

From <https://projects.propublica.org/nonprofits>. © Copyright 2019 Pro Publica Inc.

## Nonprofit Explorer

Research Tax-Exempt Organizations

---

# AEROSPACE INDUSTRIES ASSOCIATION OF AMERICA INC

ARLINGTON, VA 22209-3928 | TAX-EXEMPT SINCE JULY 1947

---

## Full text of "Full Filing" for fiscal year ending Dec. 2016

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.

[← Back to main page for AEROSPACE INDUSTRIES ASSOCIATION OF AMERICA INC](#)

---

Jump to Schedule: Form 990

efile Public Visual Render Objectid: 201712829349300136 - Submission: 2017-10-09 TIN: 53-0023710

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.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2016

Open to Public  
Inspection

## A For the 2016 calendar year, or tax year beginning 01-01-2016, and ending 12-31-2016

## B Check if applicable:

- Address change  
Name change  
Initial return  
Final return/terminated  
Amended return  
Application pending

C Name of organization  
AEROSPACE INDUSTRIES ASSOCIATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)  
1000 WILSON BOULEVARD No 1700

Room/suite

City or town, state or province, country, and ZIP or foreign postal code  
ARLINGTON, VA 222093901

D Employer identification number

53-0023710

E Telephone number

(703) 358-1000

G Gross receipts \$ 25,031,173

## F Name and address of principal officer:

David Melcher  
1000 WILSON BOULEVARD No 1700  
ARLINGTON, VA 222093901

## H(a) Is this a group return for

subordinates? ☐ Yes ☒ NoH(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c)(6) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.AIA-AEROSPACE.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1959

M State of legal domicile: NY

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: U.S. Aerospace, defense, and homeland security industry remains preeminent and that its members are successful and profitable in a changing global market. AIA is the voice of the Aerospace, Defense, and Homeland Security Industry, representing the nation's leading manufacturers and suppliers of civil, military, and business aircraft, helicopters, UASS, space systems, aircraft engines, missiles, materiel, and related components, equipment, services, and information technology. Serving its members and the nation, AIA establishes industry goals and strategies, achieving consensus among its members and national and global stakeholders and implementing solutions to industry-wide issues related to national and homeland security, civil aviation, and space.		
	2 Check this box <input type="checkbox"/>		
	3	Number of voting members of the governing body (Part VI, line 1a)	72
	4	Number of independent voting members of the governing body (Part VI, line 1b)	72
	5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	66
6	Total number of volunteers (estimate if necessary)	72	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	
7b	Net unrelated business taxable income from Form 990-T, line 34	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	0
	9	Program service revenue (Part VIII, line 2g)	14,802,174
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	691,677
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,918,519
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,412,370
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	78,565
Expenses	14	Benefits paid to or for members (Part IX, column (A), line 4)	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,535,613
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	8,065,450
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	15,679,628
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	1,732,742
	20	Total assets (Part X, line 16)	24,649,822
	21	Total liabilities (Part X, line 26)	7,500,436
	22	Net assets or fund balances. Subtract line 21 from line 20	17,149,386

## 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	2017-10-06
	Date	
	GINETTE C COLOT SECRETARY-TREASURER/CFO	
	Type or print name and title	

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-prepared	PTIN
Frederick Longwood	Frederick Longwood			P00439715

**Part I  
Preparer  
Use Only**

Firm's name ▶ TATE & TRYON	Firm's EIN ▶ 52-1855942
Firm's address ▶ 2021 L ST NW Washington, DC 20036	Phone no. (202) 293-2200

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . ☒ Yes ☐ No**For Paperwork Reduction Act Notice, see the separate instructions.**

Cat. No. 11282Y

Form **990** (2016)

Page 2

Form 990 (2016)

Page 2

**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:

AIA is the voice of the Aerospace, Defense, and Homeland Security Industry, representing the nation's leading manufacturers and suppliers of civil, military, and business aircraft, helicopters, UASS, space systems, aircraft engines, missiles, materiel, and related components, equipment, services, and information technology. Serving its members and the nation, AIA establishes industry goals and strategies, achieving consensus among its members and national and global stakeholders and implementing solutions to industry-wide issues related to national and homeland security, civil aviation, and space.

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

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

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

If "Yes," describe these changes on Schedule O.

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

**4a** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
The National Security Policy Division is responsible for the implementation of national security policy-related goals stemming from the AIA strategic plan through the Defense Policy Council and the Acquisition Policy Council. The Defense Policy Council is composed of senior representatives from AIA's corporate membership and is responsible for defense policy, budget, resources, and strategy. The Acquisition Policy Council is comprised of the senior corporate contracts Vice Presidents of the major Executive Committee companies and is the primary coordination point for initial input development of acquisition topics for executive-level meetings with DOD.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
The Civil Aviation Division addresses common, noncompetitive domestic and international civil aviation issues. Strategic direction for the division is provided by the CEO-level Civil Aviation Leadership Council (CALC). The CALC sets the direction for the Civil Aviation Council (CAC) on the Association's top civil aviation policy priorities. The CAC then manages and interacts with the tactical activities of the Association's committees and working groups on issues such as aircraft noise and emissions, chemical policy, certification, rulemaking and safety, air traffic systems, unmanned aircraft systems and NextGen national air transportation system modernization. The CAC also coordinates with other aviation associations and safety agencies around the world. In addition, the Civil Aviation Division helps staff the Association's participation in the International Coordinating Council of Aviation Industry Associations, which provides input on global aviation issues to the International Civil Aviation Organization. Civil Aviation's activities are organized around three primary objectives: (1) promote global competitive trade; (2) support transformation aviation initiatives and technology; and (3) advance policies and research that enable sustainable growth of the industry.

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
The Space Systems Division is responsible for supporting the Association's Space Council and its primary committees, the National Security Space, Civil Space, and Commercial Space Committees. Space Systems works to develop industry positions on domestic and international space uses and uses these to educate Congress, federal agencies, and other space stakeholders on the importance of space activities to our national security, economy and international leadership. It also facilitates dialogue between the space industry and government decision makers to address critical issues, such as the health and competitiveness of the space industrial base, the state of space systems acquisitions, and the integral role space-based assets bear on the nation's infrastructure and national security. The Space Systems Division also manages the award winning Team America Rocketry Challenge, the largest student rocket competition in the world.

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶Form **990** (2016)














Page 3

Form 990 (2016)

Page 3

**Part IV Checklist of Required Schedules**

- |   | Yes      | No  |
|---|----------|-----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .  | <b>1</b> | No  |
| <b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .  | <b>2</b> | No  |
| <b>3</b> 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 . . . . .   | <b>3</b> | Yes |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> 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 . . . . .  | <b>4</b> |     |
| <b>5</b> 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 . . . . .                            | <b>5</b> | Yes |
| <b>6</b> 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 . . . . . | <b>6</b> | No  |
| <b>7</b> 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 . . . . .   | <b>7</b> | No  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .  | <b>8</b> | No  |
| <b>9</b> 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? . . . . . |          | No  |




If "Yes," complete Schedule D, Part IV 		<b>9</b>		Yes
<b>10</b>	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 	<b>10</b>		No
<b>11</b>	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.			
<b>a</b>	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	<b>11a</b>	Yes	
<b>b</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 	<b>11b</b>		No
<b>c</b>	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 	<b>11c</b>		No
<b>d</b>	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 	<b>11d</b>	Yes	
<b>e</b>	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	<b>11e</b>	Yes	
<b>f</b>	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 	<b>11f</b>		No
<b>12a</b>	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	<b>12a</b>	Yes	
<b>b</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 	<b>12b</b>		No
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>		No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>		No
<b>b</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 	<b>14b</b>	Yes	
<b>15</b>	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 	<b>15</b>		No
<b>16</b>	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 	<b>16</b>		No
<b>17</b>	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	<b>17</b>		No
<b>18</b>	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<b>18</b>		No
<b>19</b>	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	<b>19</b>		No

Form 990 (2016)

Form 990 (2016)

Page 4

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> 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 		No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	Yes	
<b>23</b> 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 	Yes	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
<b>b</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		
<b>26</b> 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		No
<b>27</b> 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		No
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,		

Part IV		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
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	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Yes	

Form 990 (2016)

Page 5

Form 990 (2016)

Page 5

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b>			
Check if Schedule O contains a response or note to any line in this Part V		<input type="checkbox"/>	
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	77
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	66
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> 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	Yes
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	

<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? .			
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>a</b> Gross income from members or shareholders . . . . .	<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . .	<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>		
<b>b</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 . . . . .	<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand . . . . .	<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>14b</b>		

Form 990 (2016)

Page 6

Form 990 (2016)

Page 6

**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**

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

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? . . . . .	<b>10a</b>	No
<b>b</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?	<b>10b</b>	
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	<b>11a</b>	No
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	Yes
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	No
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .	<b>12c</b>	Yes
<b>13</b> Did the organization have a written whistleblower policy? . . . . .	<b>13</b>	Yes



14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

**Section C. Disclosure**

17 List the States with which a copy of this Form 990 is required to be filed: VA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 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:  
**GINETTE COLOT 1000 WILSON BOULEVARD NO 1700 ARLINGTON, VA 222093901 (703) 358-1000**

Form 990 (2016)

Form 990 (2016)

Page 7

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) 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 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			
(1) Dennis A Muilenburg Chairman	1.50	X		X				0	0	0
(2) thomas Kennedy Vice Chairman	1.50	X		X				0	0	0
(3) Rory Yancheck Board Member	1.50	X						0	0	0
(4) Terry Stinson Board Member	1.50	X						0	0	0
(5) Eileen Drake Board Member	1.50	X						0	0	0
(6) Eric Roegner Board Member	1.50	X						0	0	0
(7) Hal Murdock Board Member	1.50	X						0	0	0
(8) John Langford Board Member	1.50	X						0	0	0

(9) Kenneth Bram Board Member	1.50	X							0	0	0
(10) Gerard DeMuro Board Member	1.50	X							0	0	0
(11) Rob Strain Board Member	1.50	X							0	0	0
(12) Roy Goldsmith Board Member	1.50	X							0	0	0
(13) Lance Kwasniewski Board Member	1.50	X							0	0	0
(14) Ross Mitchell Board Member	1.50	X							0	0	0
(15) Craig Pfefferman Board Member	1.50	X							0	0	0
(16) Michael McGuire Board Member	1.50	X							0	0	0
(17) Karl Hutter Board Member	1.50	X							0	0	0

Form 990 (2016)

Form 990 (2016)

Page 8

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(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			
(18) Robert Murphy Board Member	1.50	X						0	0	0
(19) David Zolet Board Member	1.50	X						0	0	0
(20) Douglas McCrosson Board Member	1.50	X						0	0	0
(21) Brendan Curran Board Member	1.50	X						0	0	0
(22) Bradley Feldmann Board Member	1.50	X						0	0	0
(23) David Adams Board Member	1.50	X						0	0	0
(24) Thomas Captain Board Member	1.50	X						0	0	0
(25) Anthony Reardon Board Member	1.50	X						0	0	0
(26) Nanda Kumar Board Member	1.50	X						0	0	0
(27) Raanan Horowitz Board Member	1.50	X						0	0	0
(28) Gary Spulak Board Member	1.50	X						0	0	0
(29) Curtis Reusser Board Member	1.50	X						0	0	0
(30) Richard Addi Board Member	1.50	X						0	0	0
(31) Steven Darson Board Member	1.50	X						0	0	0
(32) Bruce Whitman Board Member	1.50	X						0	0	0
(33) Phebe Novakovic Board Member	1.50	X						0	0	0



<https://projects.propublica.org/nonprofits/organizations/530023710/201712829349300136/full>

(70) George Whitesides Board Member	1.50	X							0	0	0
(71) Dave Castagnola Board Member	1.50	X							0	0	0
(72) Thomas Gendron Board Member	1.50	X							0	0	0
(73) David Melcher President & CEO	34.50 3.00			X				1,071,498	0	24,000	
(74) Robert Durbin Chief Operating Officer	35.50 2.00			X				382,499	0	6,016	
(75) Ginette Colot Chief Financial Officer	35.50 2.00			X				281,840	0	12,088	
(76) Ali Bahrami Vice President, Civil Aviation	36.50 1.00				X			313,043	0	2,185	
(77) John Luddy Vice President, National Security Policy	37.50				X			289,928	0	7,638	
(78) William Syers Vice President, Legislative Affairs	37.50				X			257,132	0	20,902	
(79) Frank Slazer Vice President, Space Systems	37.50				X			230,510	0	18,607	
(80) Saravanan Shanmuganathan Vice President, International Affairs	37.50				X			229,682	0	17,021	
(81) Paul Paolozzi Vice President, Communication	37.50				X			220,753	0	10,346	
(82) Trowbridge Littleton Vice President, Membership	37.50				X			168,979	0	12,370	
(83) Richard Efford Asst. VP, Legislative Affairs	37.50					X		279,218	0	15,097	
(84) Ronald Youngs Asst. VP, Acquisition Policy	37.50					X		238,200	0	0	
(85) George Novak Asst. VP, Civil Aviation	37.50					X		180,728	0	16,254	
(86) Keith Mordoff Asst. VP, Communications	37.50					X		181,853	0	13,710	
(87) Dan Olmes Asst. VP, Membership	37.50					X		168,979	0	15,916	
<b>1b Sub-Total</b>											
<b>c Total from continuation sheets to Part VII, Section A</b>											
<b>d Total (add lines 1b and 1c)</b>								4,494,842	0	192,150	

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 ► 25

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
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	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No

### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Dunaway & Cross 1100 Connecticut Ave NW Suite 410 Washington, DC 20036 RSM US LLP	Legal Services	401,755
331 West 3rd Street Suite 200 Davenport, IA 52801 Raffa PC	Information Technology Services	371,917
1899 L Street NW Suite 900 Washington, DC 20036 Katten Muchin Rosenman LLP	Accounting Services	273,447
1999 Harrison Street Oakland, CA 946120850 Personify	Legal Services	270,108
PO Box 759470 Baltimore, MD 212759470	Membership database upgrade/annual fees	219,308
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 ► 10		

Form 990 (2016)

**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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . .	<b>1a</b>				
	<b>b</b> Membership dues . . .	<b>1b</b>				
	<b>c</b> Fundraising events . . .	<b>1c</b>				
	<b>d</b> Related organizations	<b>1d</b>				
	<b>e</b> Government grants (contributions)	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f . . . . .					
<b>Program Service Revenue</b>			Business Code			
	<b>2a</b> MEMBERSHIP DUES		900099	10,961,897	10,961,897	
	<b>b</b> CONFERENCES & MEETINGS		900099	2,035,172	2,035,172	
	<b>c</b> AIR SHOW		900099	899,723	899,723	
	<b>d</b> ROCKET CONTEST		900099	348,271	111,831	236,440
	<b>e</b> SPECIAL PROGRAMS		900099	27,673	27,673	
	<b>f</b> All other program service revenue .			33,207	33,207	
	<b>g Total.</b> Add lines 2a-2f . . . . .			14,305,943		
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		847,775			847,775
	<b>4</b> Income from investment of tax-exempt bond proceeds					
	<b>5</b> Royalties . . . . .		1,977,972			1,977,972
	<b>6a</b> Gross rents	(i) Real (ii) Personal				
	<b>b</b> Less: rental expenses					
	<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses					
	<b>c</b> Gain or (loss)					
	<b>d</b> Net gain or (loss) . . . . .					
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . .	a				
	<b>b</b> Less: direct expenses . . . . .	b				
	<b>c</b> Net income or (loss) from fundraising events . . . . .					
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	a				
	<b>b</b> Less: direct expenses . . . . .	b				
	<b>c</b> Net income or (loss) from gaming activities . . . . .					
	<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	a				
<b>b</b> Less: cost of goods sold . . . . .	b					
<b>c</b> Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue		Business Code				
<b>11a</b>						
<b>b</b>						

c					
d All other revenue . . . . .					
e Total. Add lines 11a–11d . . . . .					
12 Total revenue. See Instructions. . . . .					
		17,035,577	14,069,503	0	2,966,074

Form 990 (2016)

Form 990 (2016)

Page 10

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	91,870			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	3,607,268			
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	4,073,798			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	152,379			
9 Other employee benefits . . . . .	588,022			
10 Payroll taxes . . . . .	394,394			
11 Fees for services (non-employees):				
a Management . . . . .				
b Legal . . . . .	401,528			
c Accounting . . . . .	33,200			
d Lobbying . . . . .				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees . . . . .	110,963			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,352,632			
12 Advertising and promotion . . . . .	65,882			
13 Office expenses . . . . .	337,414			
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .	755,990			
17 Travel . . . . .	542,236			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	2,534,077			
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	387,367			
23 Insurance . . . . .	53,623			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DUES & SUBSCRIPTIONS	188,010			
b TAXES, LICENSES, FEES	152,863			
c MISCELLANEOUS OTHER EXP	26,816			
d Employee Development/Tr	12,599			
e All other expenses	8,000			
25 Total functional expenses. Add lines 1 through 24e	15,870,931			

**26 Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).

Form 990 (2016)

Page 11

Form 990 (2016)

Page 11

**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	<b>1</b> Cash—non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	1,390,909	<b>2</b>	4,044,363
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	990,425	<b>4</b>	817,127
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	540,837	<b>9</b>	345,057
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	3,863,721		
	<b>10b</b> Less: accumulated depreciation	2,840,329		
	<b>11</b> Investments—publicly traded securities . . . . .	16,516,735	<b>11</b>	16,921,872
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	4,489,895	<b>15</b>	4,350,366
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	24,649,822	<b>16</b>	27,502,177	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .	1,220,699	<b>17</b>	1,518,635
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	1,121,306	<b>19</b>	1,163,841
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	5,158,431	<b>25</b>	6,027,546
<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	7,500,436	<b>26</b>	8,710,022	
Net Assets or Fund Balances	<b>27</b> <b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b> Unrestricted net assets	17,149,386	<b>27</b>	18,792,155
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>30</b> <b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances</b> . . . . .	17,149,386	<b>33</b>	18,792,155
	<b>34</b> <b>Total liabilities and net assets/fund balances</b> . . . . .	24,649,822	<b>34</b>	27,502,177

Form 990 (2016)

Page 12

Form 990 (2016)

Page 12

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b> Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	17,035,577
--	----------	------------

2	Total expenses (must equal Part IX, column (A), line 25)	2	15,870,931
3	Revenue less expenses. Subtract line 2 from line 1	3	1,164,646
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,149,386
5	Net unrealized gains (losses) on investments	5	908,688
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	-430,565
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	18,792,155

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
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.	Yes	
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?		No
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 (2016)

Form 990 (2016)

**Additional Data**[Return to Form](#)

Software ID:

Software Version:

**Form 990, Special Condition Description:**

Special Condition Description

[1 Back to Top](#)

<a href="#">efile Public Visual Render</a>	Objectid: 201712829349300136 - Submission: 2017-10-09	TIN: 53-0023710
<b>SCHEDULE C</b> (Form 990 or 990-EZ)	<b>Political Campaign and Lobbying Activities</b> 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. ►Information about Schedule C (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No. 1545-0047 <b>2016</b> Open to Public Inspection
Department of the Treasury Internal Revenue Service		

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 AEROSPACE INDUSTRIES ASSOCIATION	Employer identification number 53-0023710
--	--

**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)	\$ 0
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?.....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4a	Was a correction made? .....	<input type="checkbox"/> Yes <input type="checkbox"/> 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 functionactivities.....	\$	0
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .....	\$	0
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.....	\$	
4	Did the filing organization file <b>Form 1120-POL</b> for this year?.....	<input type="checkbox"/> Yes <input type="checkbox"/> 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 apolitical 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) Aerospace Industries of America Inc Political Action Committee	1000 Wilson Blvd Suite 1700 Arlington, VA 22209	27-0796294		
2				
3				
4				
5				
6				

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Cat. No. 50084S

Schedule C (Form 990 or 990-EZ) 2016

Page 2

Schedule C (Form 990 or 990-EZ) 2016

Page 2

**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.														
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e.</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000.</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000.</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000.</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000.</td></tr></table>		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.		
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?.....	<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total



<b>2a</b>	Lobbying nontaxable amount				
<b>b</b>	Lobbying ceiling amount (150% of line 2a, column(e))				
<b>c</b>	Total lobbying expenditures				
<b>d</b>	Grassroots nontaxable amount				
<b>e</b>	Grassroots ceiling amount (150% of line 2d, column (e))				
<b>f</b>	Grassroots lobbying expenditures				

Schedule C (Form 990 or 990-EZ) 2016

Page 3

Schedule C (Form 990 or 990-EZ) 2016

Page 3

**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
<b>1</b>	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:			
<b>a</b>	Volunteers? .....			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b>	Media advertisements? .....			
<b>d</b>	Mailings to members, legislators, or the public? .....			
<b>e</b>	Publications, or published or broadcast statements? .....			
<b>f</b>	Grants to other organizations for lobbying purposes? .....			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b>	Other activities? .....			
<b>j</b>	Total. Add lines 1c through 1i .....			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b>	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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	No
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	No
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b> Yes	

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

<b>1</b>	Dues, assessments and similar amounts from members .....	<b>1</b>	10,961,897
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year .....	<b>2a</b>	1,696,551
<b>b</b>	Carryover from last year .....	<b>2b</b>	-327,360
<b>c</b>	Total .....	<b>2c</b>	1,369,191
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>	2,192,379
<b>4</b>	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?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	-823,188

**Part IV Supplemental Information**

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

Return Reference	Explanation
Part I-A, Line 1:	ACTIVITY CONDUCTED THROUGH A SECTION 527 POLITICAL ACTION COMMITTEE.

Schedule C (Form 990 or 990EZ) 2016

Additional Data

Return to Form

Software ID:

Software Version:

[Back to Top](#)

**SCHEDULE D**  
(Form 990)**Supplemental Financial Statements**

OMB No. 1545-0047

**2016**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

▶ **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.**

Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**Name of the organization**

AEROSPACE INDUSTRIES ASSOCIATION

**Employer identification number**

53-0023710

**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).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<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 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 8/17/06, 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 . . . . . ▶ \$ \_\_\_\_\_

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 52283D

Schedule D (Form 990) 2016

**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 <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

- 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 . . . . .					
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:

	Yes	No
--	-----	----

- (i) unrelated organizations . . . . .

3a(i)		
-------	--	--

- (ii) related organizations . . . . .

3a(ii)		
--------	--	--

- 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 . . . . .				
b Buildings . . . . .				
c Leasehold improvements		1,338,218	1,096,277	241,941
d Equipment . . . . .		1,137,050	711,803	425,247
e Other . . . . .		1,388,453	1,032,249	356,204
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,023,392

Schedule D (Form 990) 2016

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

See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other . . . . .		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

**Part VIII Investments** ☐ **Program Related.**

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

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

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

(a) Description	(b) Book value
(1) SECTION 457 DEFERRED COMP PLAN	338,692
(2) ROYALTIES RECEIVABLE	656,481
(3) DUE FROM RELATED ENTITIES	110,765
(4) PREPAID PENSION COSTS	3,244,428
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	4,350,366

**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	
DEFERRED COMPENSATION	338,692
DEFERRED LIABILITIES AIR SHOWS + OTHER	865,699
DEFERRED RENT	561,895
ADDITIONAL PENSION LIABILITY	4,261,260
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) ▶	6,027,546

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 ☐

Schedule D (Form 990) 2016

Page 4

Schedule D (Form 990) 2016

Page 4

**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	17,944,265
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments . . . . .	2a	908,688
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	908,688
3	Subtract line 2e from line 1 . . . . .	3	17,035,577
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>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .		<b>5</b>	17,035,577

## 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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	15,870,931
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	15,870,931
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .		<b>5</b>	15,870,931

## 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
------------------	-------------

Schedule D (Form 990) 2016

### Additional Data

[Return to Form](#)

Software ID:

Software Version:

[↑ Back to Top](#)

<a href="#">efile</a> <a href="#">Public</a> <a href="#">Visual</a> <a href="#">Render</a>		<b>ObjectID:</b> 201712829349300136 - <b>Submission:</b> 2017-10-09		<b>TIN:</b> 53-0023710	
<b>SCHEDULE F</b> <b>(Form 990)</b>		<b>Statement of Activities Outside the United States</b>			OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		<p>► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.</p> <p>► Attach to Form 990.</p> <p>► Information about Schedule F (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</p>			<div>2016</div> Open to Public Inspection
Name of the organization AEROSPACE INDUSTRIES ASSOCIATION			Employer identification number 53-0023710		

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

[illegible]

3a Sub-total	0	0			880,396
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			880,396

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50082W

Schedule F (Form 990) 2016

[Back to Top](#)

<a href="#">efile Public Visual Render</a>		Objectid: 201712829349300136 - Submission: 2017-10-09	TIN: 53-0023710
<b>Schedule I (Form 990)</b>		<b>Grants and Other Assistance to Organizations, Governments and Individuals in the United States</b> Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No. 1545-0047 <b>2016</b> Open to Public Inspection
Department of the Treasury Internal Revenue Service			
Name of the organization AEROSPACE INDUSTRIES ASSOCIATION			Employer identification number 53-0023710

<b>Part I General Information on Grants and Assistance</b>							
<b>1</b> Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? <span style="float:right"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span>							
<b>2</b> Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.							
<b>Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. ▶							
<b>3</b> Enter total number of other organizations listed in the line 1 table. ▶							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat. No. 50055P

Schedule I (Form 990) 2016

Schedule I (Form 990) 2016						Page 2
<b>Part III Grants and Other Assistance to Domestic Individuals.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.						
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
(1) THE ANNUAL ROCKET COMPETITION	60	90,000				
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
<b>Part IV Supplemental Information.</b> 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:	ROCKET CONTEST CRITERIA FOR WINNING PLACES IN THE FINAL FLY-OFF OF THE COMPETITION WILL BE DETERMINED ON THE BASIS OF HOW CLOSE THE PORTION OF THE ROCKET CONTAINING THE EGG COMES TO THE DESIGNATED TARGET DURATION OF 45 SECONDS AND THE DESIGNATED TARGET ALTITUDE OF 750 FEET, AS DETERMINED BY THE SUM OF THE ALTITUDE AND DURATION SCORES ABOVE. AT THE FLY-OFFS, 20 TEAMS WILL BE INVITED TO MAKE A SECOND FLIGHT AT THE LAST FLIGHT ROUND OF THE DAY, BASED ON THE RESULTS OF THEIR FIRST FLIGHTS. CASH PRIZES, WHICH ARE AWARDED TO THE TOP TEN PLACES, WILL BE AWARDED ONLY TO THOSE TEAMS THAT MAKE A SECOND FULLY QUALIFIED FLIGHT. IN THIS FINAL ROUND, ROCKETS WHICH HAVE ISSUES WHICH WOULD OTHERWISE RATE A REPLACEMENT FLIGHT UNDER TEAM AMERICA ROCKETRY CONTEST RULES #7 OR #9 WILL NOT RECEIVE A REPLACEMENT FLIGHT. THE TOP TEN FINAL PLACES WILL BE RANKED ON THE BASIS OF THE SUM OF THE SCORES FROM THE TWO QUALIFIED FLIGHTS MADE AT THE FLY-OFFS. PLACES ELEVEN UP TO ONE HUNDRED WILL BE AWARDED TO THE REMAINING TEAMS BASED ON THE SCORES FROM THEIR FIRST FLIGHT. TIES WILL RESULT IN POOLING AND EVEN SPLITTING OF THE PRIZES FOR THE AFFECTED PLACE(S) -- FOR EXAMPLE, A TWO-WAY TIE FOR 2ND PLACE WOULD RESULT IN A MERGER AND EVEN DIVISION OF THE PRIZES FOR 2ND AND 3RD PLACES. AEROSPACE INDUSTRIES ASSOCIATION RESERVES THE RIGHT TO MAKE ALL LAST AND FINAL CONTEST DETERMINATIONS. DURATION SCORING SCORES SHALL BE BASED ON TOTAL FLIGHT DIRECTION OF THE PORTION OF THE ROCKET CONTAINING THE EGG, MEASURED FROM FIST MOTION AT LIFTOFF FROM THE LAUNCH PAD UNTIL THE MOMENT OF LANDING OR UNTIL THE ROCKET CAN NO LONGER BE SEEN DUE TO DISTANCE OR TO AN OBSTACLE. TIMES MUST BE MEASURED INDEPENDENTLY BY TWO PEOPLE NOT ON THE TEAM, ONE OF WHOM IS THE OFFICIAL NATIONAL ASSOCIATION OF ROCKETRY-MEMBER ADULT OBSERVER, USING SEPARATE ELECTRONIC STOPWATCHES ACCURATE TO 0.01 SECONDS. THE OFFICIAL DURATION WILL BE THE AVERAGE OF THE TWO TIMES, ROUNDED TO THE NEAREST 0.01 SECOND. IF ONE STOPWATCH MALFUNCTIONS, THE REMAINING SINGLE TIME WILL BE USED. DURATION SCORES WILL BE COMPUTED BY TAKING THE ABSOLUTE DIFFERENCE BETWEEN 45 SECONDS AND THE MEASURED AVERAGE FLIGHT DURATION TO THE NEAREST 1/100 SECOND (THIS DIFFERENCE IS ALWAYS A POSITIVE NUMBER, OR ZERO), AND MULTIPLYING THIS BY 2. ALTITUDE SCORING: ROCKETS MUST CONTAIN THE COMMERCIAL ELECTRONIC ALTIMETER (PERFECTFLITE MODEL ALT 15K OR ALT 15K REV 2) APPROVED FOR USE IN THE TEAM AMERICA EVENT, IN A COMPARTMENT THAT IS PROPERLY VENTED TO THE ATMOSPHERE. THE ALTIMETER MUST BE INSPECTED BY AN NATIONAL ASSOCIATION OF ROCKETRY OFFICIAL BOTH BEFORE AND AFTER THE FLIGHT, AND MAY NOT BE MODIFIED IN ANY MANNER. THE ALTIMETER MUST BE CONFIRMED BY THIS OFFICIAL TO HAVE RESET TO ZERO BEFORE FLIGHT. THE ALTITUDE OF THE PORTION OF THE ROCKET CONTAINING THE EGG, AS RECORDED BY THIS ALTIMETER, WILL BE THE SOLE BASIS FOR JUDGING THE ALTITUDE SCORE. THE SCORE WILL BE THE ABSOLUTE DIFFERENCE BETWEEN 750 FEET AND THE ALTIMETER-REPORTED ALTITUDE IN FEET (THIS DIFFERENCE IS ALWAYS A POSITIVE NUMBER, OR ZERO).					

Schedule I (Form 990) 2016

Software ID:  
Software Version:

[1 Back to Top](#)

efile Public Visual Render

Objectid: 201712829349300136 - Submission: 2017-10-09

TIN: 53-0023710

Schedule J  
(Form 990)

Compensation Information

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

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.  
▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](#).

2016  
Open to Public  
Inspection

Name of the organization  
AEROSPACE INDUSTRIES ASSOCIATION

Employer identification number  
53-0023710

Part I

Questions Regarding Compensation

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

Schedule J (Form 990) 2016

Page 2

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(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				
1David Melcher President & CEO	(i)	797,276	266,000	8,222	24,000	1,779	1,097,277	0
	(ii)	0	0	0	0	0	0	0
2Robert Durbin Chief Operating Officer	(i)	320,364	60,000	2,135	6,016	954	389,469	0
	(ii)	0	0	0	0	0	0	0
3Ginette Colot Chief Financial Officer	(i)	223,840	40,000	18,000	12,088	4,499	298,427	0
	(ii)	0	0	0	0	0	0	0
4Ali Bahrami Vice President, Civil Aviation	(i)	263,043	50,000	0	0	6,684	319,727	0
	(ii)	0	0	0	0	0	0	0
5John Luddy Vice President, National Security Po	(i)	249,928	40,000	0	0	10,157	300,085	0
	(ii)	0	0	0	0	0	0	0
6William Syers Vice President, Legislative Affairs	(i)	222,132	35,000	0	12,843	10,578	280,553	0
	(ii)	0	0	0	0	0	0	0
7Frank Slazser Vice President, Space Systems	(i)	195,436	35,074	0	10,592	12,462	253,564	0
	(ii)	0	0	0	0	0	0	0



	(ii)	0	0	0	0	0	0	0
8Saravanan Shanmuganathan Vice President, International Affairs	(i)	193,282	35,000	1,400	10,500	10,958	251,140	0
	(ii)	0	0	0	0	0	0	0
9Paul Paolozzi Vice President, Communication	(i)	189,623	30,000	1,130	9,749	3,204	233,706	0
	(ii)	0	0	0	0	0	0	0
10Trowbridge Littleton Vice President, Membership	(i)	143,879	25,000	100	8,905	5,436	183,320	0
	(ii)	0	0	0	0	0	0	0
11Richard Efford Asst. VP, Legislative Affairs	(i)	242,768	36,450	0	14,015	5,581	298,814	0
	(ii)	0	0	0	0	0	0	0
12Ronald Youngs Asst. VP, Acquisition Policy	(i)	205,200	33,000	0	0	2,439	240,639	0
	(ii)	0	0	0	0	0	0	0
13George Novak Asst. VP, Civil Aviation	(i)	156,262	24,466	0	9,383	10,872	200,983	0
	(ii)	0	0	0	0	0	0	0
14Keith Mordoff Asst. VP, Communications	(i)	169,648	12,205	0	8,747	7,807	198,407	0
	(ii)	0	0	0	0	0	0	0
15Dan Olmes Asst. VP, Membership	(i)	143,879	25,000	100	8,905	9,132	187,016	0
	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2016

Page 3

Schedule J (Form 990) 2016

Page 3

## 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	PRESIDENT AND CEO, David Melcher PER HIS EMPLOYMENT CONTRACT IS ENTITLED TO A PERSONAL DRIVER, COUNTRY CLUB MEMBERSHIP DUES, AND TO FLY FIRST CLASS WHEN TRAVELING FOR AIA BUSINESS. AIA STAFF IS ENTITLED TO TRAVEL BUSINESS CLASS IF THEY ARE TRAVELING OVER 13 HOURS DURING A SINGLE FLIGHT.

Schedule J (Form 990) 2016

## Additional Data

Return to Form

Software ID:

Software Version:

[Back to Top](#)

efile Public Visual Render ObjectID: 201712829349300136 - Submission: 2017-10-09 TIN: 53-0023710

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury  
Internal Revenue ServiceName of the organization  
AEROSPACE INDUSTRIES ASSOCIATION

Employer identification number

53-0023710

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	AIA is a trade association represented by companies who have an interest in the Aerospace industry.
Form 990, Part VI, Section A, line 7a	Members of the Association vote annually on the representatives of the governing body (board of directors and executive committee and officers of the corporation).
Form 990, Part VI, Section B, line 11b	The 990 is completed by the organization's outside accounting firm. The forms are then forwarded to the CFO/secretary/treasurer for final review and signature.
Form 990, Part VI, Section B, line 12c	NEW EMPLOYEES ARE REQUIRED TO SIGN RECEIPT THAT THEY HAVE RECEIVED A CONFLICT OF INTEREST POLICY DOCUMENT. ALL EMPLOYEES ARE REQUIRED TO SIGN OFF ANNUALLY ON THE CONFLICT OF INTEREST POLICY DOCUMENT. AIA DOES NOT REQUIRE ALL OFFICERS OR DIRECTORS TO SIGN AN ANNUAL POLICY.
Form 990, Part VI, Section B, line 15a	In hiring the CEO, the search committee looked at comparative data including benefits, compensation, bonuses, and other market data prior to making an offer of employment. In addition, the search committee used an outside consulting company to assist in the hiring process and that company also provided expertise in the hiring process. Contemporaneous substantiation of the deliberation and decision are documented by AIA general counsel.
Form 990, Part VI, Section C, line 19	The organization's governing documents and conflict of interest policy are made available to the public upon request.
Form 990, Part XI, line 9:	MINIMUM PENSION LIABILITY ADJUSTMENT -430,565.

Form 990, Part XII, Line 2c	The process remains unchanged from the prior year.
-----------------------------------	--

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 51056K

Schedule O (Form 990 or 990-EZ) 2016

Additional Data

Return to Form

Software ID:  
Software Version:

1 Back to Top

efile Public Visual Render	ObjectID: 201712829349300136 - Submission: 2017-10-09	TIN: 53-0023710
SCHEDULE R (Form 990)	<b>Related Organizations and Unrelated Partnerships</b> ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No. 1545-0047 <b>2016</b> Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization AEROSPACE INDUSTRIES ASSOCIATION		Employer identification number 53-0023710

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
(1) NATIONAL INSTITUTE FOR AEROSPACE STUDIES & SERVICES INC 1000 Wilson Blvd Ste 1700 Arlington, VA 22209 52-1672025	Scientific Research	VA	501(c)(6)		AEROSPACE INDUSTRIES ASSOCIATION	Yes No
(2) Aerospace Industries of America Inc Political Action Committee 1000 Wilson Blvd Ste 1700 Arlington, VA 22209 27-0796294	PAC	VA	527		AEROSPACE INDUSTRIES ASSOCIATION	Yes
(3) NATIONAL CENTER FOR ADVANCED TECHNOLOGIES INC 1000 Wilson Blvd Ste 1700 Arlington, VA 22209 52-1625043	Scientific Research	DC	501(c)(3)	Line 7	AEROSPACE INDUSTRIES ASSOCIATION	No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Schedule R (Form 990) 2016

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

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

Schedule R (Form 990) 2016

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

<https://projects.propublica.org/nonprofits/organizations/530023710/201712829349300136/full>

Part VII	<b>Supplemental Information</b>
Provide additional information for responses to questions on Schedule R (see instructions).	
Return Reference	Explanation

Schedule R (Form 990) 2016

Additional Data

Return to Form

Software ID:

Software Version: