

Nonprofit Explorer

Research Tax-Exempt Organizations

AEROSPACE AND FLIGHT TEST RADIO COORDINATING COUNCIL INC

WICHITA, KS 67219-3600 | TAX-EXEMPT SINCE DEC. 2014

Full text of "Full Filing" for fiscal year ending Dec. 2018

Tax returns filed by nonprofit organizations are public records. The Internal Revenue Service releases them in two formats: page images and raw data in XML. The raw data is more useful, especially to researchers, because it can be extracted and analyzed more easily. The pages below are a reconstruction of a tax document using raw data from the IRS.

Source: *Data and stylesheets from the Internal Revenue Service. E-file viewer adapted from [IRS e-File Viewer](#) by Ben Getson.*

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efile Public Visual Render

ObjectID: 201930929349300828 - Submission: 2019-04-02

Form 990

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.

Department of the Treasury Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

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

C Name of organization: AEROSPACE AND FLIGHT TEST RADIO COORDINA
Doing business as
Number and street (or P.O. box if mail is not delivered to street address): 616 3 34TH STREET N
Room/suite
City or town, state or province, country, and ZIP or foreign postal code: WICHITA, KS 67219

D Employer i 46-44709:

E Telephone i (316) 821-

G Gross rece

F Name and address of principal officer: 616 3 34TH STREET N WICHITA, KS 67219

- H(a) Is this a group return with subordinates?
H(b) Are all subordinates included?
H(c) Group exemption nur

I Tax-exempt status: 501(c)(3), 501(c)(6), 4947(a)(1) or 527

J Website: WWW.AFTRCC.ORG

K Form of organization: Corporation, Trust, Association, Other

L Year of formation: 2014

Part I Summary

Table with 3 columns: Category (Activities & Governance, Revenue, Expenses), Line Number, and Amount. Includes rows for mission statement, membership, revenue (Total: 1,113.3), and expenses (Total: 422.8).

Net Assets Fund Bal	20	Total assets (Part X, line 16)	2,849,2
	21	Total liabilities (Part X, line 26)	2
	22	Net assets or fund balances. Subtract line 21 from line 20	2,849,0

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 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	2019-04-02 Date
	RYAN N TERRY Treasurer Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	P PC
	Firm's name ▶ BAC ACCOUNTING CPA LLC			Firm's EIN ▶ 46-104	
	Firm's address ▶ 616 E 34th Street North Wichita, KS 67219			Phone no. (316) 640-	

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

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y

Form 990 (2018)

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:

TO ADVANCE THE ARTS AND SCIENCES OF RADIO COMMUNICATIONS AND CONTROL AND THE ORDERLY AND EFFICIENT ALLC OF THE ELECTROMAGNETIC SPECTRUM AS CONNECTED TO OR EMPLOYED IN AERONAUTICAL AND SPACE FLIGHT, EVALUATI SPACECRAFT, RELATED DEVICES OR MAJOR COMPONENTS THEREOF OR AS MAY OTHERWISE AFFECT THE INTEREST OF THI

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? (

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?

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 expen and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if service reported.

4a (Code:) (Expenses \$ **407,318** including grants of \$) (Revenue \$)
 COUNSEL AIMED AT FCC RULE-MAKING PROCEEDINGS AND LEGISLATIVE ACTIONS INVOLVING THE PROTECTION AND PRESERVATION O FLIGHT TESTING COUSEL FOR CONSULTATIONS HELD WITH DEPT OF STATE, DEPT OF COMMERCE, DEPT OF DEFENSE AND THE NTIA. TH COUNSEL IS AVAILABLE TO THE ENTIRE MEMBERSHIP ON MATTERS OF MUTUAL CONCERN. THESE ACTIVITIES BENEFIT THE MEMBERSH MANUFACTURERS OF AIRCRAFT AND THEIR MAJOR COMPONENTS AND THE AVIATION INDUSTRY AS A WHOLE. RESEARCH IS CONDUCT PROTECTION OF THE SPECTRUM ALLOCATED TO THE AIRCRAFT INDUSTRY. RESEARCH IS ALSO CONDUCTED TO PREVENT AND CORRE IS OPEN TO MEMBER COMPANIES WITH COMMON INTERESTS.

4b (Code:) (Expenses \$ **78,811** including grants of \$) (Revenue \$)
 PAYROLL FOR THE PAID COORDINATORS POSITION AND CONTRACTORS AS WELL AS INFORMATION TECHNOLOGY AND SOFTWARE IS US TO HELP ENSURE THERE ARE NO CONFLICTS IN SPECTRUM ALLOCATED OR REQUESTED IN THE PROTECTED BAND(S).














4c (Code:) (Expenses \$ **16,554** including grants of \$) (Revenue \$)
 GENERAL MEMBERSHIP MEETINGS - THESE MEETINGS ARE HELD FOR THE PURPOSE OF OPERATING THE ORGANIZATION, SHARING INF SHARING INFORMATION WITH OTHER MEMBERS OF THE FLIGHT TEST COMMUNITY AND VARIOUS FEDERAL REGULATORY AGENCIES AN MEMBER REPRESENTATIVES.

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

4e **Total program service expenses** ▶ **502,683**

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Part IV Checklist of Required Schedules

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

- 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*
- 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line "Yes," *complete Schedule I, Parts I and III*

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Part IV Checklist of Required Schedules (continued)

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

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 99 filers are required to complete Schedule O.

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

- 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable

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

1b	
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- c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

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- 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	
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- 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)
- 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?
- b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O
- 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)?
- 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?
- b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
- c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?
- 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?
- b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
- 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 payor?
 - b If "Yes," did the organization notify the donor of the value of the goods or services provided?
 - c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
 - d If "Yes," indicate the number of Forms 8282 filed during the year

7d	
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 - e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
 - f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
 - g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?
 - h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?
- 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?
- 9a Did the sponsoring organization make any taxable distributions under section 4966?
- b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?
- 10 **Section 501(c)(7) organizations.** Enter:
 - a Initiation fees and capital contributions included on Part VIII, line 12

10a	
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 - b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

10b	
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- 11 **Section 501(c)(12) organizations.** Enter:
 - a Gross income from members or shareholders

11a	
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 - b Gross income from other sources (Do not net amounts due or paid to other sources against amounts

due or received from them.)

11b	
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

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

12b	
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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.

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	
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c Enter the amount of reserves on hand

13c	
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14a Did the organization receive any payments for indoor tanning services during the tax year?

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

15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 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

1a Enter the number of voting members of the governing body at the end of the tax year

1a	
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If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.

b Enter the number of voting members included in line 1a, above, who are independent

1b	
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2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mail address? *If "Yes," provide the names and addresses in Schedule O*

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

10a Did the organization have local chapters, branches, or affiliates?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? *If "No," go to line 13*

- b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how was done
- 13 Did the organization have a written whistleblower policy?
- 14 Did the organization have a written document retention and destruction policy?
- 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
 - a The organization's CEO, Executive Director, or top management official
 - b Other officers or key employees of the organization
 If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).
- 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during year?
- b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ▶ _____
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 - ▶ CHRISTINA BROWN 616 E 34TH STREET N WICHITA, KS 67219 (316) 821-9516

Form 990 (2018)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Contractors

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(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 related to organization (W-2/1099-MISC)
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee		
(1) DANIEL MCNEIL President	0.00 0.00	X		X			0	
(2) JOSEPH GRAMER	0.00							

1b Sub-Total	▶		
c Total from continuation sheets to Part VII, Section A	▶		
d Total (add lines 1b and 1c)	▶		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **0**

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of service
DUANE MORRIS LLP 30 SOUTH 17TH STREET PHILADELPHIA, PA 191034196	LEGAL
JOHNS HOPKINS UNIV APPLIED SCIENCES 11100 JOHNS HOPKINS ROAD MP 1-S186 LAUREL, MD 207236099	RESEARCH

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

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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
Separate campaigns 1a			
Membership dues 1b			
Raising events 1c			
Related organizations 1d			
Government grants (contributions) 1e			
Other contributions, gifts, grants, and similar amounts not included above 1f			

g

Noncash contributions included
in lines 1a - 1f: \$ _____

h Total. Add lines 1a-1f 0

		Business Code		
Program Service Revenue	2a		965,280	965,280
	ORDINATION FEES			
			2,250	2,250
	ETTING FEES			
			42,000	42,000
	embership Dues & Assessments			
			5,000	5,000
	FTWARE UPDATES			
	r All other program service revenue.			
g Total. Add lines 2a-2f			1,014,530	

3 Investment income (including dividends, interest, and other similar amounts)			107,601	107,601
4 Income from investment of tax-exempt bond proceeds			0	
5 Royalties			0	
6a Gross rents		(i) Real		
		(ii) Personal		
	b Less: rental expenses			
	c Rental income or (loss)			
	d Net rental income or (loss)		0	
7a Gross amount from sales of assets other than inventory		(i) Securities		
		(ii) Other		
	b Less: cost or other basis and sales expenses			
	c Gain or (loss)			
	d Net gain or (loss)		0	
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a			
	b Less: direct expenses			
	c Net income or (loss) from fundraising events		0	
i Gross income from gaming activities. See Part IV, line 19	a			
	b Less: direct expenses			
	c Net income or (loss) from gaming activities		0	
10a Gross sales of inventory, less returns and allowances	a			
	b Less: cost of goods sold			
	c Net income or (loss) from sales of inventory		0	
11a Miscellaneous Revenue		Business Code		

b				
c				
d All other revenue				
e Total. Add lines 11a–11d			0	
12 Total revenue. See Instructions.			1,122,131	1,122,131

Form 990 (2018)

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) Manager general exp
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0		
4 Benefits paid to or for members	0		
5 Compensation of current officers, directors, trustees, and key employees	0		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3) (B)	0		
7 Other salaries and wages	27,950	27,950	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0		
9 Other employee benefits	4,308		
10 Payroll taxes	263	263	
11 Fees for services (non-employees):			
a Management	0		
b Legal	219,254	219,254	
c Accounting	84,979		
d Lobbying	0		
e Professional fundraising services. See Part IV, line 17	0		
f Investment management fees	13,971		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	221,039	221,039	
12 Advertising and promotion	333		
13 Office expenses	908		
14 Information technology	10,102	8,000	
15 Royalties	0		
16 Occupancy	0		
17 Travel	3,604	3,604	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0		
19 Conferences, conventions, and meetings	16,554	16,554	
20 Interest	0		
21 Payments to affiliates	0		

22	Depreciation, depletion, and amortization	4,276	3,330	
23	Insurance	421		
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	MERCHANT ACCOUNT FEES	11,690		
b	CONTINUING EDUCATION	2,272	632	
c	DATA CHARGES	1,557	1,557	
d	BONUS/GIFTS	1,432	500	
e	All other expenses	2,860		
25	Total functional expenses. Add lines 1 through 24e	627,773	502,683	
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).			

Form 990 (2018)

Part X **Balance Sheet**

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

		(A)		
		Beginning of year		
Assets	1	Cash—non-interest-bearing	27,420	1
	2	Savings and temporary cash investments	1,531,098	2
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net		4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6
	7	Notes and loans receivable, net		7
	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	3,737	9
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 23,962	
	b	Less: accumulated depreciation	10b 10,372	10c 13,659
	11	Investments—publicly traded securities		11
	12	Investments—other securities. See Part IV, line 11		12
	13	Investments—program-related. See Part IV, line 11	1,273,339	13
	14	Intangible assets		14
	15	Other assets. See Part IV, line 11	2	15
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,849,255	16	
Liabilities	17	Accounts payable and accrued expenses	203	17
	18	Grants payable		18
	19	Deferred revenue		19
	20	Tax-exempt bond liabilities		20
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21
	22	Loans and other payables to current and former officers, directors, trustees, key		

Liabilities	employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22
	23 Secured mortgages and notes payable to unrelated third parties		23
	24 Unsecured notes and loans payable to unrelated third parties		24
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D		25
	26 Total liabilities. Add lines 17 through 25	203	26
	Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.	
27 Unrestricted net assets		2,849,052	27
28 Temporarily restricted net assets			28
29 Permanently restricted net assets			29
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
30 Capital stock or trust principal, or current funds			30
31 Paid-in or capital surplus, or land, building or equipment fund			31
32 Retained earnings, endowment, accumulated income, or other funds			32
33 Total net assets or fund balances		2,849,052	33
34 Total liabilities and net assets/fund balances		2,849,255	34

Form 990 (2018)

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
2	Total expenses (must equal Part IX, column (A), line 25)	2
3	Revenue less expenses. Subtract line 2 from line 1	3
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4
5	Net unrealized gains (losses) on investments	5
6	Donated services and use of facilities	6
7	Investment expenses	7
8	Prior period adjustments	8
9	Other changes in net assets or fund balances (explain in Schedule O)	9
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10

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 OM 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.

Form 990 (2018)

Additional Data

Software ID: 18007222

Software Version: 2018v3.1

Form 990, Special Condition Description:

Special Condition Description

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization
AEROSPACE AND FLIGHT TEST RADIO COORDINA

Employer identificati
46-4470936

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 an
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?		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes a not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		

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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important lanc
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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 of the tax year.

	Held at th
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? _____

the conservation easements it holds?

- 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)?
- 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, treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, 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 \$ _____

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Schedule D (Form 990) 2018

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 (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?

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, P

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
 - b If "Yes," explain the arrangement in Part XIII and complete the following table:
 - c Beginning balance
 - d Additions during the year
 - e Distributions during the year
 - f Ending balance
- | | Amou |
|----|------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?
 - 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 ba
1a Beginning of year balance				
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				

- g End of year balance
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
 - a Board designated or quasi-endowment ▶
 - b Permanent endowment ▶
 - c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
 - (i) unrelated organizations
 - (ii) related organizations
- b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation
1a Land			
b Buildings			
c Leasehold improvements			
d Equipment		23,962	10,372
e Other			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶			

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Schedule D (Form 990) 2018

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 m)
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation (Cost or end-of-year m)
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		

(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		1,470,013

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
PAYROLL TAX LIABILITY	964
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	964

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

Sc

Schedule D (Form 990) 2018

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
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
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
3	Subtract line 2e from line 1		3
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
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5

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
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
3	Subtract line 2e from line 1				3
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			
c	Add lines 4a and 4b				4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5

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 XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation

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 Software Version: 2018v3.1

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**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.

Department of the Treasury

Internal Revenue Service

Name of the organization
 AEROSPACE AND FLIGHT TEST RADIO COORDINA

Employer id

46-4470936

Return Reference	Explanation
Form 990, Part VI, Line 6: Explanation of Classes of Members or Shareholder	MEMBER COMPANIES ARE ELIGIBLE FOR MEMBERSHIP BASED ON IF THE ORGANIZATION PC OPERATES UNDER AN INSTRUMENT OF AUTHORIZATION AS DEFINED BY THE FEDERAL COMMISSION RULES AND REGULATIONS. EACH MEMBER COMPANY NOT IN ARREARS WITH ENTITLED TO ONE VOTE WHEN ISSUES ARE BROUGHT TO A MEMBERSHIP VOTE. ASSOCIATI HAVE NO VOTING RIGHTS AND MEMBERSHIP IS BASED UPON THE ORGANIZATION'S ACTIVIT FLIGHT TEST RADIO COMMUNICATION
Form 990, Part VI, Line 7a: How	THE OFFICERS AND DIRECTORS ARE ELECTED BY THE MEMBERS AND CHARGED WITH OVE OF THE CORPORATION

Members or Shareholders Elect Governing Body	
Form 990, Part VI, Line 7b: Describe Decisions of Governing Body Approval by Members or Shareholders	THE OFFICERS AND DIRECTORS ARE ELECTED BY THE MEMBERS AND CHARGED WITH OVE OF THE CORPORATION
Form 990, Part VI, Line 11b: Form 990 Review Process	THE GOVERNING BOARD RECEIVED AN ELECTRONIC COPY OF FORM 990 TO REVIEW PRIOR
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	A NEW CONFLICT OF INTEREST POLICY IS SENT TO MEMBER REPRESENTATIVES EACH YEA DISCLOSURE OF CONFLICTS OF INTEREST. EACH MEMBER IS REQUIRED TO HAVE A SIGNED
Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	GOVERNING DOUCMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABE WH MADE IN WRITING TO THE BOARD OF DIRECTORS
Other Changes In Net Assets Or Fund Balances - Other Decreases	ROUNDING = -\$33

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