

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
ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES

Doing business as
APLU

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1307 NEW YORK AVENUE NW NO 400

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 200054722

D Employer identification number
53-0183246

E Telephone number
(202) 478-6040

G Gross receipts \$ 23,654,448

F Name and address of principal officer:
PETER MCPHERSON
1307 NEW YORK AVENUE NW NO 400
WASHINGTON, DC 200054722

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) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.APLU.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1887

M State of legal domicile: DC

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
A.P.L.U.'S OVERRIDING MISSION IS TO SUPPORT HIGH-QUALITY PUBLIC HIGHER EDUCATION.

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	26
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	87
6 Total number of volunteers (estimate if necessary)	6	325
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)	7,163,377	8,895,881
9 Program service revenue (Part VIII, line 2g)	11,570,163	11,399,398
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-246,276	713,953
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	137	700
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	18,487,401	21,009,932
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,170,458	3,651,320
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)	8,553,047	9,637,854
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)	6,963,857	7,004,462
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	18,687,362	20,293,636
19 Revenue less expenses. Subtract line 18 from line 12	-199,961	716,296
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	17,413,219	22,982,514
21 Total liabilities (Part X, line 26)	5,193,723	9,666,629
22 Net assets or fund balances. Subtract line 21 from line 20	12,219,496	13,315,885

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: 2020-11-09
SCOTT POWELL 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: P01332734
Firm's name ▶ RSM US LLP Firm's EIN ▶ 42-0714325
Firm's address ▶ 2021 L STREET NW 400 WASHINGTON, DC 20036 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:

A.P.L.U. IS DEDICATED TO ADVANCING RESEARCH, LEARNING AND ENGAGEMENT. THE ASSOCIATION'S OVERRIDING MISSION IS TO SUPPORT HIGH-QUALITY PUBLIC HIGHER EDUCATION AND ITS MEMBER INSTITUTIONS AS THEY PERFORM THEIR TEACHING, RESEARCH, AND PUBLIC SERVICE ROLES. A.P.L.U. PROVIDES A FORUM FOR THE DISCUSSION AND DEVELOPMENT OF POLICIES AFFECTING HIGHER EDUCATION AND THE PUBLIC INTEREST.

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 \$ 4,057,565 including grants of \$ 1,126,100) (Revenue \$ 65,939)
 See Additional Data

4b (Code:) (Expenses \$ 3,358,243 including grants of \$ 238,012) (Revenue \$ 3,011,514)
 See Additional Data

4c (Code:) (Expenses \$ 2,903,507 including grants of \$ 1,542,643) (Revenue \$ 13,575)
 See Additional Data

See Additional Data Table

4d Other program services (Describe in Schedule O.)
 (Expenses \$ 7,019,653 including grants of \$ 744,565) (Revenue \$ 8,308,370)

4e Total program service expenses ▶ 17,338,968

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-f for items 10, 11, and 12. Questions cover topics like political activities, lobbying, donor funds, conservation easements, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and controlled entities.

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/Description, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

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 87
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 No
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b
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 No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b
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 No
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 No
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 No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No
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
9 Sponsoring organizations maintaining donor advised funds.
a 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? 12a
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? If "No," provide an explanation in Schedule O 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? 15 No
If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No
If "Yes," complete Form 4720, Schedule O.

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 (26), 1b (26), 2 (Yes), 3 (No), 4 (No), 5 (No), 6 (Yes), 7a (No), 7b (No), 8a (Yes), 8b (Yes), 9 (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 (No), 10b, 11a (Yes), 11b, 12a (Yes), 12b (Yes), 12c (Yes), 13 (Yes), 14 (Yes), 15a (Yes), 15b (No), 16a (No), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY
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: THE ASSOCIATION 1307 NEW YORK AVENUE NW STE 400 WASHINGTON, DC 20005 (202) 478-6040

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	2,822,918				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,072,963				
	g Noncash contributions included in lines 1a - 1f:\$	1g					
	h Total. Add lines 1a-1f			8,895,881			
Program Service Revenue	2a MEMBER DUES & ASSESSMENTS	Business Code					
		900099	9,524,808	9,524,808			
	b MEETINGS & SEMINARS	900099	1,874,590	1,874,590			
	c						
	d						
	e						
	f All other program service revenue.						
g Total. Add lines 2a-2f.		11,399,398					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		184,911			184,911	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	6a				
			(ii) Personal	6a			
		b Less: rental expenses	6b				
			6c				
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	7a	3,173,558			
			(ii) Other	7a			
		b Less: cost or other basis and sales expenses	7b	2,644,516			
			7c	529,042			
	c Gain or (loss)						
	d Net gain or (loss)		529,042			529,042	
	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	700			700		
b							
c							
d All other revenue							
e Total. Add lines 11a-11d		700					
12 Total revenue. See instructions			21,009,932	11,399,398	0	714,653	

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	3,626,955	3,626,955		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	24,365	24,365		
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	3,166,385	2,521,682	644,703	
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	5,009,852	3,979,357	1,030,495	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	433,557	351,957	81,600	
9 Other employee benefits	500,545	401,236	99,309	
10 Payroll taxes	527,515	438,151	89,364	
11 Fees for services (non-employees):				
a Management				
b Legal	65,419	31,564	33,855	
c Accounting	81,832		81,832	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,497,908	2,341,263	156,645	
12 Advertising and promotion	14,842	11,252	3,590	
13 Office expenses	493,069	158,944	334,125	
14 Information technology	398,385	220,685	177,700	
15 Royalties				
16 Occupancy	398,176	17,324	380,852	
17 Travel	1,113,707	1,032,863	80,844	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,633,551	927,683	705,868	
20 Interest	26,534		26,534	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	98,806	78,861	19,945	
23 Insurance				
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 BAD DEBT EXPENSE	94,672		94,672	
b SUBSCRIPTIONS, REFERENC	84,959	63,731	21,228	
c MISCELLANEOUS	1,917	1,917		
d CONTRIBUTIONS & PRIZES	685	685		
e All other expenses		1,108,493	-1,108,493	
25 Total functional expenses. Add lines 1 through 24e	20,293,636	17,338,968	2,954,668	0
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	571,903	1	1,073,105
	2 Savings and temporary cash investments	6,482,803	2	10,645,276
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	1,246,407	4	1,297,787
	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	114,854	9	132,994
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	5,260,898		
	b Less: accumulated depreciation	2,405,936		
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11	5,711,229	12	6,539,391
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	332,255	15	438,999
16 Total assets. Add lines 1 through 15 (must equal line 34)	17,413,219	16	22,982,514	
Liabilities	17 Accounts payable and accrued expenses	612,189	17	1,134,905
	18 Grants payable		18	
	19 Deferred revenue	2,966,159	19	7,061,276
	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	1,315,532	23	1,063,861
	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	299,843	25	406,587
	26 Total liabilities. Add lines 17 through 25	5,193,723	26	9,666,629
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	10,538,987	27	11,532,555
	28 Net assets with donor restrictions	1,680,509	28	1,783,330
	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	12,219,496	32	13,315,885	
33 Total liabilities and net assets/fund balances	17,413,219	33	22,982,514	

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	21,009,932
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,293,636
3	Revenue less expenses. Subtract line 2 from line 1	3	716,296
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,219,496
5	Net unrealized gains (losses) on investments	5	329,556
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	50,537
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	13,315,885

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	Yes	
3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 53-0183246

Name: ASSOCIATION OF PUBLIC AND LAND-GRANT
UNIVERSITIES

Form 990 (2019)

Form 990, Part III, Line 4a:

ACADEMIC AFFAIRS CONDUCTS STUDIES, ISSUES REPORTS, AND MAKES PRESENTATIONS INTENDED TO IMPROVE THE UNDERSTANDING OF THE ACADEMIC UNDERTAKINGS OF OUR MEMBERS. IN RECENT TIMES IT HAS DEVOTED SPECIAL ATTENTION TO UNDERGRADUATE EDUCATION, INCLUDING ACCESS, COST, FINANCIAL AID, QUALITY, TIME TO DEGREE, AND ACCOUNTABILITY. THE STRATEGIC ANALYSIS AND PROJECTS GROUP HAS CARRIED OUT A NUMBER OF PROJECTS RELATED TO PROVIDING GREATER ACCOUNTABILITY AND CAPTURING MORE ACCURATE DATA (E.G., VOLUNTARY SYSTEM OF ACCOUNTABILITY, STUDENT ACHIEVEMENT MEASURE). OTHER PROJECTS HAVE WORKED TO IMPROVE AND EXPAND THE USE OF LEARNING TECHNOLOGIES TO ACHIEVE HIGHER QUALITY LEARNING WHILE CONTAINING COSTS (PERSONALIZED LEARNING CONSORTIUM).

Form 990, Part III, Line 4b:

THE COMMISSION ON FOOD, ENVIRONMENT, AND RENEWABLE RESOURCES (CFERR) FOCUSES ON CROSS-CUTTING ISSUES RELATED TO AGRICULTURE, FORESTRY, HUMAN SCIENCES, NATURAL RESOURCES, ECOLOGICAL SCIENCES, OCEANS AND ATMOSPHERE, AND VETERINARY MEDICINE IN THE FUNCTIONAL AREAS OF RESEARCH, EXTENSION, AND ACADEMIC PROGRAMS. THE COMMISSION SEEKS TO FORMULATE AND IMPLEMENT AN INTEGRATED FEDERAL RELATIONS PROGRAM AND FORMULATE CONGRESSIONAL BUDGET RECOMMENDATIONS IN HIGH-PRIORITY AREAS OF NATIONAL CONCERN.

Form 990, Part III, Line 4c:

OFFICE OF URBAN INITIATIVES - THE OFFICE OF URBAN INITIATIVES' MAJOR FOCUS IS PUBLIC RESEARCH UNIVERSITIES LOCATED IN URBAN CENTERS WHICH PLAY A CRUCIAL ROLE IN ANCHORING THE COMMUNITY, FOSTERING NEIGHBORHOOD AND ECONOMIC DEVELOPMENT OF THEIR CITIES, AND ADVANCING THE HEALTH, EDUCATION, AND WELL-BEING OF CITY RESIDENTS.

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

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

(Code:) (Expenses \$ 2,413,026 including grants of \$ 591,964) (Revenue \$ 158,308)

RESEARCH, INNOVATION, AND STEM POLICY: THE OFFICE OF RESEARCH, INNOVATION, AND STEM POLICY'S MAJOR FOCUS IS THE SCIENCE AND MATH TEACHER IMPERATIVE, A LONG-TERM EFFORT TO ADDRESS THE SHORTAGE OF WELL-QUALIFIED SCIENCE AND MATH TEACHERS.

(Code:) (Expenses \$ 4,606,627 including grants of \$ 152,601) (Revenue \$ 8,150,062)

ALL OTHER PROGRAMS INCLUDING: INTERNATIONAL PROGRAMS, CONGRESSIONAL AFFAIRS, PUBLIC AFFAIRS, DATA & ANALYTICS, ACCESS & SUCCESS, ECONOMIC DEVELOPMENT, AND INFORMATION TECHNOLOGY

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 JONES CHAIR	1.00	X		X				0	0	0
WADED CRUZADO CHAIR-ELECT	1.00	X		X				0	0	0
MICHAEL DRAKE PAST-CHAIR	1.00	X		X				0	0	0
REBECCA BLANK CHAIR, COUNCIL OF PRESIDEN	1.00	X		X				0	0	0
GARY MAY SEC, CNCL OF PRES (FROM 11/19)	1.00	X		X				0	0	0
MAKOLA ABDULLAH AT-LARGE MEMBER	1.00	X						0	0	0
MONICA RAO DIRECTOR	1.00	X						0	0	0
JOSEPH GLOVER DIRECTOR	1.00	X						0	0	0
GINA DALY DIRECTOR	1.00	X						0	0	0
SARAH NUSSER 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			
DANA TOPOUSIS DIRECTOR	1.00	X						0	0	0
DENISE MAYBANK DIRECTOR	1.00	X						0	0	0
MICHAEL RAO DIRECTOR	1.00	X						0	0	0
HAVIDAN RODRIGUEZ DIRECTOR	1.00	X						0	0	0
PATRICK GALLAGHER DIRECTOR	1.00	X						0	0	0
CHAD WOOTTON DIRECTOR	1.00	X						0	0	0
NOELLE CROCKETT DIRECTOR	1.00	X						0	0	0
ORLANDO MCMEANS DIRECTOR	1.00	X						0	0	0
TIM SANDS DIRECTOR	1.00	X						0	0	0
JOHNATHAN PRUITT 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			
MUN CHOI AT-LARGE MEMBER	1.00	X						0	0	0
SUSAN COLE AT-LARGE MEMBER	1.00	X						0	0	0
MARTIN MEEHAN AT-LARGE MEMBER	1.00	X						0	0	0
SAMUEL STANLEY AT-LARGE MEMBER	1.00	X						0	0	0
JOSEPH STEINMETZ AT-LARGE MEMBER	1.00	X						0	0	0
ROBERT NELSEN AT-LARGE MEMBER	1.00	X						0	0	0
ROBERT CARET PAST-CHAIR (TO 11/19)	1.00	X		X				0	0	0
STEVEN LEATH SEC, CNCL OF PRES (TO 11/19)	1.00	X		X				0	0	0
KENT SMITH JR DIRECTOR (TO 11/19)	1.00	X						0	0	0
JOHN LATINI DIRECTOR (TO 11/19)	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			
TERI LUCIE THOMPSON DIRECTOR (TO 11/19)	1.00	X						0	0	0
JAVAUNE ADAMS-GASTON DIRECTOR (TO 11/19)	1.00	X						0	0	0
SANDRA BROWN DIRECTOR (TO 11/19)	1.00	X						0	0	0
MARK ROSENBERG DIRECTOR (TO 11/19)	1.00	X						0	0	0
ERIC BARRON DIRECTOR (TO 11/19)	1.00	X						0	0	0
HARRIS PASTIDES DIRECTOR (TO 11/19)	1.00	X						0	0	0
MARK BECKER DIRECTOR (TO 7/19)	1.00	X						0	0	0
RITA CHENG AT-LARGE MEMBER (TO 11/19)	1.00	X						0	0	0
JUDY GENSHAFT AT-LARGE MEMBER (TO 11/19)	1.00	X						0	0	0
HAROLD MARTIN AT-LARGE MEMBER (TO 11/19)	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			
KIRK SCHULZ AT-LARGE MEMBER (TO 11/19)	1.00	X						0	0	0
VISTASP KARBHARI AT-LARGE MEMBER (TO 11/19)	1.00	X						0	0	0
M PETER MCPHERSON PRESIDENT	37.50			X				558,916	0	50,766
HOWARD GOBSTEIN EXECUTIVE VP	37.50			X				183,376	0	43,093
EMILY VAN LOON CFO, TREASURER	37.50			X				172,420	0	42,766
JEAN MIDDLETON VP, CHIEF OF STAFF	37.50			X				156,416	0	27,377
DOUGLAS L STEELE VP FOOD AG NATURAL RESOURC	37.50				X			301,465	0	48,344
BERNARD ANTHONY MAIR SVP CAO	37.50				X			212,058	0	46,636
SHARI GARMISE VP URBAN INITIATIVES & ED USU	37.50				X			200,351	0	39,899
JEFFREY LIEBERSON SVP OF PUBLIC AFFAIRS & CHIEF STRATEGY OFFICER	37.50				X			188,476	0	50,158

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CRAIG LINDWARM VICE PRESIDENT OGA	37.50				X			165,447	0	26,701
EUGENE L ANDERSON VP OF OAS	37.50				X			165,424	0	42,207
MONTAGUE DEMMENT VP OF INTERNATIONAL PROGRAMS	37.50				X			152,088	0	22,453
BRYAN J COOK VP DATA POLICY ANALYSIS	37.50				X			152,044	0	44,908
KAREN K VIGNARE PLC EXECUTIVE DIRECTOR	37.50					X		156,767	0	38,948
SHEILA A MARTIN VP ECON DEV COM ENGAGEMENT	37.50					X		136,352	0	33,449
EDDIE GOUGE EXECUTIVE DIRECTOR CARET	37.50					X		124,795	0	28,659
ANNE-CLAIRE HERVY ASSOCIATE VP IP	37.50					X		122,035	0	34,062
WENDY FINK DIRECTOR AG ED BAA	37.50					X		117,805	0	34,687

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES

Employer identification number
53-0183246

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	3,292,191	5,488,265	5,868,111	7,163,377	8,895,881	30,707,825
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 Total. Add lines 1 through 3	3,292,191	5,488,265	5,868,111	7,163,377	8,895,881	30,707,825
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . .						13,892,896
6 Public support. Subtract line 5 from line 4.						16,814,929

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4. . .	3,292,191	5,488,265	5,868,111	7,163,377	8,895,881	30,707,825
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .	45,943	60,776	69,221	88,077	184,911	448,928
9 Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .	752	3,124	20,011	137	700	24,724
11 Total support. Add lines 7 through 10						31,181,477
12 Gross receipts from related activities, etc. (see instructions)					12	57,583,655

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	53.930 %
15 Public support percentage for 2018 Schedule A, Part II, line 14	15	49.240 %

16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	INCOME FROM ACTIVITIES THAT ARE NOT REGULARLY CARRIED ON

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 ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES	Employer identification number 53-0183246
---	--

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

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

2 Political campaign activity expenditures (see instructions) ▶ \$ _____

3 Volunteer hours for political campaign activities (see instructions)

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

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

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

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

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

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

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

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

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

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

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

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

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

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

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

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

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

	0
	584,170
	584,170
	19,709,466
	20,293,636
	1,000,000

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?

	250,000
	0
	0

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount	991,451	1,000,000	1,000,000	1,000,000	3,991,451
b Lobbying ceiling amount (150% of line 2a, column(e))					5,987,177
c Total lobbying expenditures	597,116	702,500	662,516	584,170	2,546,302
d Grassroots nontaxable amount	247,863	250,000	250,000	250,000	997,863
e Grassroots ceiling amount (150% of line 2d, column (e))					1,496,795
f Grassroots lobbying expenditures					

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

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

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

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

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

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	
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	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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
ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES

Employer identification number
53-0183246

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 |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f 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	1,680,509	1,681,872	1,612,140	1,617,770	1,650,063
b Contributions					
c Net investment earnings, gains, and losses	166,146	22,135	118,024	60,338	28,705
d Grants or scholarships					
e Other expenditures for facilities and programs	63,325	23,498	48,292	65,968	60,998
f Administrative expenses					
g End of year balance	1,783,330	1,680,509	1,681,872	1,612,140	1,617,770

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 0 %
 - b** Permanent endowment ▶ 81.840 %
 - c** Temporarily restricted endowment ▶ 18.160 %
- 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:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | No |
| (ii) related organizations | 3a(ii) | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 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		1,331,256		1,331,256
b Buildings		3,115,485	1,647,828	1,467,657
c Leasehold improvements		60,699	53,043	7,656
d Equipment		753,458	705,065	48,393
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				2,854,962

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) POOLED INVESTMENTS	6,539,391	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	6,539,391	

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

(a) Description of liability	(b) Book value
1. Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	406,587

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	21,339,488
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	329,556
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	329,556
3	Subtract line 2e from line 1	3	21,009,932
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	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	21,009,932

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	20,243,099
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	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	20,243,099
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	
b	Other (Describe in Part XIII.)	4b	50,537
c	Add lines 4a and 4b	4c	50,537
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	20,293,636

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: 53-0183246

Name: ASSOCIATION OF PUBLIC AND LAND-GRANT
UNIVERSITIES

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE ASSOCIATION'S ENDOWMENT CONSISTS PRIMARILY OF FUNDS GRANTED BY THE W.K. KELLOGG ASSOCIATION FOR RECOGNIZING AND REWARDING PUBLIC UNIVERSITY FACULTY AND EXTERNAL PARTNERS FOR OUTSTANDING PARTNERSHIPS THAT EMBRACE PUBLIC UNIVERSITY ENGAGEMENT WITH THEIR CONSTITUENTS. THE ENDOWMENT IS DONOR-RESTRICTED TO BE HELD IN PERPETUITY TO GENERATE RETURNS TO PROVIDE FOR TWO ANNUAL SETS OF AWARDS. A SMALL AMOUNT OF ENDOWMENT FUNDS ARE HELD IN TEMPORARILY RESTRICTED FUNDS.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	GRANT REFUNDS 50,537.

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

Schedule I (Form 990)

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

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

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES

Employer identification number 53-0183246

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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.

Table with 8 columns: (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. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 43
3 Enter total number of other organizations listed in the line 1 table 0

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
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Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE RECIPIENT INSTITUTIONS ARE SELECTED THROUGH A COMPETITIVE GRANT PROCESS. APLU MONITORS SUB-AWARDS ON AN ONGOING BASIS BUT AT A MINIMUM ANNUALLY. ALL INSTITUTIONAL CONTRACTS INCLUDE A REPORTING SCHEDULE (WHEN A NARRATIVE AND BUDGET UPDATE ARE REQUIRED). ADDITIONALLY, ANY TIME AN INSTITUTION NEEDS TO MOVE FUNDS ACROSS LINE ITEMS, THEY ARE REQUIRED TO REQUEST APPROVAL FROM APLU, SPECIFICALLY IF THIS MOVE EXCEEDS 10 PERCENT.

Additional Data

Software ID:
Software Version:
EIN: 53-0183246
Name: ASSOCIATION OF PUBLIC AND LAND-GRANT
UNIVERSITIES

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
AMERICAN ASSOCIATION OF STATE COLLEGES AND UNIVERSITIES 1307 NEW YORK AVE NW FLOOR 5 WASHINGTON, DC 20005	52-0747578	501(C)3	7,500				PROGRAM SUPPORT
ARIZONA STATE UNIVERSITY 1511 S FOREST AVE SUITE 246 TEMPE, AZ 85281	86-0196696	115	133,000				PROGRAM SUPPORT

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
BOSTON UNIVERSITY PO BOX 28763 NEW YORK, NY 100878763	04-2103547	115	16,642				PROGRAM SUPPORT
CALIFORNIA STATE UNIVERSITY EAST BAY 25800 CARLOS BEE BLVD HAYWARD, CA 94542	94-6390556	115	36,156				PROGRAM SUPPORT

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
CALIFORNIA STATE UNIVERSITY FULLERTON 1121 N STATE COLLEGE BLVD FULLERTON, CA 92831	33-0632102	115	48,464				PROGRAM SUPPORT
CLEVELAND STATE UNIVERSITY 2121 EUCLID AVE CLEVELAND, OH 44115	34-0966056	115	25,000				PROGRAM SUPPORT

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
COLORADO STATE UNIVERSITY 801 OVAL DRIVE FORT COLLINS, CO 805231052	84-6000545	115	225,500				PROGRAM SUPPORT
CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA, NY 14850	15-0532082	501(C)3	24,500				PROGRAM SUPPORT

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
FLORIDA INTERNATIONAL UNIVERSITY 11199 SW 8TH ST MIAMI, FL 33198	65-0177615	115	257,324				PROGRAM SUPPORT
FLORIDA STATE UNIVERSITY 874 TRADITIONS WAY TALLAHASSEE, FL 323064166	59-1961248	115	20,000				PROGRAM SUPPORT

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
GEORGIA STATE UNIVERSITY PO BOX 3961 ATLANTA, GA 30303	58-6002050	115	318,000				PROGRAM SUPPORT
INTERNATIONAL FOOD POLICY RESEARCH INSTITUTE 1201 I ST NW SUITE 1200 WASHINGTON, DC 20005	52-1041632	501(C)3	99,823				PROGRAM SUPPORT

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
IOWA STATE UNIVERSITY 515 MORRILL RD AMES, IA 50011	42-6004224	115	12,000				PROGRAM SUPPORT
KENNESAW STATE UNIVERSITY 585 COBB AVE KENNESAW, GA 30144	58-0965786	115	31,386				PROGRAM SUPPORT

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
LOYOLA UNIVERSITY CHICAGO 820 N MICHIGAN AVE CHICAGO, IL 60611	36-1408475	115	45,375				PROGRAM SUPPORT
MISSISSIPPI STATE UNIVERSITY PO BOX 5227 MISSISSIPPI STATE, MS 397625227	64-6000819	115	20,000				PROGRAM SUPPORT

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
MORGAN STATE UNIVERSITY 1700 E COLDSRING LANE BALTIMORE, MD 21251	52-6002033	115	31,100				PROGRAM SUPPORT
NORTHERN ARIZONA UNIVERSITY S SAN FRANCISCO ST FLAGSTAFF, AZ 86011	74-2579628	115	103,000				PROGRAM SUPPORT

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
NORTHWESTERN UNIVERSITY 633 CLARK STREET EVANSTON, IL 602081112	36-2167817	115	61,189				PROGRAM SUPPORT
OREGON STATE UNIVERSITY 1500 SW JEFFERSON STREET CORVALLIS, OR 97331	93-6022772	115	103,000				PROGRAM SUPPORT

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
PORTLAND STATE UNIVERSITY PO BOX 751 PORTLAND, OR 972070751	93-6001786	115	418,179				PROGRAM SUPPORT
PURDUE UNIVERSITY 403 WEST WOOD STREET WEST LAFAYETTE, IN 47907	35-6002041	115	12,500				PROGRAM SUPPORT

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
RESULTED LLC 6255 COLLEGIATE DR HIGHLANDS RANCH, CO 80130	82-4505456	115	47,462				PROGRAM SUPPORT
SOUTH DAKOTA STATE UNIVERSITY DEPARTMENT OF FINANCE AND BUSINESS BROOKINGS, SD 57007	46-6000364	115	152,333				PROGRAM SUPPORT

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
THE OHIO STATE UNIVERSITY 901 WOODY HAYES DR SUITE 400 COLUMBUS, OH 43201	31-6025986	115	55,250				PROGRAM SUPPORT
UNIVERSITY AT ALBANY 1400 WASHINGTON AVE ALBANY, NY 12222	16-1514621	115	50,000				PROGRAM SUPPORT

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
UNIVERSITY OF CENTRAL FLORIDA PO BOX 160002 ORLANDO, FL 328160002	59-2924021	115	50,000				PROGRAM SUPPORT
UNIVERSITY OF COLORADO - BOULDER PO BOX 910220 DENVER, CO 802910220	84-6000555	115	7,711				PROGRAM SUPPORT

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
UNIVERSITY OF COLORADO DENVER PO BOX 910238 DENVER, CO 802910238	84-6000555	115	120,000				PROGRAM SUPPORT
UNIVERSITY OF ILLINOIS 28395 NETWORK PLACE CHICAGO, IL 606731283	37-6000511	115	20,000				PROGRAM SUPPORT

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
UNIVERSITY OF LOUISVILLE 6250 RELIABLE PARKWAY CHICAGO, IL 606860062	61-1029626	115	160,500				PROGRAM SUPPORT
UNIVERSITY OF MARYLAND 1101 MAIN ADMINISTRATION BUILDING COLLEGE PARK, MD 20742	52-6002033	115	31,206				PROGRAM SUPPORT

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
UNIVERSITY OF MASSACHUSETTS AMHERST 70 BUTTERFIELD TERRACE AMHERST, MA 01003	54-2084125	115	116,219				PROGRAM SUPPORT
UNIVERSITY OF MEMPHIS 3720 ALUMNI AVE MEMPHIS, TN 38152	62-6048540	115	49,521				PROGRAM SUPPORT

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
UNIVERSITY OF MISSISSIPPI PO BOX 1848 UNIVERSITY, MS 38677	64-6001159	115	118,000				PROGRAM SUPPORT
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM 87131	85-6000642	115	100,000				PROGRAM SUPPORT

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
UNIVERSITY OF NORTH CAROLINA CHARLOTTE 9201 UNIVERSITY CITY BLVD CHARLOTTE, NC 282230001	56-0791228	115	130,000				PROGRAM SUPPORT
UNIVERSITY OF OKLAHOMA 201 DAVID L BOREN BLVD SUITE 100 NORMAN, OK 73019	73-6017987	115	14,785				PROGRAM SUPPORT

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
UNIVERSITY OF TEXAS AT EL PASO 500 W UNIVERSITY AVE EL PASO, TX 79968	74-6000813	115	25,000				PROGRAM SUPPORT
UNIVERSITY OF TEXAS RIO GRANDE VALLEY 1201 W UNIVERSITY DRIVE EDINBURG, TX 78539	46-5292740	115	71,650				PROGRAM SUPPORT

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
UNIVERSITY OF TOLEDO UNIVERSITY HALL ROOM 3501 TOLEDO, OH 436063391	34-6401484	115	175,000				PROGRAM SUPPORT
UNIVERSITY OF WASHINGTON TACOMA 1900 COMMERCE STREET TACOMA, WA 98402	91-6001537	115	50,000				PROGRAM SUPPORT

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
VIRGINIA COMMONWEALTH UNIVERSITY PO BOX 980568 RICHMOND, VA 23298	54-6001758	115	7,519				PROGRAM SUPPORT

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

CAA MEETING HONORARIUM	1	200		
CAA MEETING HONORARIUM	1	200		
COR 2019 FELLOW AWARDS	1	370		
EXPERIMENT STATION SECTION-DIVERSITY CATALYST AWARD	1	1,000		
ACADEMIC PROGRAMS SECTION	1	1,517		
NSF CLINICAL	2	2,000		

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

BOARD ON HUMAN SCIENCES	4	4,000		
BOARD ON HUMAN SCIENCES	4	4,000		
ECOP NATIONAL LEADERSHIP- EIE/DIVERSITY AWARD	7	15,000		
SPEAKER GIFTS	1	278		

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
ASSOCIATION OF PUBLIC AND LAND-GRANT UNIVERSITIES

Employer identification number
53-0183246

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 checked="" 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	No
<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 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 4b 4c	No No 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	No No
<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	No No
<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	Yes
<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	No
<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	PER THE EMPLOYMENT AGREEMENT OF PETER MCPHERSON, A HOUSING ALLOWANCE OF \$5,000 A MONTH IS PROVIDED TO HELP COVER HOUSING COSTS EXPENDED TO LIVE IN THE WASHINGTON, DC METROPOLITAN AREA. SOCIAL CLUB DUES REQUIRE AN INVOICE.
PART I, LINE 1B	REIMBURSEMENT AND PROVISION OF THE EXPENSES LISTED IN SCHEDULE J, PART 1, LINE 1A IS DETERMINED BY THE BOARD OF DIRECTORS' COMPENSATION COMMITTEE AS A PART OF THEIR DELIBERATIONS ON AN OVERALL PACKAGE FOR THE ASSOCIATION'S PRESIDENT. AS SUCH, NO FORMAL POLICY EXISTS THAT MANDATES WHICH, IF ANY, OF THESE EXPENSES ARE REQUIRED TO BE INCLUDED. THE COMMITTEE DOES CONSIDER THE COMPENSATION PACKAGES PROVIDED TO THE OTHER ASSOCIATIONS THAT COMPRISE THE "SIX," A GROUPING OF THE SIX MOST SIGNIFICANT ASSOCIATIONS FOR HIGHER EDUCATION OF WHICH APLU IS ONE.
PART I, LINE 7	BONUSES ARE PROVIDED TO CERTAIN EMPLOYEES, AND ARE MERIT BASED TO RECOGNIZE STELLAR PERFORMANCE. THE BONUSES ARE DETERMINED USING THE FEEDBACK OF THE SUPERVISOR. FOR MANAGEMENT POSITIONS, THE BONUS IS DETERMINED BY THE PRESIDENT USING PERFORMANCE REVIEWS, PORTFOLIO, AND SCOPE OF ACCOUNTABILITY AS METRICS.

Additional Data

Software ID:
Software Version:
EIN: 53-0183246
Name: ASSOCIATION OF PUBLIC AND LAND-GRANT
UNIVERSITIES

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1M PETER MCPHERSON PRESIDENT	(i)	476,316	0	82,600	28,000	33,845	620,761	0
	(ii)	0	0	0	0	0	0	0
1HOWARD GOBSTEIN EXECUTIVE VP	(i)	181,354	2,022	0	21,477	26,965	231,818	0
	(ii)	0	0	0	0	0	0	0
2EMILY VAN LOON CFO, TREASURER	(i)	165,405	7,015	0	20,000	26,095	218,515	0
	(ii)	0	0	0	0	0	0	0
3JEAN MIDDLETON VP, CHIEF OF STAFF	(i)	153,613	2,058	745	16,000	16,565	188,981	0
	(ii)	0	0	0	0	0	0	0
4DOUGLAS L STEELE VP FOOD AG NATURAL RESOURC	(i)	297,089	2,000	2,376	28,000	24,343	353,808	0
	(ii)	0	0	0	0	0	0	0
5BERNARD ANTHONY MAIR SVP CAO	(i)	205,486	2,000	4,572	24,000	27,066	263,124	0
	(ii)	0	0	0	0	0	0	0
6SHARI GARMISE VP URBAN INITIATIVES & ED USU	(i)	196,788	2,015	1,548	20,800	24,359	245,510	0
	(ii)	0	0	0	0	0	0	0
7JEFFREY LIEBERSON SVP OF PUBLIC AFFAIRS & CHIEF STRATE	(i)	186,101	2,015	360	20,300	38,879	247,655	0
	(ii)	0	0	0	0	0	0	0
8CRAIG LINDWARM VICE PRESIDENT OGA	(i)	162,615	2,038	794	16,573	14,987	197,007	0
	(ii)	0	0	0	0	0	0	0
9EUGENE L ANDERSON VP OF OAS	(i)	162,877	2,007	540	17,700	31,864	214,988	0
	(ii)	0	0	0	0	0	0	0
10MONTAGUE DEMMENT VP OF INTERNATIONAL PROGRAMS	(i)	147,433	15	4,640	18,130	12,051	182,269	0
	(ii)	0	0	0	0	0	0	0
11BRYAN J COOK VP DATA POLICY ANALYSIS	(i)	149,511	2,033	500	17,651	32,256	201,951	0
	(ii)	0	0	0	0	0	0	0
12KAREN K VIGNARE PLC EXECUTIVE DIRECTOR	(i)	153,271	2,000	1,496	17,000	26,934	200,701	0
	(ii)	0	0	0	0	0	0	0
13SHEILA A MARTIN VP ECON DEV COM ENGAGEMENT	(i)	134,352	2,000	0	16,500	19,861	172,713	0
	(ii)	0	0	0	0	0	0	0
14EDDIE GOUGE EXECUTIVE DIRECTOR CARET	(i)	118,912	2,073	3,810	14,987	19,808	159,590	0
	(ii)	0	0	0	0	0	0	0
15ANNE-CLAIRE HERVY ASSOCIATE VP IP	(i)	118,727	3,022	286	13,064	27,410	162,509	0
	(ii)	0	0	0	0	0	0	0
16WENDY FINK DIRECTOR AG ED BAA	(i)	115,323	2,080	402	13,612	27,091	158,508	0
	(ii)	0	0	0	0	0	0	0

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

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

ASSOCIATION OF PUBLIC AND LAND-GRANT
UNIVERSITIES

Employer identification number

53-0183246

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THERE SHALL BE AN EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS OF THE ASSOCIATION. THE EXECUTIVE COMMITTEE WILL MEET FROM TIME TO TIME TO PROVIDE ADVICE TO THE PRESIDENT OF THE ASSOCIATION BETWEEN BOARD MEETINGS OF THE ASSOCIATION, ACT ON BEHALF OF THE BOARD AS REQUIRED BETWEEN FULL BOARD MEETINGS, PROVIDE OVERSIGHT AS APPROPRIATE TO THE PRESIDENT, AND PROVIDE LEADERSHIP TO THE PERIODIC REVIEWS OF THE PRESIDENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	MICHAEL RAO, MONICA RAO - FAMILY RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	<p>THE ASSOCIATION SHALL HAVE ONE CLASS OF MEMBERS, UNLESS OTHERWISE DETERMINED BY THE BOARD OF DIRECTORS. MEMBERS SHALL NOT HAVE THE RIGHT TO VOTE, EXCEPT AS PART OF THEIR MEMBERSHIP ON ASSOCIATION BOARDS, COMMISSIONS, COMMITTEES AND COUNCILS DESCRIBED BELOW. ALL MEMBERS OF THE ASSOCIATION SHALL CONSIST OF INSTITUTIONS OF HIGHER EDUCATION, EACH OF WHICH QUALIF IES UNDER SECTION 115(A) OF THE INTERNAL REVENUE CODE OF 1986, OR IS EXEMPT FROM FEDERAL I NCOME TAXATION UNDER SECTION 501(A) OF SUCH CODES AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF SUCH CODE, AND IS AN ORGANIZATION DESCRIBED IN SECTION 509(A)(1), (2), OR (3) OF SUCH CODES (OR THE CORRESPONDING PROVISIONS OF ANY FUTURE UNITED STATES INTERNAL REVEN UE LAW), AND WHICH MEET THE FOLLOWING ADDITIONAL CRITERIA: INSTITUTIONAL MEMBERS: UNITED S TATES AND ITS TERRITORIES 1. AUTOMATIC MEMBERSHIP ACCREDITED UNIVERSITIES THAT MEET AT LEA ST ONE OF THE FOLLOWING THREE CRITERIA ARE QUALIFIED FOR A.P.L.U. MEMBERSHIP WITHOUT FORMA L ACTION BY THE BOARD OF DIRECTORS (A) INSTITUTION IS A LAND GRANT INSTITUTION (1862, 1890 , 1994) (B) A PUBLIC INSTITUTION CLASSIFIED BY THE MOST RECENT EDITION OF THE CARNEGIE CLA SSIFICATION OF INSTRUCTIONAL PROGRAMS IN ONE OF THE TWO BASIC CLASSIFICATIONS FOR DOCTORAL UNIVERSITIES THAT REPRESENT THE TWO HIGHEST LEVELS OF RESEARCH ACTIVITY (C) INSTITUTION I S A CURRENT A.P.L.U. MEMBER IN GOOD STANDING. 2. DISCRETIONARY MEMBERSHIP ACCREDITED PUBLI C INSTITUTIONS THAT DO NOT QUALIFY FOR AUTOMATIC MEMBERSHIP AS OUTLINED ABOVE MAY QUALIFY FOR MEMBERSHIP UNDER THE DISCRETIONARY MEMBERSHIP CRITERIA. INSTITUTIONS THAT SATISFY THE THRESHOLDS FOR THE FOUR DISCRETIONARY CRITERIA IN THIS SECTION MAY BE CONSIDERED FOR MEMBE RSHIP AND MUST BE APPROVED BY THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS MAINTAINS THE RIGHT TO ADMIT A UNIVERSITY THAT DOES NOT MEET THE THRESHOLDS FOR THE DISCRETIONARY CRITE RIA IN ORDER TO SUSTAIN AND ADVANCE MEMBERSHIP OF PUBLIC RESEARCH AND LAND-GRANT UNIVERSIT IES. (A) RESEARCH ACTIVITY: TO SATISFY THE RESEARCH ACTIVITY CRITERION, INSTITUTIONS MUST EXCEED EITHER THE THRESHOLD FOR TOTAL RESEARCH EXPENDITURES OR THE THRESHOLD FOR RESEARCH INTENSITY. I. TOTAL RESEARCH EXPENDITURES GREATER THAN \$35 MILLION IN TOTAL R&D EXPENDITUR ES RESEARCH INTENSITY II. RESEARCH INTENSITY GREATER THAN \$25 THOUSAND IN TOTAL R&D EXPEND ITURES PER FACULTY FTE (B) BREADTH OF DOCTORAL PROGRAMS AND RESEARCH FOCUS: TO SATISFY THE CRITERIA, AN INSTITUTION MUST BE INCLUDED WITHIN THE SELECTED CARNEGIE BASIC CLASSIFICATI ONS AND GRADUATE INSTRUCTIONAL PROGRAM CLASSIFICATIONS SPECIFIED BELOW. THE SELECTED CLASS IFICATIONS REPRESENT AN INSTITUTION WITH SIGNIFICANT RESEARCH FOCUS AND A RANGE OF DOCTORA L PROGRAMS. I. BASIC CARNEGIE CLASSIFICATIONS --RESEARCH/DOCTORAL INSTITUTIONS --SPECIAL FOCUS INSTITUTIONS WITHIN THE FOLLOWING SUB-CATEGORIES: --MEDICAL SCHOOLS & CENTERS --OTHER HEALTH PROFESSIONS SCHOOLS --ENGINEERING SCHOOLS --OTHER TECHNOLOGY-RELATED SCHOOLS --BUS INESS & MANAGEMENT SCHOOLS II.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>FORM 990, PART VI, SECTION A, LINE 6</p>	<p>GRADUATE INSTRUCTIONAL PROGRAM CLASSIFICATIONS --RESEARCH DOCTORAL: COMPREHENSIVE PROGRAM S, WITH MEDICAL/VETERINARY SCHOOL --RESEARCH DOCTORAL: COMPREHENSIVE PROGRAMS, NO MEDICAL/ VETERINARY SCHOOL --RESEARCH DOCTORAL: HUMANITIES/SOCIAL SCIENCES-DOMINANT --RESEARCH DOCT ORAL: STEM-DOMINANT --RESEARCH DOCTORAL: PROFESSIONAL-DOMINANT (C) STUDENT ENROLLMENT (IPE DS UNDUPLICATED STUDENT HEADCOUNT, 3 YEAR AVERAGE, ALL LEVELS) TO SATISFY THE STUDENT ENRO LLEMENT CRITERION, INSTITUTIONS MUST HAVE AN AVERAGE ANNUAL, UNDUPLICATED STUDENT HEADCOUNT OF 10,000 STUDENTS. (D) COMMUNITY ENGAGEMENT TO MEET THE COMMUNITY ENGAGEMENT CRITERION, INSTITUTIONS MUST DEMONSTRATE A SUBSTANTIAL AND SUSTAINED ENGAGEMENT AS OUTLINED BY THE 20 00 KELLOGG COMMISSION REPORT RETURNING TO OUR ROOTS. INSTITUTION MEMBERSHIP: CANADA AND ME XICO APPLICATIONS BY UNIVERSITIES WITHIN CANADA AND MEXICO WILL BE REVIEWED ON AN INDIVIDU AL BASIS BY THE BOARD OF DIRECTORS CONSIDERING COMPARABILITY WITH THE CRITERIA FOR U.S. IN STITUTIONS OUTLINED IN SECTION B WITHIN THEIR NATIONAL CONTEXTS. SYSTEM MEMBERSHIP: UNITED STATES AND ITS TERRITORIES STATE UNIVERSITY SYSTEMS WITHIN THE U.S. OR ITS TERRITORIES WI TH ONE OR MORE OF THEIR INSTITUTION MEMBERS IN GOOD STANDING AS A MEMBER OF APLU AUTOMATIC ALLY ARE ELIGIBLE FOR MEMBERSHIP IN APLU AS SYSTEM MEMBERS. APLU SYSTEM MEMBERSHIP ALLOWS SYSTEM STAFF TO PARTICIPATE IN APPROPRIATE APLU ACTIVITIES. SYSTEM MEMBERSHIP DOES NOT CON VEY APLU MEMBERSHIP TO EACH INSTITUTION MEMBER WITHIN THE SYSTEM. INSTITUTIONS THAT ARE PA RT OF A SYSTEM MUST MEET THE INDIVIDUAL INSTITUTION CRITERIA FOR APLU MEMBERSHIP. ORGANIZA TION AFFILIATE MEMBERSHIP: CANADA, MEXICO, AND THE UNITED STATES AND ITS TERRITORIES TAX E XEMPT ORGANIZATION WITH SUBSTANTIAL RESPONSIBILITY IN LEARNING, DISCOVERY, AND ENGAGEMENT MAY BE CONSIDERED FOR MEMBERSHIP IN APLU AS ORGANIZATIONS WITH PARTICIPATION IN SELECTED A PLU COUNCILS AND COMMISSIONS. THESE APPLICATIONS WILL BE REVIEWED INDIVIDUALLY BY THE BOAR D OF DIRECTORS WITH THE MEMBERSHIP AND PARTICIPATION DECISIONS BASED ON THE BOARD'S JUDGME NT OF THE EXTENT TO WHICH THE ORGANIZATION HAS SUBSTANTIAL, CONSTRUCTIVE IMPACT NATIONALLY AND INTERNATIONALLY ON LEARNING, DISCOVERY, AND ENGAGEMENT AT APLU MEMBER UNIVERSITIES AN D SYSTEMS.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	BOTH THE FORM 990 AND AUDITED FINANCIAL STATEMENTS ARE DISTRIBUTED ELECTRONICALLY TO THE APLU AUDIT COMMITTEE MEMBERSHIP FOR REVIEW AND APPROVAL. DURING THE DISTRIBUTION PROCESS, THE BOARD OF DIRECTORS ARE COPIED ON THE CORRESPONDENCE. AS REQUIRED, CONFERENCE CALLS ARE MADE WITH THE AUDIT COMMITTEE TO DISCUSS ANY QUESTIONS ON THE FORM 990.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CHIEF FINANCIAL OFFICER IS THE PRIMARY OFFICER RESPONSIBLE FOR MONITORING FOR POTENTIAL CONFLICT OF INTEREST TRANSACTIONS. MONITORING INCLUDES RELIANCE ON APLU EMPLOYEES FOR REPORTING MATTERS OF CONCERN. ALL APLU STAFF, REGARDLESS OF POSITION, ARE COVERED UNDER THE POLICY. IN THE CASE OF THE PRESIDENT, IF SATISFACTORY CONCLUSION CANNOT BE REACHED BY THE CFO, THEN THE CFO IS EMPOWERED TO REFER THE MATTER TO THE CHAIR OF THE BOARD OF DIRECTORS. IN ALL OTHER CASES, THE PRESIDENT IS THE ULTIMATE AUTHORITY FOR DETERMINING DISCIPLINARY AND CORRECTIVE ACTIONS FOR CONFLICT OF INTERESTS NOT RESOLVED BY THE CFO.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE APLU BOARD OF DIRECTORS SETS THE CEO COMPENSATION DURING ITS NOVEMBER MEETING. PRIOR TO THE MEETING, COMPARABILITY DATA IS PROVIDED TO THEM BY THE APLU CHIEF FINANCIAL OFFICER. THE COMPARABILITY DATA IS AT THE DETAIL LEVEL AND ENCOMPASSES THE COMPENSATION PROVIDED TO THE CEOS OF THE SIX LEADING ASSOCIATIONS FOR HIGHER EDUCATION. ALSO MADE AVAILABLE ARE THE RESULTS FROM VARIOUS SURVEYS ON CEO SALARIES SUCH AS WASHINGTON AREA EXECUTIVE SECRETARIAT AND THE HUMAN RESOURCE ASSOCIATION OF THE NATIONAL CAPITAL AREA'S ANNUAL "COMPENSATION SURVEY REPORT."

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	TEMPORARY HELP: PROGRAM SERVICE EXPENSES 23,057. MANAGEMENT AND GENERAL EXPENSES 27,321. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 50,378. CONSULTANTS: PROGRAM SERVICE EXPENSES 2,182,178. MANAGEMENT AND GENERAL EXPENSES 111,397. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 2,293,575. PARTICIPANT SUPPORT COSTS: PROGRAM SERVICE EXPENSES 43,041. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 43,041. OTHER PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 92,987. MANAGEMENT AND GENERAL EXPENSES 17,927. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 110,914.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	GRANT REFUNDS 50,537.

990 Schedule O, Supplemental Information

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