form 990 (2019) Part V Statements Regarding Other IRS Filings and Tax Compliance (continued). This section contains questions 2a through 16 regarding federal employment tax returns, foreign accounts, prohibited tax shelter transactions, deductible contributions, and other IRS filings.

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 (60), 1b (59), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

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.
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:
ROGER ROBERTS 101 CONSTITUTION AVENUE NW NO 500E WASHINGTON, DC 200012133 (202) 463-2600

Part VIII Statement of Revenue

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

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

| Program Service Revenue | | | Business Code | | | |
|---|---|--------|---------------|-----------|-----------|--|
| | 2a MEMBERSHIP DUES AND ASSESSMENTS | | 900099 | 7,803,753 | 7,803,753 | |
| b CONVENTIONS, CONFERENCES, AND MEE | | 900099 | 228,021 | 228,021 | | |
| c PUBLICATIONS | | 900099 | 4,000 | 4,000 | | |
| d | | | | | | |
| e | | | | | | |
| f All other program service revenue. | | | | | | |
| g Total. Add lines 2a-2f. ▶ | | | 8,035,774 | | | |

| | | | | | | | | |
|---|--|--|-----------|-----------|---------|-----------|-----------|---------|
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) ▶ | | | 1,350,870 | | | 1,350,870 | |
| | 4 Income from investment of tax-exempt bond proceeds ▶ | | | | | | | |
| | 5 Royalties ▶ | | | | | | | |
| | 6a Gross rents | (i) Real | 6a | 262,089 | | | | |
| | | | 6b | 288,790 | | | | |
| | | (ii) Personal | 6c | -26,701 | | | | |
| | | d Net rental income or (loss) ▶ | | | -26,701 | | | -26,701 |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities | 7a | 5,250,000 | | | | |
| | | | 7b | 5,263,952 | | | | |
| | | (ii) Other | 7c | -13,952 | | | | |
| | | d Net gain or (loss) ▶ | | | -13,952 | | | -13,952 |
| | 8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | 8a | | | | | | |
| | b Less: direct expenses | 8b | | | | | | |
| | c Net income or (loss) from fundraising events ▶ | | | | | | | |
| | 9a Gross income from gaming activities. See Part IV, line 19 | 9a | | | | | | |
| | b Less: direct expenses | 9b | | | | | | |
| | c Net income or (loss) from gaming activities ▶ | | | | | | | |
| | 10a Gross sales of inventory, less returns and allowances | 10a | | | | | | |
| | b Less: cost of goods sold | 10b | | | | | | |
| | c Net income or (loss) from sales of inventory ▶ | | | | | | | |
| Miscellaneous Revenue | Business Code | | | | | | | |
| 11a MISCELLANEOUS | 900099 | | 2,985 | | | 2,985 | | |
| b | | | | | | | | |
| c | | | | | | | | |
| d All other revenue | | | | | | | | |
| e Total. Add lines 11a-11d ▶ | | | 2,985 | | | | | |
| 12 Total revenue. See instructions ▶ | | | 9,348,976 | 8,035,774 | 0 | 1,313,202 | | |

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 | | | | |
| 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, lines 15 and 16. | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 3,757,392 | | | |
| 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 | 2,852,843 | | | |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 351,501 | | | |
| 9 Other employee benefits | 399,555 | | | |
| 10 Payroll taxes | 301,697 | | | |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 380,631 | | | |
| c Accounting | 32,650 | | | |
| d Lobbying | 640,900 | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 26,317 | | | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 1,537,235 | | | |
| 12 Advertising and promotion | 367,191 | | | |
| 13 Office expenses | 219,539 | | | |
| 14 Information technology | 75,428 | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 1,547,378 | | | |
| 17 Travel | 171,822 | | | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 505,824 | | | |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 177,288 | | | |
| 23 Insurance | 93,362 | | | |
| 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 DUES | 214,392 | | | |
| b EQUIPMENT RENTAL | 127,633 | | | |
| c PROPERTY TAXES | 100,980 | | | |
| d BAD DEBTS | 42,892 | | | |
| e All other expenses | 7,673 | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 13,932,123 | | | |
| 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 | 785,007 | 1 | 2,307,191 |
| | 2 Savings and temporary cash investments | 6,942,164 | 2 | 6,025,782 |
| | 3 Pledges and grants receivable, net | | 3 | |
| | 4 Accounts receivable, net | 830,141 | 4 | 338,783 |
| | 5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 1,221,739 | 9 | 2,843,391 |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 1,766,843 | | |
| | b Less: accumulated depreciation | 1,351,119 | | |
| | 11 Investments—publicly traded securities | 28,334,290 | 11 | 37,469,431 |
| | 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 | 871,749 | 15 | 2,218,995 |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 39,545,043 | 16 | 51,619,297 | |
| Liabilities | 17 Accounts payable and accrued expenses | 1,432,854 | 17 | 1,816,858 |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 6,786,569 | 19 | 19,500,965 |
| | 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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D | 1,068,898 | 25 | 815,926 |
| | 26 Total liabilities. Add lines 17 through 25 | 9,288,321 | 26 | 22,133,749 |
| Net Assets or Fund Balances | Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33. | | | |
| | 27 Net assets without donor restrictions | 30,256,722 | 27 | 29,485,548 |
| | 28 Net assets with donor restrictions | | 28 | |
| | Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33. | | | |
| | 29 Capital stock or trust principal, or current funds | | 29 | |
| | 30 Paid-in or capital surplus, or land, building or equipment fund | | 30 | |
| | 31 Retained earnings, endowment, accumulated income, or other funds | | 31 | |
| 32 Total net assets or fund balances | 30,256,722 | 32 | 29,485,548 | |
| 33 Total liabilities and net assets/fund balances | 39,545,043 | 33 | 51,619,297 | |

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 | 9,348,976 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 13,932,123 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -4,583,147 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 30,256,722 |
| 5 | Net unrealized gains (losses) on investments | 5 | 2,093,673 |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 1,718,300 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 29,485,548 |

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: 52-1916480

Name: NATIONAL MINING ASSOCIATION

Form 990 (2019)

Form 990, Part III, Line 4a:

PRESENTED THE INTERESTS OF MINING BEFORE CONGRESS, THE ADMINISTRATION, FEDERAL AGENCIES, THE JUDICIARY, AND THE MEDIA

Form 990, Part III, Line 4b:

HELD SPECIALIZED EVENTS, WORKSHOPS, AND MEETINGS

Form 990, Part III, Line 4c:

DEVELOPED GENERAL INDUSTRY AND ISSUE SPECIFIC EDUCATIONAL AND AWARENESS CAMPAIGNS

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 | | | |
| PHILLIPS S BAKER CHAIRMAN | 1.00 | X | | X | | | | 0 | 0 | 0 |
| JIMMY BROCK VICE CHAIRMAN (BEG 9/2019) | 1.00 | X | | X | | | | 0 | 0 | 0 |
| KEITH SMITH DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JOSEPH W CRAFT DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| PAUL LANG DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| RICHARD MULLEN DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| ROBERT P COOPER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| BRENT BILSLAND DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| BRETT WILSON DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| CRAIG NUNEZ DIRECTOR | 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 | | | |
| CLARK MOSELEY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| GLENN KELLOW DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| KEITH B KIMBLE DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| RANDY SHORT DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| RANDALL ATKINS DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JC BUTLER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| MICHAEL MORRISS DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JOSEPH E USIBELLI DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| WALTER J SCHELLER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| MERI SANDLIN DIRECTOR | 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 | | | |
| MARC OSTREM DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| DENISE JOHNSON DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| ROBERT J STENGER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JOE BECKO DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JACK ATWATER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JON TORPY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| BAPPADITYA BANERJEE DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| GREGORY E HINSHAW DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| TONY CALANDRA DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JEFF DAWES DIRECTOR | 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 | | | |
| SHANE KUHLMEY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| SEAN K MCLANAHAN DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JON GIESEN DIRECTOR (BEG 9/2019) | 1.00 | X | | | | | | 0 | 0 | 0 |
| PAUL DAVIS DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| VICTOR TAPIA DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| CATHERINE RAW DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| RANDY K VRANES DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| TIM GITZEL DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| MITCHELL J KREBS DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| WILLIAM GORANSON DIRECTOR | 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 | | | |
| RED CONGER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| ALAN L PROUTY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JEAN-BAPTISTE DROMER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| MIKE SYLVESTRE DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| GUY B DIXON DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| PORTER W GREGORY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JEFF MCCHESENEY DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| STEPHEN GOTTESFELD DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JEREMY STUMP DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JASON DAVIS DIRECTOR | 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 | | | |
| ANDREW LYE DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| BILL HEISSENBUTTEL DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| CHRIS BATEMAN DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| GREG GIBSON DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| TOM SYER DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| SCOTT MELBYE DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| DONNA WICHERS DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| JOHN CASH DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| PETER T HALPIN DIRECTOR | 1.00 | X | | | | | | 0 | 0 | 0 |
| HAROLD QUINN PRES & CEO (THRU 9/30) | 35.00 | X | | X | | | | 1,428,865 | 0 | 69,360 |

| 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 | | | |
| MARY K SWEENEY SECRETARY & SVP LEGAL & REGULATORY AFFAIRS | 35.00 | | | X | | | | 395,053 | 0 | 143,348 |
| ROGER ROBERTS TREASURER & SVP FINANCE & ADMINISTRATION | 35.00 | | | X | | | | 236,247 | 0 | 40,944 |
| MERLYN NOLAN SVP GOV AFFAIRS (THRU 9/30), PRES & CEO (BEG | 35.00 | | | X | | | | 430,152 | 0 | 220,389 |
| ASHLEY BURKE SVP COMMUNICATIONS | 35.00 | | | | X | | | 410,290 | 0 | 46,996 |
| MOYA PHELLEPS SVP MEMBERSHIP & MEETINGS | 35.00 | | | | X | | | 200,530 | 0 | 104,507 |
| TAWNY BRIDGEFORD DEPUTY GENERAL COUNSEL & VP REGULATORY AFFAIRS | 35.00 | | | | | X | | 239,890 | 0 | 26,041 |
| VIRGINIA HAMISEVICZ VP, CONGRESSIONAL AFFAIRS | 35.00 | | | | | X | | 227,209 | 0 | 35,187 |
| GERALD MULLINS VP, GOVERNMENT AFFAIRS & COALITIONS | 35.00 | | | | | X | | 237,436 | 0 | 41,950 |
| VERONIKA SHIME VP, INTERNATIONAL POLICY | 35.00 | | | | | X | | 174,990 | 0 | 30,488 |
| ADAM ECKMAN ASSOCIATE GENERAL COUNSEL | 35.00 | | | | | X | | 162,524 | 0 | 24,011 |

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

2019
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 NATIONAL MINING ASSOCIATION | Employer identification number 52-1916480 |
|---|--|

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

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

Part I-B 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 ▶ \$ _____
- Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- a 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).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 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? Yes No
- 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) COALPAC | 101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001 | 52-1322749 | | 7,594 |
| (2) MINEPAC | 101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001 | 52-1939409 | | 9,042 |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

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

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

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

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

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

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

| | | |
|---|-----------|-----------|
| 1 Dues, assessments and similar amounts from members | 1 | 7,803,753 |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | |
| a Current year | 2a | 1,154,645 |
| b Carryover from last year | 2b | -114,743 |
| c Total | 2c | 1,039,902 |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . | 3 | 1,560,751 |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4 | -520,849 |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | 5 | |

Part IV Supplemental Information

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

| Return Reference | Explanation |
|-------------------|---|
| PART I-A, LINE 1: | THE NATIONAL MINING ASSOCIATION CONDUCTS ALL OF ITS POLITICAL ACTIVITY THROUGH ITS CONNECTED PACS: COALPAC AND MINEPAC. SEE PART I-C. |

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

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

Name of the organization
NATIONAL MINING ASSOCIATION

Employer identification number
52-1916480

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:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

| | Amount |
|-----------|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

- 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
- (ii)** related organizations

| | Yes | No |
|---------------|-----|----|
| 3a(i) | | |
| 3a(ii) | | |
| 3b | | |

- 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 | | 1,174,361 | 788,066 | 386,295 |
| d Equipment | | 550,715 | 521,286 | 29,429 |
| e Other | | 41,767 | 41,767 | 0 |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶ | | | | 415,724 |

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

| 1. (a) Description of liability | (b) Book value |
|--|----------------|
| (1) Federal income taxes | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) | ▶ 815,926 |

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 | 13,423,422 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a | 2,093,673 | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | 2,007,090 | |
| e | Add lines 2a through 2d | | | 2e 4,100,763 |
| 3 | Subtract line 2e from line 1 | | | 3 9,322,659 |
| 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 | 26,317 | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | | 4c 26,317 |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | | | 5 9,348,976 |

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 | 14,194,596 |
| 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 | 288,790 | |
| e | Add lines 2a through 2d | | | 2e 288,790 |
| 3 | Subtract line 2e from line 1 | | | 3 13,905,806 |
| 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 | 26,317 | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | | 4c 26,317 |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | | 5 13,932,123 |

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 | |
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Part XIII Supplemental Information *(continued)*

| Return Reference | Explanation |
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Additional Data

Software ID:

Software Version:

EIN: 52-1916480

Name: NATIONAL MINING ASSOCIATION

Supplemental Information

| Return Reference | Explanation |
|---------------------------------------|---|
| PART XI, LINE 2D - OTHER ADJUSTMENTS: | FAS 158 ADJUSTMENT 1,718,300. RENTAL EXPENSES TO PART VIII 288,790. |

Supplemental Information

| Return Reference | Explanation |
|--|--------------------------------------|
| PART XII, LINE 2D - OTHER ADJUSTMENTS: | RENTAL EXPENSE TO PART VIII 288,790. |

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

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.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NATIONAL MINING ASSOCIATION

Employer identification number
52-1916480

Part I Questions Regarding Compensation

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

Part III Supplemental Information

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

| Return Reference | Explanation |
|------------------|---|
| PART I, LINE 1A | CLUB BENEFITS ARE PROVIDED TO THE CEO AS OUTLINED IN HIS CURRENT EMPLOYMENT CONTRACT AND INCLUDED IN HIS W-2. |
| PART I, LINE 1B | NMA DOES NOT HAVE A WRITTEN POLICY CONCERNING CLUB DUES. CURRENTLY ONLY THE CEO IS APPROVED BY THE BOARD TO HAVE CLUB DUES USED FOR VALID BUSINESS PURPOSES REIMBURSED BASED ON ACTUAL COSTS. |
| PART I, LINE 4B | MERLYN NOLAN, \$120,000 MOYA PHELLEPS, \$70,000 |

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

2019

Open to Public Inspection

Department of the Treasury

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--------------------------------------|--|
| FORM 990, PART VI, SECTION A, LINE 1 | <p>NMA HAS AN AN EXECUTIVE COMMITTEE, WHICH IS COMPOSED OF THE CHAIRMAN, VICE CHAIRMAN, PRESIDENT, CHAIRMAN OF THE AUDIT AND FINANCE COMMITTEE, AND NINE DIRECTORS ELECTED ANNUALLY BY THE BOARD OF DIRECTORS, WITH SEVEN DIRECTORS REPRESENTING COAL PRODUCER MEMBERS AND MINERAL PRODUCER MEMBERS AND TWO DIRECTORS REPRESENTING MANUFACTURERS AND SERVICES MEMBERS. SUBJECT TO THE FOREGOING REQUIREMENT TO ELECT SEVEN DIRECTORS REPRESENTING THE PRODUCER MEMBERS, THE SEVEN DIRECTORS SHALL BE APPOINTED IN A MANNER THAT ASSURES EQUAL REPRESENTATION OF FIVE DIRECTORS REPRESENTING EACH PRODUCER MEMBERSHIP CLASS AFTER ACCOUNTING FOR THE MEMBERSHIP CLASSES OF THE CHAIRMAN, VICE CHAIRMAN AND CHAIRMAN OF THE AUDIT AND FINANCE COMMITTEE. ANY VACANCIES SHALL BE FILLED BY THE EXECUTIVE COMMITTEE UNTIL THE NEXT MEETING OF THE BOARD. THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE POWERS OF THE BOARD OF DIRECTORS DURING INTERVALS BETWEEN MEETINGS OF THE BOARD, EXCEPT (I) TO AMEND THESE BYLAWS, (II) TO AMEND OR RECOMMEND TO THE MEMBERS AN AMENDMENT OF THE ASSOCIATION'S CERTIFICATE OF INCORPORATION, (III) ADOPT AN AGREEMENT OF MERGER OR CONSOLIDATION, (IV) APPROVE OR RECOMMEND TO THE MEMBERS THE SALE, LEASE OR EXCHANGE OF ALL OR SUBSTANTIALLY ALL OF THE ASSOCIATION'S ASSETS, (V) RECOMMEND TO THE MEMBERS THE DISSOLUTION OF THE ASSOCIATION OR A REVOCATION OF A DISSOLUTION, OR (VI) TO TAKE SUCH OTHER ACTION AS MAY BE LIMITED BY LAW. THE EXECUTIVE COMMITTEE SHALL KEEP A RECORD OF ALL ITS ACTIONS AND SUBMIT A REPORT THEREON TO THE BOARD OF DIRECTORS.</p> |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--------------------------------------|--|
| FORM 990, PART VI, SECTION A, LINE 6 | NMA HAS TWO CLASSES OF MEMBERSHIP: 1. PRODUCER MEMBERSHIP - ANY ORGANIZATION, CORPORATION, PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OF COAL OR MINERALS. PRODUCER MEMBERS SHALL BE DIVIDED INTO TWO SEPARATE CLASSES: (A) COAL PRODUCER MEMBERS, AND (B) MINERAL PRODUCER MEMBERS. 2. MANUFACTURERS AND SERVICES MEMBERSHIP - ANY ORGANIZATION, CORPORATION, PARTNERSHIP, COMPANY OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OF MINING MACHINERY, EQUIPMENT AND SUPPLIES, MINING RELATED SERVICES, OR CLOSELY ASSOCIATED WITH AND INTERESTED IN PROMOTING THE GENERAL WELFARE OF THE MINING INDUSTRY, BUT NOT ENGAGED IN MINING. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION A, LINE 7A | THE BOARD OF DIRECTORS SHALL CONSIST OF DIRECTORS SELECTED BY, AND REPRESENTING AS CLASSES , COAL PRODUCER MEMBERS, MINERAL PRODUCER MEMBERS, MANUFACTURERS AND SERVICES MEMBERS. IN ADDITION, THE PRESIDENT OF THE ASSOCIATION SERVES AS AN EX OFFICIO MEMBER OF THE BOARD OF DIRECTORS. DIRECTORS ARE ELECTED BY A MAJORITY VOTE AT THE ANNUAL MEETING OF THE ASSOCIATION. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION B, LINE 11B | FORM 990 IS PROVIDED TO THE AUDIT & FINANCE COMMITTEE PRIOR TO FILING. FORM 990 IS REVIEWED BY SENIOR MANAGEMENT AND GENERAL COUNSEL, AND ANY CHANGES ARE COMMUNICATED TO THE OUTSIDE ACCOUNTANTS PRIOR TO FILING THE RETURN. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|---|
| FORM 990, PART VI, SECTION B, LINE 15 | THE ORGANIZATION UTILIZES A COMPENSATION CONSULTANT TO PERFORM A BI-ANNUAL COMPENSATION SURVEY OF COMPARABLE TRADE ASSOCIATIONS. NATIONAL MINING ASSOCIATION'S GOAL WHEN SETTING SALARIES FOR ALL EMPLOYEES, IS TO HAVE THEIR COMPENSATION AT THE 75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS, UTILIZING THE RESULTS FROM THE SURVEY. FURTHERMORE, THE PRESIDENT AND CEO'S SALARY IS NEGOTIATED VIA CONTRACT WITH THE FOLLOWING BOARD MEMBERS: CHAIRMAN AND VICE CHAIRMAN. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|--|--|
| FORM 990, PART VI, SECTION C, LINE 19 | THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|-----------------------------------|--|
| FORM 990, PART IX, LINE 11G | PAYROLL SERVICES 6,355. PERSONNEL AND EMPLOYMENT FEES 252,878. GENERAL CONSULTING 1,095,17 1. WEB DEVELOPMENT / MANAGEMENT 105,803. FIELD TEAMS 48,000. LIST BUILD 25,000. TEMPORARY HELP 4,028. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|----------------------------------|-------------------------------|
| FORM 990, PART XI, LINE 9: | FAS 158 ADJUSTMENT 1,718,300. |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|------------------------------------|---|
| FORM 990, PART XII, LINE 2C: | THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR. |

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**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
NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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 |
|---|-------------------------|--|---------------------|---------------------------|----------------------------------|
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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) MINEPAC 101 CONSTITUTION AVE STE 525E WASHINGTON, DC 20001 52-1939409 | POLITICAL ACTION COMMITTEE | DC | 527 | | N/A | Yes | |
| (2) COALPAC 101 CONSTITUTION AVE STE 525E WASHINGTON, DC 20001 52-1322749 | POLITICAL ACTION COMMITTEE | DC | 527 | | N/A | Yes | |
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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 | |
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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 |
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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 | No |
| o Sharing of paid employees with related organization(s) | 1o | No |
| p Reimbursement paid to related organization(s) for expenses | 1p | No |
| q Reimbursement paid by related organization(s) for expenses | 1q | No |
| r Other transfer of cash or property to related organization(s) | 1r | Yes |
| s Other transfer of cash or property from related organization(s) | 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.

| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|-------------------------------------|-------------------------------|------------------------|--|
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Part VII **Supplemental Information**

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

| Return Reference | Explanation |
|-------------------------|--------------------|
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