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.

OMB No. 1545-0047

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning and ending Check if applicable: C Name of organization D Employer identification number THE MOUNT VERNON LADIES' ASSOCIATION Address change OF THE UNION Name change 54-0564701 GEORGE WASHINGTON'S MOUNT **VERNON** Doing business as Initial return Room/suite E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Final return/ termin-ated 3200 MOUNT VERNON MEMORIAL HIGHWAY (703)780-2000 71.490.404. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return MOUNT VERNON, VA 22121 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: PHILIP L. MANNO for subordinates? Yes X No SAME AS C ABOVE Yes **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.MOUNTVERNON.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Association Other > L Year of formation: 1853 M State of legal domicile: VA Part I Summary Briefly describe the organization's mission or most significant activities: TO PRESERVE, RESTORE, AND MANAGE **Activities & Governance** THE ESTATE OF GEORGE WASHINGTON AND EDUCATE VISTORS ABOUT HIS LIFE. if the organization discontinued its operations or disposed of more than 25% of its net assets. 23 3 Number of voting members of the governing body (Part VI, line 1a) 23 Number of independent voting members of the governing body (Part VI, line 1b) 4 769 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 314 Total number of volunteers (estimate if necessary) 6 2,172,249. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 38 0. 7h **Current Year Prior Year** 10,453,714. 26,117,389. Contributions and grants (Part VIII, line 1h) 8 15,777,777. 15,687,415. Program service revenue (Part VIII, line 2g) 7,278,122. 6,029,399. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 11,248,069. 10,985,095. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 43,508,959. 60,068,021. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 506,925. 545,568. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 24,177,304. 24,484,567. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 185,200. 162,000. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 24,436,572. 24,491,046. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 49,306,001. 49,683,181. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -5,797,042. 10,384,840. Revenue less expenses. Subtract line 18 from line 12 **End of Year Beginning of Current Year** 5 295,168,149. 286,036,646. Total assets (Part X, line 16) 25,377,420. 26,467,050. 21 Total liabilities (Part X, line 26) 三年 268,701,099. 260,659,226 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign PHILIP L. MANNO, CHIEF FINANCIAL OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature 11/11/19| "self-employed FRANK H. SMITH P00639053 Paid Firm's name ▶ MARCUM, LLP Firm's EIN ▶ 11-1986323 Preparer Firm's address 1899 L STREET, NW, SUITE 850 Use Only Phone no. (202) 227-4000

X Yes

WASHINGTON, DC 20036

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

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OF THE UNI	ION			

Pai	t 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:	
	THE MISSION OF THE MOUNT VERNON LADIES' ASSOCIATION (THE ASSOCIATION)	_
	IS TO PRESERVE, RESTORE, AND MANAGE THE ESTATE OF GEORGE WASHINGTON TO	_
	THE HIGHEST STANDARDS AND TO EDUCATE VISITORS AND PEOPLE THROUGHOUT	_
	THE WORLD ABOUT THE LIFE AND LEGACIES OF GEORGE WASHINGTON, SO THAT	_
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?)
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X 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.	
 4а	(Code:) (Expenses \$ 26,877,121. including grants of \$ 530,568.) (Revenue \$ 24,097,264.	_
та	EDUCATION:	,
		_
	WE WELCOMED 1,068,000 VISITORS TO THE ESTATE IN 2018, 350,000 OF WHICH	_
	WHERE STUDENTS WHO VISITED FROM ALL 50 OF THE UNITED STATES AND AROUND	_
	THE WORLD. WE REMAINED THE MOST POPULAR HISTORIC ESTATE IN AMERICA, AND	_
	REACHED EVEN MORE INDIVIDUALS THROUGH OUR ONLINE PRESENCE.	_
		_
	IT WAS A NOTABLE YEAR FOR VISITS BY NEWSMAKERS AND LUMINARIES. ON APRIL	
	23, PRESIDENT DONALD TRUMP AND FIRST LADY MELANIA TRUMP HOSTED THEIR	
	FRENCH COUNTERPARTS, EMMANUEL AND BRIGITTE MACRON, AT MOUNT VERNON FOR	
	AN INTIMATE DINNER. GEORGE WASHINGTON'S RECONSTRUCTED DISTILLERY SERVED	_
	AS THE BACKDROP FOR THE JUNE 19 SIGNING	_
4b	(Code:) (Expenses \$15,392,439. including grants of \$15,000.) (Revenue \$)
	HISTORIC PRESERVATION AND COLLECTIONS:	_
	AG DADE OF A GOMPDENIENCINE DIAM EO DEGEODE FACIL DOOM OF THE MANGEON EO	_
	AS PART OF A COMPREHENSIVE PLAN TO RESTORE EACH ROOM OF THE MANSION TO THE MOST ACCURATE POSSIBLE REPRESENTATION OF ITS 1799 APPEARANCE, WE	_
	THE MOST ACCURATE POSSIBLE REPRESENTATION OF ITS 1799 APPEARANCE, WE FOCUSED OUR ATTENTION IN 2018 ON THE FRONT PARLOR. TO INFORM THE	_
	PROJECT, THE ARCHITECTURAL AND CURATORIAL TEAMS PORED OVER A RICH	_
	COLLECTION OF PRIMARY SOURCES, INCLUDING WASHINGTON'S PAPERS, DOCUMENTS	_
	FROM HIS HEIRS, AND THE ARCHIVES OF THE MOUNT VERNON LADIES'	_
	ASSOCIATION. FROM THERE, THE ARCHITECTURAL TEAM LAUNCHED AN IN-DEPTH	_
	PHYSICAL INVESTIGATION INTO THE SPACE, ASSESSING EVERY ELEMENT FROM THE	_
	PANELING VISIBLE TODAY TO THE PLASTER, LATH, AND FRAMING MEMBERS DATING	_
	TO THE 1730'S AND 1740'S. WORK ON THE WOOD-PANELED WALLS LED TO A	_
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		_
		_
		_
		_
		_
		_
		_
		—
		_
		—
	Other program services (Describe in Schedule O.)	_
тu	(Expenses \$ including grants of \$) (Revenue \$)	
 4е	Total program service expenses 42,269,560.	_
	Form 990 (201	8)

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THE MOUNT VERNON LADIES' ASSOCIATION

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Form	990 (2018) OF THE UNION 54-0564	1701	Р	age 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
0	, ,	8	Х	
0	Schedule D, Part III	 °	25	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	1,0	Х	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Λ	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l.,	Х	
	Part VI	11a		
р	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	l		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	l.,		x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	l		₹.
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	l	37	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٦,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			٦,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			.,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	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	17	Х	
18	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	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	
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THE MOUNT VERNON LADIES' ASSOCIATION

Form 990 (2018) OF THE UNION

Part IV | Checklist of Required Schedules

ı aı	Continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		v	
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i>	·		
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	.		
	Schedule K. If "No," go to line 25a	24a	Х	
b		24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	<u>25a</u>		X
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	05.		
06	Schedule L, Part I	<u>25b</u>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	26		x
27	complete Schedule L, Part II 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	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	/ 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office	cer,		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			,,
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N. Part II	32		x
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		х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	I		,,
	If "Yes," complete Schedule R, Part V, line 2	<u>36</u>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			, .
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
Par	irt V Statements Regarding Other IRS Filings and Tax Compliance	30	-23	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	211		
		0		
С	Bill 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	(gambling) winnings to prize winners?	1c	Х	

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1c X Form 990 (2018) 2018.05000 THE MOUNT VERNON LADIES CORY

Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 769 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х **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)? X 4a **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? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). Х 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 Х 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. 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 Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Х Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Form 990 (2018)

If "Yes," complete Form 4720, Schedule O.

OF THE UNION 54-0564701 Page 6 Form 990 (2018) Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 23 **1a** Enter the number of voting members of the governing body at the end of the tax year 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. 23 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c in Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a 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 List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Another's website Other (explain in Schedule O)

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. State the name, address, and telephone number of the person who possesses the organization's books and records

PHILIP L. MANNO - 703-780-2000 P.O. BOX 110, MOUNT VERNON, VA

> SEE SCHEDULE O FOR FULL LIST OF STATES

Form **990** (2018)

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OF THE UNION

54-0564701

<u> Page</u> **7**

Form 990 (2018) 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 (Ď), (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, and 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.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Positio				one	Reportable	Reportable	Estimated
	hours per week		box, unless person is both an officer and a director/trustee)		compensation from	compensation from related	amount of other			
	(list any	tor						the	organizations	compensation
	hours for	r direc				ted		organization	(W-2/1099-MISC)	from the
	related	stee o	truste		ao	bensa		(W-2/1099-MISC)		organization
	organizations below	ual tru	ional 1		ploye	t com				and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SARAH MILLER COULSON	30.00		_							
REGENT		Х		Х				0.	0.	0.
(2) ANN CADY SCOTT	20.00									
SECRETARY		Х		Х				0.	0.	0.
(3) MARGARET HARTMAN NICHOLS	20.00									
TREASURER		Х		Х				0.	0.	0.
(4) MARGARET APPLETON ALLISON	10.00									
VICE REGENT		Х						0.	0.	0.
(5) CLAUDIA PUIG AMUNDSEN	10.00								_	_
VICE REGENT		Х						0.	0.	0.
(6) MARY LANG BISHOP	10.00	1								
VICE REGENT		Х						0.	0.	0.
(7) ANN HAUNSCHILD BOOKOUT	10.00	ļ								
VICE REGENT	1000	Х						0.	0.	0.
(8) MARIBETH ARMSTRONG BORTHWICK	10.00	.,							0	0
VICE REGENT	10.00	Х						0.	0.	0.
(9) JUDITH WILSON GRANT	10.00	3,7							0	0
VICE REGENT	10 00	Х						0.	0.	0.
(10) ELIZABETH MEDLIN HALE	10.00	.						0.	0.	0
VICE REGENT	10.00	Х						0.	0.	0.
(11) LUCIA BOSQUI HENDERSON VICE REGENT	10.00	Х						0.	0.	0.
(12) VIRGINIA DAWSON LANE	10.00							0.	0.	<u></u>
VICE REGENT	10.00	Х						0.	0.	0.
(13) HELEN HERBOTH LAUGHERY	10.00							•	•	
VICE REGENT	1000	х						0.	0.	0.
(14) LIZ ROLLINS MAURAN	10.00									
VICE REGENT		х						0.	0.	0.
(15) CAMERON KOCK MAYER	10.00							-	-	-
VICE REGENT		Х						0.	0.	0.
(16) CATHERINE HAMILTON MAYTON	10.00								-	
VICE REGENT		Х			L	L	L	0.	0.	0.
(17) ANNE NEAL PETRI	10.00									
VICE REGENT		Х						0.	0.	0.

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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)	1		(C				(D)	(E)	(F)
Name and title	Average	(do		Posi		l than d	nne	Reportable	Reportable	Estimated
	hours per	box,	, unles	s per	son i	s both	n an	compensation	compensation	amount of
	week		cer an	a a a	recto	r/trus	tee)	from	from related	other
	(list any hours for	recto						the	organizations	compensation
	related	or di	ee ee			sated		organization	(W-2/1099-MISC)	from the
	organizations	rustee	trust		e e	n ben		(W-2/1099-MISC)		organization and related
	below	dual t	ntio na	_	nploy	st cor	ъ			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			3
(18) SUSAN STEVENS REEDER	10.00									
VICE REGENT		Х						0.	0.	0.
(19) LAURA PEEBLES RUTHERFORD	10.00									
VICE REGENT		Х						0.	0.	0.
(20) ANDREA NOTMAN SAHIN	10.00								_	_
VICE REGENT		Х						0.	0.	0.
(21) JEAN ARMFIELD SHERRILL	10.00									
VICE REGENT	1000	Х						0.	0.	0.
(22) SUSAN MARSHALL TOWNSEND	10.00									
VICE REGENT	1000	Х						0.	0.	0.
(23) CATHERINE MARLETTE WADDELL	10.00								•	•
VICE REGENT	40.00	Х						0.	0.	0.
(24) DOUGLAS BRADBURN	40.00			7,				215 000	0	22 021
PRESIDENT/CEO	40.00	$\vdash\vdash$		Х				315,889.	0.	32,031.
(25) PHILIP L. MANNO CHIEF FINANCIAL OFFICER	40.00			х				229,764.	0.	10 262
(26) ROBERT SHENK	40.00	\vdash		Λ				229,104.	0.	19,263.
SVP VISITOR ENGAGEMENT	40.00				Х			239,569.	0.	32,900.
4b. Oak takel		ш						785,222.	0.	84,194.
c Total from continuation sheets to Part VI								940,231.	0.	90,928.
d Total (add lines 1b and 1c)								1,725,453.	0.	175,122.
2 Total number of individuals (including but n							o re	· · · · · · · · · · · · · · · · · · ·		•
compensation from the organization						,		,	,	18
•										Yes No
3 Did the organization list any former officer,	director, or tru	ıstee	e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on	
line 1a? If "Yes," complete Schedule J for s	uch individual									3 X
4 For any individual listed on line 1a, is the su	ım of reportabl	е со	mpe	nsa	tion	and	oth	er compensation from t	ne organization	

and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

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
LUKENS COMPANY, 2800 SHIRLINGTON ROAD, 9TH	DIRECT MAIL	_
FLOOR, ARLINGTON, VA 22206	SOLICITING	1,340,809.
CONSTRUCTION TRADE SERVICES	NEW FACILITY	
603 EAST CHURCH STREET, FREDERICK, MD 21701	CONSTRUCTION SERVICE	924,033.
MANA CONSTRUCTION	CONSTRUCTION AND	
6401 ROSE HILL DRIVE, ALEXANDRIA, VA 22310	REPAIR SERVICES	660,015.
MASTER PRINT		
8401 TERMINAL ROAD, NEWINGTON, VA 22122	PRINTING SERVICES	382,656.
SOLOMAN GROUP	AUDIO VISUAL SYSTEM	
825 GIROD STREET, NEW ORLEANS, LA 70113	INSTALLATION	295,143.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization > 20		

SEE PART VII, SECTION A CONTINUATION SHEETS

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(A) Name and title (B) Average hours per week (list any hours for related organizations below line) (A) (A) (B) (C) Position (check all that apply) Pour week (list any hours for related organizations below line) (C) Position (check all that apply) Pour week (list any hours for related organizations below line) (C) Position (check all that apply) Pour week (list any hours for related organizations below line) (C) Position (check all that apply) Pour week (list any hours for related organization should be low line) (C) Reportable compensation from the organization (W-2/1099-MISC) (Form 990 OF THE U	INTON								54-056	4701
Name and title	Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, a	nd F	ligh	est	Compensated Employe	es (continued)	
Name and title										,	(F)
Per week (list any hours for related organizations below line) Per		Average			Pos	ition		I. A	Reportable	Reportable	Estimated
27) JOSEPH A. BONDI WP DEVELOPMENT WP DEVELOPMENT 40.00 WP DEVELOPMENT 40.00 X 221,732. 0. 11,45 23) BERRIN DUTMANS 40.00 X 159,765. 0. 12,74 29) MATTHEW K. BRINEY 40.00 X 144,489. 0. 22,69 30) M. CAROLINA CAMARGO CHIRHART IR. DIRECTOR OF DEVELOPMENT 31) ROY FREDERICK YOUNG II 40.00 YX 142,140. 0. 17,68 31) ROY FREDERICK YOUNG II 40.00 YX 137,827. 0. 8,16 YX 134,278. 0. 18,19		per week (list any		heci	(all	that		ly)	from the organization	from related organizations	other compensatio from the
X 221,732.		related organizations below	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensate	Former	(1.2.1333		and related organization
28) BEREND OLTMANS	27) JOSEPH A. BONDI	40.00									
X	SVP DEVELOPMENT					Х			221,732.	0.	11,453
229 MATTHEN K. BRINEY 40.00 X	(28) BEREND OLTMANS	40.00									
X	DIRECTOR OF IT						X		159,765.	0.	12,741
330 M. CAROLINA CAMARGO CHIRHART 40.00 X		40.00					×		144 489	0.	22 698
RE. DIRECTOR OF DEVELOPMENT 31) ROY FREDERICK YOUNG II 40.00 X 137,827. 0. 8,16 32) ANTHONY CAVALLO OOD AND BEVERAGE DIRECTOR X 134,278. 0. 18,19		40.00							144,400.	<u> </u>	22,050
X		40.00					х		142,140.	0.	17,685
32) ANTHONY CAVALLO OOD AND BEVERAGE DIRECTOR X 134,278. 0. 18,19	(31) ROY FREDERICK YOUNG II	40.00									
POOD AND BEVERAGE DIRECTOR X 134,278. 0. 18,19	/ICE PRESIDENT EDUCATION						X		137,827.	0.	8,160
		40.00					v		134 278	0	18 191
Total to Part VII. Section A line 1c. 940.231. 99.92	OOD IND BEVERNOL PIRECTOR								154,270.	0.	10,15.
Total to Part VII. Section A line 1c. 940.231. 90.92											
Total to Part VII. Section A line 10.											
Total to Part VII Section A line 10.											
Total to Part VII. Section A line 1c. 940.231. 90.92											
Total to Part VII. Section A line Ic. 940, 231, 90, 92											
Total to Part VII. Section A line 1c. 940.231. 90.92			-								
Total to Part VII. Section A line 1c. 940.231. 90.92											
Total to Part VII. Section A line 1c. 940 - 231 - 90 92											
Total to Part VII. Section A line 1c.											
otal to Part VII. Section A line 1c.											
otal to Part VII. Section A line 1c.											
iotal to Part VII. Section A line 1c. 940 - 231 - 90 92											
iotal to Part VII. Section A line 1c. 940 - 231 - 90 92											
otal to Part VII. Section A line 1c. 940 - 231 - 90 92				-							
iotal to Part VII. Section A line 1c.			1								
iotal to Part VII. Section A line 1c.											
otal to Part VII. Section A line 1c. 940 - 231 - 90 92				_							
otal to Part VII. Section A line 1c.			-								
otal to Part VII. Section A line 1c 940 . 231 . 90. 92											
otal to Part VII. Section A line 1c 940 231				_							
	otal to Part VII Section A line 16								940 231		90 92

Form 990 (2018)

Part VIII Statement of Revenue

		Check if Schedule O conta	ains a response	or note to any line	e 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
(0, (0	4	- Fodorated compaigns	140			Teveride	Teveride	512 - 514
ants		a Federated campaigns		1,546,835.				
<u>ن</u> ق		b Membership dues		951,645.				
fts,		c Fundraising events		331,043.				
ية إق		d Related organizations						
Sir		Government grants (contributif All other contributions, gifts, grant						
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included abov		23,618,909.				
ĢË		Noncash contributions included in lines 1		2,882,805.				
Sol		h Total. Add lines 1a-1f		<u> </u>	26,117,389.			
<u> </u>		Total / Ida in ios Ta Ti		Business Code	, , ,			
•	2	a ADMISSION FEES		900099	13,299,882.	13,299,882.		
, vic		b EVENT REVENUE		900099	2,138,808.	2,138,808.		
Ser		C CONFERENCES & SYMPOSIA		900099	125,693.	125,693.		
Program Service Revenue		d PRESERVATION TOURS		900099	123,032.	123,032.		
gra Re		e						
Pro	1	f All other program service reve	nue					
		g Total. Add lines 2a-2f			15,687,415.			
	3	Investment income (including	dividends, inter	est, and				
		other similar amounts)		▶	3,640,379.			3,640,379.
	4	Income from investment of tax	c-exempt bond p	oroceeds >				
	5	Royalties			128,943.			128,943.
			(i) Real	(ii) Personal				
	6	a Gross rents						
		b Less: rental expenses						
		c Rental income or (loss)						
		d Net rental income or (loss)						
	7	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	8,647,342	•				
		b Less: cost or other basis	4 067 434	40.165				
		and sales expenses	4,967,434					
		c Gain or (loss)			3,637,743.			3,637,743.
		d Net gain or (loss)a Gross income from fundraising		·······	3,037,743.			3,037,743.
ne	0	including \$951	,					
Ven		contributions reported on line						
Re		Part IV, line 18		150,835.				
Other Reven		b Less: direct expenses		373,346.				
ᅙ		c Net income or (loss) from fund			-222,511.			-222,511.
		a Gross income from gaming ac						
		Part IV, line 19		a				
		b Less: direct expenses						
		c Net income or (loss) from gam	ing activities .	<u></u>				
	10	a Gross sales of inventory, less						
		and allowances	a	16,621,536.				
	- 1	b Less: cost of goods sold	k	6,039,438.				
,		c Net income or (loss) from sales	s of inventory .	<u></u>	10,582,098.	8,409,849.	2,172,249.	
,		Miscellaneous Revenue	е	Business Code				
		a OTHER INCOME		900099	496,565.			496,565.
		b						
		C						
		d All other revenue			106 565			
		e Total. Add lines 11a-11d			496,565.	24,097,264.	2,172,249.	7,681,119.
	12	Total revenue. See instructions			00,000,021.	4 - , 0 - / , 40 4 •	4,114,443.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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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).

Secti	ion 501(c)(3) and 501(c)(4) organizations must comp			прієте соійтіп (А).	
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	304,241.	304,241.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	241,327.	241,327.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,102,601.	516,015.	301,210.	285,376.
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	18,353,111.	16,039,312.	1,366,811.	946,988.
8	Pension plan accruals and contributions (include	, , , , , , , , , , , , , , , , , , , ,			
-	section 401(k) and 403(b) employer contributions)	1,167,115.	1,014,557.	83,280.	69,278.
9	Other employee benefits	2,383,615.	2,039,946.	201,891.	141,778.
10	Payroll taxes	1,478,125.	1,260,624.	125,355.	92,146.
11	Fees for services (non-employees):				<i>V</i> =7==v
	Management				
		62,576.		62,576.	
	Legal	49,569.		49,569.	
	Accounting	40,000.		40,000.	
	Lobbying Professional fundraising services. See Part IV, line 17	162,000.			162,000.
	Investment management fees	92,151.		92,151.	102,000
f	Other. (If line 11g amount exceeds 10% of line 25,	72,131.		72,131.	
g	•	2,439,389.	1,756,663.	354,431.	328,295.
40	column (A) amount, list line 11g expenses on Sch O.)	726,856.	715,925.	9,134.	1 707
12	Advertising and promotion	5,120,078.	3,912,358.	408,420.	1,797. 799,300.
13	Office expenses	290,853.	14,585.	276,268.	133,300.
14	Information technology	490,033.	14,303.	270,200.	
15	Royalties	6,216,421.	6,073,822.	87,413.	EE 106
16	Occupancy	511,728.	470,605.		55,186. 29,252.
17	Travel	311,740.	4/0,003.	11,871.	49,434.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	110 070	00 056	10 000	10 014
19	Conferences, conventions, and meetings	110,878.	80,856.	19,808.	10,214.
20	Interest				
21	Payments to affiliates	E 051 050	E 202 024	274 050	274 050
22	Depreciation, depletion, and amortization	5,851,952.	5,303,834.	274,059.	274,059.
23	Insurance	274,415.	219,532.	41,162.	13,721.
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 0.)				
а	EVENT EXPENSES	1,456,636.	1,282,941.	11,730.	161,965.
b	COLLECTIONS/ACQUISITION	497,879.	497,879.	,,,,,,,	===,,,,,,,,
C	DIRECT MAIL	328,536.	174,124.	6,571.	147,841.
d		220,330.	_, _,	3,3,2.	
	All other expenses	461,129.	350,414.	61,202.	49,513.
25	Total functional expenses. Add lines 1 through 24e	49,683,181.	42,269,560.	3,844,912.	3,568,709.
<u>25</u> 26	Joint costs. Complete this line only if the organization		,,	0,011,014	0,000,1001
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X if following SOP 98-2 (ASC 958-720)	1,491,791.	790,649.	29,836.	671,306.
	11 IOIIOWING SOP 98-2 (ASC 998-720)	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	100,049.	47,030.	Gorm 990 (2018)

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Form 990 (2018) Part X Balance Sheet

Pai	ιΛ	balance Sneet					
		Check if Schedule O contains a response or note	to any	line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			3,753,051.	1	4,388,949.
	2	Savings and temporary cash investments			13,218,070.	2	11,158,756.
	3	Pledges and grants receivable, net			7,176,275.	3	17,216,009.
	4	Accounts receivable, net			829,171.	4	853,485.
	5	Loans and other receivables from current and form	mer of	ficers, directors,			
		trustees, key employees, and highest compensate	ed em _l	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified	ed pers	sons (as defined under			
		section 4958(f)(1)), persons described in section 4	1958(c)	(3)(B), and contributing			
		employers and sponsoring organizations of section	on 501	(c)(9) voluntary			
ş		employees' beneficiary organizations (see instr). C	Comple	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			500,000.	7	500,000.
Ä	8	Inventories for sale or use			2,752,572.	8	2,827,290.
	9	B			188,167.	9	113,907.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	165,941,303.			
	b	Less: accumulated depreciation	10b	79,665,042.		10c	86,276,261.
	11	Investments - publicly traded securities			159,702,881.	11	146,615,097.
	12	Investments - other securities. See Part IV, line 11	١		12,194,203.	12	10,462,436.
	13	Investments - program-related. See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			6,013,681.	15	5,624,456.
	16	Total assets. Add lines 1 through 15 (must equal	l line 3	4)	295,168,149.	16	286,036,646.
	17	Accounts payable and accrued expenses			4,209,175.	17	4,053,962.
	18	Grants payable			18		
	19	Deferred revenue			391,870.	19	328,428.
	20	Tax-exempt bond liabilities			15,000,000.	20	15,000,000.
	21	Escrow or custodial account liability. Complete Pa	art IV c	of Schedule D		21	
S	22	Loans and other payables to current and former of					
Liabilities		key employees, highest compensated employees	, and c	disqualified persons.			
iab		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelate				23	
	24	Unsecured notes and loans payable to unrelated	third p	arties		24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1	17-24).	Complete Part X of	6 066 005		F 00F 030
		Schedule D			6,866,005.	25	5,995,030.
	26	Total liabilities. Add lines 17 through 25			26,467,050.	26	25,377,420.
		Organizations that follow SFAS 117 (ASC 958),		there X and			
es		complete lines 27 through 29, and lines 33 and			124 660 422		107 076 014
auc	27	Unrestricted net assets			134,668,433.	27	127,276,014.
Bala	28	Temporarily restricted net assets	92,122,324.	28	92,209,280.		
힏	29	Permanently restricted net assets	41,910,342.	29	41,173,932.		
Ē		Organizations that do not follow SFAS 117 (AS	C 958	, check here			
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or equ				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inco			260 701 000	32	260 650 226
2	33	Total net assets or fund balances			268,701,099.	33	260,659,226.
	34	Total liabilities and net assets/fund balances			295,168,149.	34	286,036,646.

	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: Cash X Accrual Other				Ī
	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?	2a		Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	2b	Х		
	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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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?	2c	Х	<u> </u>	_
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
За	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?	За		Х	_
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	3b			_
		Form	990	(2018	۱

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

THE MOUNT VERNON LADIES' ASSOCIATION

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

OF THE UNION 54-0564701 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations

(i) Name of supported organization	(ii) EIN	rted organization(s). (iii) Type of organization (described on lines 1-10	(iv) Is the orga in your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions
organization		above (see instructions))	Yes	No	Support (See Instructions)	Support (See Instruction
otal						

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Schedule A (Form 990 or 990-EZ) 2018

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
_	ction B. Total Support				1		
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4		, ,		, ,	1	
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11							
	Gross receipts from related activities,	etc. (see instruction	ons)			12	
	First five years. If the Form 990 is for	•	,				
	organization, check this box and stop	p here			•		
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2018 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2017	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2018. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				▶□
b	33 1/3% support test - 2017. If the	organization did no	t check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2018. If the org	anization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	nis box and stop I	here. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a	publicly supported	organization		>
b	10% -facts-and-circumstances test						
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	neck this box and	stop here. Explain	n in Part VI how the	е
	organization meets the "facts-and-circ	cumstances" test.	The organization o	qualifies as a public	cly supported orga	nization	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17l	o, check this box a	nd see instructions	s >
				<u>-</u>	Sche	edule A (Form 990	or 990-F7) 2018

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Secti	ion A. Public Support	,	,				
	ar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 G	ifts, grants, contributions, and nembership fees received. (Do not						
	nclude any "unusual grants.")	9247345.	13952745.	16853102.	10453714.	26117389.	76624295.
m fo aı	aross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the rganization's tax-exempt purpose	26293684.	28181664.	29192752.	30037912.	29205034.	142911046
aı	aross receipts from activities that re not an unrelated trade or busness under section 513						
iz	ax revenues levied for the organ- cation's benefit and either paid to r expended on its behalf						
fu th	he value of services or facilities urnished by a governmental unit to ne organization without charge	25541020	42124400	46045054	40401626	EE222422	219535341
	otal. Add lines 1 through 5	33341029.	42134409.	46045854.	40491626.	0004443.	219333341
3	mounts included on lines 1, 2, and received from disqualified persons	1482574.	1005908.	5996286.	1093223.	3841221.	13419212.
fro	mounts included on lines 2 and 3 received om other than disqualified persons that sceed the greater of \$5,000 or 1% of the mount on line 13 for the year						0.
сА	dd lines 7a and 7b	1482574.	1005908.	5996286.	1093223.	3841221.	13419212.
8 P	ublic support. (Subtract line 7c from line 6.)						206116129
Secti	on B. Total Support						
Calend	ar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	mounts from line 6	35541029.	<u>42134409.</u>	46045854.	40491626.	55322423.	219535341
d se	iross income from interest, ividends, payments received on ecurities loans, rents, royalties, nd income from similar sources	2575695.	2255263.	3264580.	4724950.	3769322.	16589810.
b U (I)	nrelated business taxable income ess section 511 taxes) from businesses cquired after June 30, 1975						
	dd lines 10a and 10b	2575695.	2255263.	3264580.	4724950.	3769322	16589810.
11 N ac	du lines 10a and 10b let income from unrelated business ctivities not included in line 10b, /hether or not the business is egularly carried on	2373033.	2233203.	3204300.	1/24550.	3709322.	103030101
0	other income. Do not include gain r loss from the sale of capital ssets (Explain in Part VI.)	560,508.		218,649.			
		38677232.			•	•	•
14 F	irst five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ıx year as a sectior	n 501(c)(3) organiz	ation,
							.
	ion C. Computation of Publi						06.63
	ublic support percentage for 2018 (I			column (f))		15	86.63 %
	ublic support percentage from 2017 ion D. Computation of Inves					16	88.08 %
	•			10 l (f)\		47	6.97 %
	ovestment income percentage for 20					17	
	nvestment income percentage from 3 1/3% support tests - 2018. If the						
	nore than 33 1/3%, check this box ar						7 is not ▶X
b 3	3 1/3% support tests - 2017. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	and
lir	ne 18 is not more than 33 1/3%, che	ck this box and st	op nere. The orga	nization qualifies a	is a publicly suppo	rted organization	▶∟

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Schedule A (Form 990 or 990-EZ) 2018

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	iu		
	41.		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	-		
	8		
	9a		
	9b		
	9с		
	10a		
	10b		
n 9	90 or 99	0-EZ)	2018

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Pa	rt IV Supporting Organizations (continued)			
	, and the second		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	_		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
000	tion 5.7th Type in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
h	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Zu		
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust or	n Nov. 20, 1970 (explain in F	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	ly integra	ted Type III supporting orga	ınization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2018

Par	I v Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
с	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)			
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2018 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8_	Breakdown of line 7:			
<u>a</u>	Excess from 2014			
<u>b</u>	Excess from 2015			
с	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, Section B, line 1e; Part V, Section B, lines 1; Part V, Section B				
(See instructions.)				
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:				
OTHER INCOME				
2014 AMOUNT: \$ 560,508.				
2015 AMOUNT: \$ 233,817.				
2016 AMOUNT: \$ 218,649.				
2017 AMOUNT: \$ 305,618.				
2018 AMOUNT: \$ 496,565.				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

Name of the organization

THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

54-0564701

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
General	Rule					
	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
X	X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \bigcup \$					
but it mu	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number

54-0564701

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$10,331,800.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2,510,500. 	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	* \$ 1 ,000 ,000 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions.)

Name of organization
THE MOUNT VERNON LADIES' ASSOCIATION
OF THE UNION

Employer identification number

54-0564701

Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	8,589 SHARES OF MICROSOFT CORP. AND 695 SHARES OF ELECTRONIC ARTS, INC.	-	
		\$\$	12/13/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Employer identification number Name of organization THE MOUNT VERNON LADIES' ASSOCIATION OF THE 54-0564701 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line	e 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 $\boldsymbol{\nu}$	_				
	are the organization's property, subject to the organization's e					
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor or	, , , , ,				
Da						
Par			Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (e.g., recreation or e		torically important land area			
	Protection of natural habitat	Preservation of a cer	tified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete lines 2a throu	ied conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
a	Total number of conservation easements		1 1			
b	, , , , , , , , , , , , , , , , , , , ,					
С	Number of conservation easements on a certified historic stru					
d	Number of conservation easements included in (c) acquired a					
•	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax			
4	year ▶ Number of states where property subject to conservation eas	ament is leasted				
5	Does the organization have a written policy regarding the peri	· · · · · · · · · · · · · · · · · · ·				
3	violations, and enforcement of the conservation easements it		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, l					
Ū	b	mandaning of violations, and officioning cont	servation deserments during the year			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements during the year			
-	> \$	g or moranorio, and ornoronig concerna	mon casee.me adming and year.			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservation					
	include, if applicable, the text of the footnote to the organizat					
	conservation easements.					
Par	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 (AS	C 958), not to report in its revenue staten	nent and balance sheet works of art,			
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce 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 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical			
	treasures, or other similar assets held for public exhibition, ec	lucation, or research in furtherance of pul	blic service, provide the following amounts			
	relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
			L .			
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financia	ıl gain, provide			
	the following amounts required to be reported under SFAS 17	16 (ASC 958) relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1		> \$			
b	Assets included in Form 990, Part X					

Schedule D (Form 990) 2018

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

	t III Organizations Maintaining C		t. Histo	orical Tre	asures. o	r Othe	r Simil		ets (conti		age Z
	Using the organization's acquisition, accession										
•	(check all that apply):	ori, aria ouror rocorac	3, 0110011	any or tho h	onowing that	. are a er	griiiioarii	. 400 01 16	3 00110011011		•
а	X Public exhibition	d	X	Loan or exch	nange progra	ams					
b	X Scholarly research	e		Other	9- 9						
С	X Preservation for future generations	_									
4	Provide a description of the organization's co	llections and explain	how th	ev further th	e organizatio	on's exe	mpt pur	ose in Pa	art XIII.		
5	During the year, did the organization solicit or										
	to be sold to raise funds rather than to be ma							[Yes	X	No
Par	t IV Escrow and Custodial Arrang								V, line 9, or		
	reported an amount on Form 990, Par			Ü				,	,		
	Is the organization an agent, trustee, custodia	an or other intermedi	ary for o	contributions	or other as	sets not	included	i			
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amoun	t	
С	Beginning balance						1c				
d	Additions during the year										
е	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on Fo						lity?	[Yes		No
	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	planatio	n has been p	orovided on	Part XIII					
Par	t V Endowment Funds. Complete	f the organization ans	swered	"Yes" on Fo	rm 990, Part	IV, line	10.				
		(a) Current year		rior year	(c) Two yea			e years bad			
1a	Beginning of year balance	157,292,554.	136	,871,108.	139,30			,000,11		,676,	
b	Contributions	3,046,820.		550,186.		6,444.		,578,07	_	3,119,7	
С	Net investment earnings, gains, and losses	-10,708,395.	26	,509,563.	9,60	4,030.	-4	-4,157,069.		,580,	194.
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs	5,494,996.	6	,638,302.	13,08	8,852.	9	,111,63	7. 11	,373,	118.
f	Administrative expenses										
g	End of year balance	144,135,983.	157	,292,555.	136,87	1,108.	139	,309,48	5. 146	,000,	113.
2	Provide the estimated percentage of the curr	•	e (line 1g	g, column (a)) held as:						
а	Board designated or quasi-endowment	22.09	_%								
b	Permanent endowment ► 34.03	%									
С	Temporarily restricted endowment ▶4										
	The percentages on lines 2a, 2b, and 2c shou	-									
За	Are there endowment funds not in the posses	ssion of the organiza	tion tha	t are held an	d administer	red for th	ne organ	ization			T
	by:								- m	Yes	No
	(i) unrelated organizations								3a(i)	Х	37
									3a(ii)		X
	If "Yes" on line 3a(ii), are the related organiza								3b		<u> </u>
4 Dai	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment t	unds.							
ı aı			Dort IV	lina 11a C	Farm 000	Dort V	line 10				
	Complete if the organization answered							-44	(a) Da a	. ا ا	
	Description of property	(a) Cost or ot basis (investm		(b) Cost basis (Accumula epreciation	II.	(d) Boo	k valu	е
	Land	`	iority	Dasis (ou ioi j	ue	Piccialic	211			
	Land			114,52	0 121	3.8	506,	220	76,01	3 a	01
D	Buildings Leasehold improvements			,	· , <u>- </u>	30,	<u> </u>		, 0 , 0 1	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
d				44 12	6,860.	3.8	955	961.	5,17	0.8	99.
u e	Equipment Other				4,322.		202,		5,09	3,3	61
	. Add lines 1a through 1e. (Column (d) must e		Y colum			,		• • • • • • • • • • • • • • • • • • •	86,27	$\frac{-7}{6}, \frac{2}{2}$	61.

Schedule D (Form 990) 2018



	ERNON LADIES	' ASSOCIATIO		-0564701	D 1
Schedule D (Form 990) 2018 OF THE UNIO Part VII Investments - Other Securities.	IN		34	-0304701	Page 3
Complete if the organization answered "Yes"	on Form 000 Port IV lin	o 11h Soo Form 000 D	ort V line 10		
(a) Description of security or category (including name of security)	(b) Book value		uation: Cost or end	-of-vear market va	lue
	(b) Book value	(c) Method of val	dation. Cost of Cha	or year market va	
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(G)					
(H) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶					
Part VIII Investments - Program Related.					
	an Farma 000 Dart IV lin	- 11 - C F 000 D	ant V. Bara 10		
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		aπ x, line 13. uation: Cost or end	-of-vear market va	ارام
	(b) Book value	(c) Method of val	dation. Cost of Cha	or year market va	
(1)					
(2)					
(3)					
<u>(4)</u>					
<u>(5)</u>		+			
<u>(6)</u>					
<u>(7)</u>					
(8)					
Tatal (Col. (b) must equal Form 000 Port V. col. (D) line 12 \					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 000 Part IV lin	o 11d Soo Form 000 P	art V lina 15		
	Description	e TTu. See Form 990, Fa	art A, iii le 13.	(b) Book valu	
· · ·	Возоприон			(b) Book vale	
<u>(1)</u>					
(2)					
(3)					
<u>(4)</u>					
(5)					
<u>(6)</u>					
<u>(7)</u>					
(8)					
(9)	45.				
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		>		
	on Form 000 Dort IV lin	a 11a ar 11f Caa Farm (200 Dort V line 05		
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, IIII	(b) Book value	990, Part X, Ilile 25.		
		(b) Dook value			
(1) Federal income taxes (2) INTEREST RATE SWAP AGREEM:	ENT	4,606,515.			
	ETA T	1,261,492.			
(3) ANNUITY GIFT LIABILITY	TMV				
(4) POOLED INCOME FUND LIABIL		121,747.			
(5) DUE TO REGION 5 HISTORY F	עאט	5,276.			

5,995,030. \triangleright Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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) 2018



(6) (7) (8) (9)

54-0564701 Page 4

Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents Wi	th Revenue per Re	turn.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a							
1	Total revenue, gains, and other support per audited financial statements			1	48,275,668.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:								
а	Net unrealized gains (losses) on investments	2a	-18,946,455.						
b	Donated services and use of facilities	2b	313,727.						
С	Recoveries of prior year grants	2c							
d	Other (Describe in Part XIII.)	2d	519,742.						
е	Add lines 2a through 2d			2e	-18,112,986 .				
3	Subtract line 2e from line 1			3	66,388,654.				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a							
b	Other (Describe in Part XIII.)	4b	-6,412,784.		-6,320,633.				
С	Add lines 4a and 4b								
5				5	60,068,021.				
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	nents W	ith Expenses per F	Retur	n.				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a							
1	Total expenses and losses per audited financial statements			1	56,317,541.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1						
а	Donated services and use of facilities	2a	313,727.	_					
b	Prior year adjustments	2b		_					
С	Other losses	. 2c		_					
d	Other (Describe in Part XIII.)	2d							
е	Add lines 2a through 2d			2e	313,727.				
3	Subtract line 2e from line 1			3	56,003,814.				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1						
а	Investment expenses not included on Form 990, Part VIII, line 7b		92,151.						
b	Other (Describe in Part XIII.)	4b	-6,412,784.						
С	Add lines 4a and 4b			4c	-6,320,633.				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	49,683,181.				
Pa	rt XIII Supplemental Information.								
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV, lines	1b and 2b; Part V, line 4	; Part	X, line 2; Part XI,				
	Od and the and Dart VII lines Od and the Alan associate this most to provide any od	نجاز المحاج نقالم	f = = ±! =						

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

PART III, LINE 1A:

HISTORICAL PROPERTIES OWNED BY THE ASSOCIATION WERE ACQUIRED THROUGH PURCHASES AND CONTRIBUTIONS SINCE THE ASSOCIATION'S INCEPTION. THESE HISTORICAL PROPERTIES ARE NOT INCLUDED IN THE STATEMENT OF FINANCIAL POSITION. THE COST OF THE PROPERTIES IS NOT READILY AVAILABLE, AND THE ASSOCIATION IS OF THE OPINION THAT, BECAUSE OF THE INTRINSIC VALUE OF THE PROPERTIES, IT IS IMPRACTICAL TO ASSIGN VALUES TO THE COMPONENTS. PURCHASES OF COLLECTION ITEMS ARE RECORDED AS DECREASES IN UNRESTRICTED NET ASSETS IN THE YEAR IN WHICH THE ITEMS ARE ACQUIRED OR AS TEMPORARILY OR PERMANENTLY RESTRICTED NET ASSETS IF THE ASSETS USED TO PURCHASE THE ITEMS ARE RESTRICTED BY DONORS. FINANCIAL STATEMENTS DO NOT REFLECT ANY CONTRIBUTED COLLECTION ITEMS.

PART III, LINE 4:

THE ASSOCIATION COLLECTS, RESEARCHES, CONSERVES, RESTORES, RECONSTRUCTS, PRESERVES, DOCUMENTS, AND SHARES WITH THE PUBLIC HISTORIC STRUCTURES, ARCHAEOLOGICAL SITES, AND THE CULTURAL LANDSCAPE AS WELL AS TWO AND THREE-DIMENSIONAL OBJECTS IN A VARIETY OF MEDIA. RESPONSIBILITY FOR THE PRESERVATION AND MAINTENANCE OF THE HISTORIC STRUCTURES, CULTURAL RESOURCES AND THE COLLECTIONS FALLS TO THE HISTORIC PRESERVATION AND COLLECTIONS DEPARTMENT AND THE FRED W. SMITH LIBRARY FOR THE STUDY OF GEORGE WASHINGTON AT MOUNT VERNON. THE HISTORIC PRESERVATION AND COLLECTIONS DEPARTMENT IS DIVIDED INTO THE FINE AND DECORATIVE ARTS CURATORIAL COLLECTION, THE ARCHAEOLOGICAL COLLECTION, THE ARCHITECTURAL FRAGMENTS COLLECTION, AND PHOTO ARCHIVES. THE FINE AND DECORATIVE ARTS CURATORIAL COLLECTION INCLUDES THREE-DIMENSIONAL OBJECTS, TEXTILES, WORKS OF ART ON PAPER, AND PAINTINGS. THE ARCHAEOLOGICAL COLLECTION INCLUDES ARTIFACTS AND THEIR ASSOCIATED DOCUMENTATION DERIVING FROM EXCAVATION PROJECTS, AS WELL AS RANDOM FINDS ORIGINATING ON THE MOUNT VERNON ESTATE. THE ARCHITECTURAL FRAGMENTS COLLECTION INCLUDES FEATURES, BUILDING MATERIALS, AND FINISH TREATMENTS THAT ARE ARCHITECTURAL IN NATURE, AND WHICH HAVE BEEN REMOVED FROM THEIR ORIGINAL CONTEXT DURING THE COURSE OF RESTORATION WORK UNDERTAKEN TO STABILIZE, PROTECT, OR REINTERPRET MOUNT VERNON'S HISTORIC BUILDINGS AND STRUCTURES. PHOTO ARCHIVES CONTAINS MODERN FILM, NEGATIVES, AND DIGITAL IMAGE FILES OF A VARIETY OF MOUNT VERNON RELATED SUBJECTS. SPECIAL COLLECTIONS INCLUDES RARE BOOKS, HISTORIC MANUSCRIPTS, PHOTOGRAPHS, THE ASSOCIATION'S ARCHIVAL MATERIALS, AND PRINTED EPHEMERA. THE LIBRARY COLLECTS PRINTED MATERIAL WITH A PRIMARY EMPHASIS ON GEORGE WASHINGTON, MOUNT VERNON, AND THE MOUNT VERNON LADIES' ASSOCIATION. THE MOST IMPORTANT INITIAL CRITERION WITH WHICH TO EVALUATE A Schedule D (Form 990) 2018 Part XIII | Supplemental Information (continued)

POTENTIAL ACQUISITION IS ITS CONTRIBUTION TO INTERPRETATION, EXHIBITION, AND RESEARCH VALUE AT MOUNT VERNON. THIS INCLUDES THE FOLLOWING ITEMS: OBJECTS ORIGINAL TO MOUNT VERNON OR OWNED BY GEORGE AND MARTHA WASHINGTON; OBJECTS RELATED TO WASHINGTON'S NON-DOMESTIC LIFE, INCLUDING HIS ROLE AS MILITARY LEADER, SURVEYOR, AND PRESIDENT; MANUSCRIPTS BY GEORGE OR MARTHA WASHINGTON NOT PREVIOUSLY REPRODUCED OR PUBLISHED IN PRINT OR ELECTRONIC FORMAT; BOOKS AND OTHER PUBLISHED MATERIALS OWNED BY GEORGE OR MARTHA WASHINGTON; OBJECTS RELATING TO THE DEVELOPMENT AND DOMESTIC LIFE OF MOUNT VERNON, INCLUDING MATERIAL RELATED TO FAMILY MEMBERS, VISITORS, AND ACQUAINTANCES; PERIOD OBJECTS THAT REPLICATE OBJECTS THAT WERE AT MOUNT VERNON, FOR THE PURPOSE OF ENHANCING THE INTERPRETATION AND UNDERSTANDING OF THE ESTATE AND THE LIFE AND LEGACY OF GEORGE AND MARTHA WASHINGTON; ARCHIVAL MATERIALS RELATING TO THE DEVELOPMENT AND DOMESTIC LIFE OF MOUNT VERNON, INCLUDING MATERIALS OF FAMILY MEMBERS, VISITORS, AND ACQUAINTANCES; BOOKS OF THE WASHINGTON AND CUSTIS FAMILIES THAT ARE RELATED TO COLLECTIONS OR INTERPRETATION GOALS; MANUSCRIPTS BY GEORGE OR MARTHA WASHINGTON PREVIOUSLY REPRODUCED OR PUBLISHED IN PRINT OR ELECTRONIC FORMAT; MAPS, PLANS, SURVEYS, MANUSCRIPTS, RARE BOOKS, PHOTOGRAPHS AND OTHER DOCUMENTS OF HISTORICAL VALUE RELATING TO 17TH, 18TH 19TH AND 20TH CENTURY LIFE AT MOUNT VERNON AND THE WASHINGTON FAMILY.

PART V, LINE 4:

THE ASSOCIATION'S ENDOWMENT CONSISTS OF 73 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES. THE BOARD APPROVES SPENDING ON PROGRAM RESTRICTED ENDOWMENTS AS PART OF ITS ANNUAL BUDGET APPROVAL PROCESS. IN ADDITION, THE BOARD ALSO APPROVES, AS PART OF ITS ANNUAL BUDGETARY APPROVAL PROCESS, THE TRANSFER AND EXPENDITURE OF ADDITIONAL BOARD-DESIGNATED FUNDS FOR CAPITAL IMPROVEMENTS, COLLECTION ACQUISITIONS

Schedule D (Form 990) 2018

Part XIII	Supplemental Information	(continue)	()
		100////	/

OR SPECIAL PROJECTS.

TEMPORARILY RESTRICTED ENDOWMENT FUNDS ARE USED FOR THE OPERATIONS OF THE ORIENTATION CENTER, EDUCATION CENTER, AND NATIONAL LIBRARY.

PART X, LINE 2:

THE ASSOCIATION EVALUATED ITS UNCERTAINTY IN INCOME TAXES FOR THE YEARS ENDED DECEMBER 31, 2018 AND 2017, AND DETERMINED THAT THERE ARE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENT	800,377.							
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-280,635.							
TOTAL TO SCHEDULE D, PART XI, LINE 2D 519,742.								

PART XI, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT	EXPENSES	-373,346.
COST OF GOODS SOLD		-6,039,438.
TOTAL TO SCHEDULE D,	PART XI, LINE 4B	-6,412,784.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

SPECIAL EVENT DIRECT EXPENSES	-373,346.
COST OF GOOD SOLD	-6,039,438.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	-6,412,784.

Schedule D (Form 990) 2018

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information. MOUNT VERNON LADIES' ASSOCIATION

OMB No. 1545-0047

Open to Public Inspection

OF THE		ASSU	JCIA	ATTON	54-0564	701
Part I Fundraising Activities required to complete this par	Complete if the organization answer	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
Indicate whether the organization rais X Mail solicitations X Internet and email solicitations X Phone solicitations X In-person solicitations X and In-person solicitations	sed funds through any of the following with a Solicitary or oral agreement with any individual Part VII) or entity in connection with providuals or entities (fundraisers) pursures.	tion of tion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	X Yes	·
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or cor contrib	itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
THE LUKENS COMPANY - 2800	DIDUCE MAIL	Yes	No X	2 260 707	160,000	2 206 707
SHIRLINGTON ROAD, 9TH FLOOR,	DIRECT MAIL		A	2,368,797.	162,000.	2,206,797.
				2,368,797.	162,000.	2,206,797.
3 List all states in which the organization or licensing.						
AL, AK, AR, CA, CO, CT, DC, ND, OH, OK, OR, PA, RI, SC,		ME,M	ID , M	IA,MI,MN,MS	,NV,NH,NJ,	NM, NY, NC

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2018

15431111 150872 GWMV

54-0564701 Page 2

Pa	rt I	Fundraising Events. Complete if the of fundraising event contributions and ground fundraising event contributions.				
		or fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	
			1	BIRTHNIGHT	()	(d) Total events
			MOUNT VERNON		4	(add col. (a) through
ø.			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	595,800.	121,441.	385,239.	1,102,480.
	2	Less: Contributions	519,925.	105,541.	326,179.	951,645.
	3	Gross income (line 1 minus line 2)	75,875.	15,900.	59,060.	150,835.
	4	Cash prizes				
S	5	Noncash prizes				
bense	6	Rent/facility costs	43,280.	1,345.	2,544.	47,169.
Direct Expenses	7	Food and beverages	117,301.	26,840.	85,737.	229,878.
	8	Entertainment	22.568.	13,205.	20,593.	56.366.
	9	Other direct expenses	4 - 4 - 4	13,205. 7,554.	14,708.	56,366. 39,933.
	10					373,346.
	11	Net income summary. Subtract line 10 from			_	-222,511.
Pa	rt I		answered "Yes" on Form	n 990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	T	1		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
		Volunteer labor	Yes % No	Yes %	Yes % No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		>	
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)		>	
		ter the state(s) in which the organization cond the organization licensed to conduct gaming a				Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses r Yes," explain:	· · · · · · · · · · · · · · · · · · ·			Yes No
		200.40			Sobodulo C/F	m 000 or 000 E7\ 0040
8320	sz 10)-03-18			ochequie G (F0)	m 990 or 990-EZ) 2018

THE MOUNT VERNON LADIES' ASSOCIATION

Sch	nedule G (Form 990 or 990-EZ) 2018 OF THE UNION	54-056	5470	L Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	[Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility		3a	%
	An outside facility		3b	<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	i.		
	Name			
	Address			
15	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
ı	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶\$	nt		
(of "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17 (Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to	_		
	retain the state gaming license?	L	Yes	No
ı	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
Pa	organization's own exempt activities during the tax year \(\) \$ art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	and Part III	, lines 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
SC	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRALS	SERS:		
— (I) NAME OF FUNDRAISER: THE LUKENS COMPANY			
·				
<u>(I</u>	ADDRESS OF FUNDRAISER:			
28	00 SHIRLINGTON ROAD, 9TH FLOOR, ARLINGTON, VA 22206			
PA	RT I, LINE 2B, COLUMN (V):			
	RING THE YEAR ENDED DECEMBER 31, 2018, THE LUKENS COMPANY W			
	TAL OF \$1,340,809. OF THIS AMOUNT, \$162,000 WAS RELATED TO			0 FT\ 00 : 0
8320	183 10-03-18 Schedule (ո (⊢orm 99	າບ or 99	0-EZ) 2018

THE MOUNT VERNON LADIES' ASSOCIATION

Schedule G	(Form 990 Supple	or 990-E	Z)	OF T	HE U	NION					54-05	54701	Page 4
Part IV	Supple	mental	Infor	mation	(continu	ed)							
FUNDR <i>E</i>	ISING	AND	THE	REST	WAS	FOR	REIMBU	RSEMENT	OF	PRINTING,	POSTAGI	E, ANI)
OTHER	FUNDRA	AISIN	G MZ	ATERI	ALS.								

Schedule G (Form 990 or 990-EZ)

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

THE MOUNT VERNON LADIES' ASSOCIATION

2018
Open to Public

OMB No. 1545-0047

Inspection
Employer identification number

OF THE UN	ION						54-0564701
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selection	
criteria used to award the grants or assis	stance?						No
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	States.			
Part II Grants and Other Assistance to	_				anization answered "Y	'es" on Form 990, Part	IV, line 21, for any
recipient that received more than					(f) Madaaal af		
(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
UNIVERSITY OF VIRGINIA							
P.O. BOX 400195							PAPERS OF GEORGE
CHARLOTTESVILLE, VA 22904-4195	54-6001796	501(C)(3)	276,193.	0.			WASHINGTON
ACCOKEEK FOUNDATION 3400 BRYAN POINT ROAD							
ACCOKEEK, MD 20607	52-6037288	501(C)(3)	15,000.	0.			PROTECTION OF VIEWSHED
2 Enter total number of section 501(c)(3) a3 Enter total number of other organizations	-	•					2. 0.

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

Schedule I (Form 990) (2018)

Page 2

OF THE UNION

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (d) Amount of non-(b) Number of (c) Amount of (e) Method of valuation (f) Description of noncash assistance (book, FMV, appraisal, other) recipients cash grant cash assistance 80 STIPENDS & AWARDS 241,327. 0 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV PART I, LINE 2: THE ASSOCIATION PERIODICALLY AWARDS GRANTS TO ORGANIZATIONS WITH WHICH WE PARTNER ON PROJECTS THAT FURTHER OUR MISSION. GRANTS ARE APPROVED AND DOCUMENTED WITH FORMAL GRANT AGREEMENTS, AND FUNDS ARE DISBURSED ACCORDING TO THE SUBSTANTIATION PROVISIONS OF EACH GRANT AGREEMENT. THE ASSOCIATION REQUIRES GRANT REPORTS AT THE END OF EACH GRANT TERM AND/OR MONITORS PROGRESS TOWARDS GRANT ACCOMPLISHMENTS THROUGH OUR DAY-TO-DAY INVOLVEMENT WITH A PARTNER.

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information. THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	a 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.			
	First-class or charter travel X Housing allowance or residence for personal uses	se		
	Travel for companions Payments for business use of personal residen	ice		
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account X Personal services (such as maid, chauffeur, ch	ef)		
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	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.			
	Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation comm	ittee		
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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 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:			
а	a The organization?	5a		X
b	b Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6				
	contingent on the net earnings of:			7.7
а	a The organization?	<u>6a</u>		X
b	b Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7			77	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8				37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>
9				
	Regulations section 53.4958-6(c)?	9	1	1

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

Schedule J (Form 990) 2018



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 aren't 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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	perients	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
(1) DOUGLAS BRADBURN	(i)	315,889.	0.	0.	18,184.	13,847.	347,920.	0.	
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) PHILIP L. MANNO	(i)	229,764.	0.	0.	18,061.	1,202.	249,027.	0.	
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) ROBERT SHENK	(i)	239,569.	0.	0.	19,267.	13,633.	272,469.	0.	
SVP VISITOR ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) JOSEPH A. BONDI	(i)	221,732.	0.	0.	4,493.	6,960.	233,185.	0.	
SVP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) BEREND OLTMANS	(i)	159,765.	0.	0.	12,254.	487.	172,506.	0.	
DIRECTOR OF IT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) MATTHEW K. BRINEY	(i)	144,489.	0.	0.	12,001.	10,697.	167,187.	0.	
VICE PRESIDENT NEW MEDIA	(ii)	0.	0.	0.	0.	0.	0.	0.	
(7) M. CAROLINA CAMARGO CHIRHART	(i)	142,140.	0.	0.	11,226.	6,459.	159,825.	0.	
SR. DIRECTOR OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(8) ANTHONY CAVALLO	(i)	121,778.	12,500.	0.	2,803.	15,388.	152,469.	0.	
FOOD AND BEVERAGE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Schedule J (Form 990) 2018

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.
PART I, LINE 1A:
THE PRESIDENT/CEO OF THE ASSOCIATION IS REQUIRED TO LIVE ON THE PREMISES
AND IS PROVIDED WITH HOUSING, AND PERSONAL SERVICES FOR THE CARE OF THE
PROPERTY. AS SUCH, THESE ARE NON-TAXABLE ALLOWANCES. SOCIAL CLUB DUES WERE
REIMBURSED AND RECORDED AS TAXABLE ON THE FORM W-2.
PART I, LINE 7:
DURING THE YEAR ENDED DECEMBER 31, 2018, ANTHONY CAVALLO, FOOD AND BEVERAGE
DIRECTOR, RECEIVED A BONUS OF \$12,500 BASED ON HIS PERFORMANCE.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

Attach to Form 990.

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

2018
Open to Public Inspection

Name of the organization

THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

OF THE ONL	011								<u> </u>	J U =	, , , , , , , , , , , , , , , , , , , 		
Part I Bond Issues													
(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issu	ie price	(f) Description	(f) Description of purpose		Defeased (h) On behalf of issuer			If (i) Pooled financing	
								Yes	No	Yes	No	Yes	No
FAIRFAX COUNTY ECONOMIC						REFINANC	E						
A DEVELOPMENT AUTHORITY	91-1910090	30382EDU5	06/20/07	1500	0000.	EXISTING	BONDS		Х		Х		Х
В													
С													
D													
Part II Proceeds													
			A			В	С				D		
1 Amount of bonds retired													
2 Amount of bonds legally defeased			4 - 4 -	0 000									
3 Total proceeds of issue			15,00	0,000.					-				
•													
5 Capitalized interest from proceeds													
			1.0	8,967.									
•				0,307.									
8 Credit enhancement from proceeds9 Working capital expenditures from proceeds													
10 Capital expenditures from proceeds			4 4 6 5	1,033.									
				<u> </u>									
12 Other unspent proceeds													
13 Year of substantial completion			_	009									
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a refunding	issue of tax-exempt b	oonds (or,	1			1							
if issued prior to 2018, a current refunding is	•	•	X										
15 Were the bonds issued as part of a refunding													
issued prior to 2018, an advance refunding is				X									
16 Has the final allocation of proceeds been ma	de?		X										
17 Does the organization maintain adequate bo	oks and records to su	pport the											
for all all a setting of some and all O			X										

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

Schedule K (Form 990) 2018

Par	t III Private Business Use								
		Α		В		С		Γ	D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		Х						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		X					1	
За	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside								
	counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by								
	entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of								
	unrelated trade or business activity carried on by your organization, another								
	section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%	%			%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
	of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
	1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified								
	bonds of the issue are remediated in accordance with the requirements under							1	
	Regulations sections 1.141-12 and 1.145-2?		X						
Par	t IV Arbitrage			Т					
			<u> </u>	l	В	•	Ç		<u> </u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
_2	If "No" to line 1, did the following apply?		T						
	Rebate not due yet?		X						
b	Exception to rebate?		Х						
<u>c</u>	No rebate due?	X							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		T		1		T		
_3	Is the bond issue a variable rate issue?	X						<u> </u>	

THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Schedule K (Form 990) 2018

Page 3

Part IV Arbitrage (Continued)								
		4	E	3))
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?	Х							
b Name of provider	SUNTRUST							
c Term of hedge	30.0	000000						
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider	0							
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X						
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of								
section 148?	X							
Part V Procedures To Undertake Corrective Action								
		4	E	3))
Has the organization established written procedures to ensure that violations of	Yes	No	Yes	No	Yes	No	Yes	No
federal tax requirements are timely identified and corrected through the voluntary								
closing agreement program if self-remediation isn't available under applicable								
regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to question	s on Schedule	K. See instru	ıctions					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

Par	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribut	•	:s
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities - Publicly traded	X	67	2,843,750.	FMV		
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or						
	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (SUPPLIES)	X	21	35,766.	FMV		
26	Other ► (MISCELLANEOUS)	X	1	3,289.	FMV		
27	Other						
28	Other ()						
29	Number of Forms 8283 received by the organiz		•	1 1			
	for which the organization completed Form 828	3, Part IV, [Donee Acknowledg	gement 29			
					ſ	Yes	No
30a	During the year, did the organization receive by						
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	ed for		
	exempt purposes for the entire holding period?					30a	X
b	,						
31	Does the organization have a gift acceptance p				ions?	31 X	<u> </u>
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			
	contributions?					32a	X
b	,						
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,		
	describe in Part II.						

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

Schedule M (Form 990) 2018

THE MOUNT VERNON LADIES' ASSOCIATION

Schedule M (Form 990) 2018 OF THE UNION	54-0564701	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3	3. and whether the organiza	ition
is reporting in Part I, column (b), the number of contributions, the number of items received, or a con	nbination of both. Also com	plete
this part for any additional information.		
SCHEDULE M, PART I, COLUMN (B):		
PART I, COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.		

Schedule M (Form 990) 2018

832142 10-18-18

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE MOUNT VERNON LADIES' ASSOCIATION THE UNION

Employer identification number 54-0564701

FORM 990, PART LINE 1, III, DESCRIPTION OF ORGANIZATION MISSION: HIS EXAMPLE OF CHARACTER AND LEADERSHIP WILL CONTINUE TO INFORM AND INSPIRE FUTURE GENERATIONS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THE U.S. PATENT AND TRADEMARK OFFICE'S 10 MILLIONTH PATENT AN EVENT ATTENDED BY SECRETARY OF COMMERCE WILBUR ROSS, USPTO DIRECTOR ANDREI AND OTHER DIGNITARIES. SECRETARY OF DEFENSE JAMES MATTIS BROUGHT CHINA DEFENSE MINISTER WEI FENGHE TO MOUNT VERNON ON NOVEMBER 8 AS PART OF AN OFFICIAL VISIT. THESE NOTEWORTHY GUESTS JOIN THE CONSTELLATION OF GOVERNMENT AND MILITARY FIGURES WHO HAVE TRAVELED TO THE HOME OF GEORGE WASHINGTON OVER THE YEARS FOR BOTH FORMAL GATHERINGS AND PERSONAL VISITS.

WE CELEBRATED THE 286TH ANNIVERSARY OF OUR FIRST PRESIDENT'S BIRTH IN FEBRUARY BY UNVEILING A POWERFUL NEW ATTRACTION, BE WASHINGTON: IT'S YOUR TURN TO LEAD. LOCATED IN THE MUSEUM AND EDUCATION CENTER, THIS FIRST-PERSON INTERACTIVE EXPERIENCE PUTS GUESTS INSIDE THE MIND OF THE COMMANDER IN CHIEF AND PRESIDENT AT FOUR CHALLENGING MOMENTS IN PARTICIPANTS RECEIVE ADVICE FROM HISTORICAL FIGURES AND ULTIMATELY, CHOOSE A COURSE OF ACTION. TO EXPAND ON THE IMPACT OF THIS POWERFUL NEW EXPERIENCE, WE LAUNCHED AN ONLINE VERSION OF THE GAME DESIGNED FOR USE IN CLASSROOMS. IN ITS FIRST YEAR, MORE THAN 130,000 PEOPLE ACCESSED THE BE WASHINGTON PLATFORM IN PERSON OR ONLINE. WE WERE HONORED TO RECEIVE AN INTERNATIONAL HONOR, THE THEA AWARD OF

OUTSTANDING ACHIEVEMENT FROM THE THEMED ENTERTAINMENT ASSOCIATION, AND LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

15431111 150872 GWMV



Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization THE MOUNT VERNON LADIES ASSOCIATION **Employer identification number** 54-0564701 OF THE UNION ALSO TOOK HOME TOP HONORS AT THE SOUTHEASTERN MUSEUM CONFERENCE TECHNOLOGY COMPETITION. OUR LIVESTOCK PROGRAM HAS SERVED AS A "BEST-OF-BREED" EXAMPLE TO SIMILAR VENTURES AT OTHER HISTORIC SITES. RECOGNIZING THE POWERFUL ROLE THAT ANIMALS PLAY IN TELLING GEORGE WASHINGTON'S STORY, IN 2018 WE COMMENCED THE CONSTRUCTION OF A NEW LIVESTOCK FACILITY TO HOUSE THIS AWARD-WINNING PROGRAM. THE NEW BUILDING INCLUDES VETERINARY MEDICAL CARE FACILITIES, GROOMING CAPABILITIES, AND ADDITIONAL SPACE TO SHELTER THE ANIMALS DURING EXTREME WEATHER. CONSTRUCTION WILL BE COMPLETED IN 2019. FOR MORE THAN 60 YEARSSINCE MRS. FRANCES PAYNE BOLTON, VICE REGENT FROM OHIO, PURCHASED 485 ACRES OF LAND ON THE MARYLAND SHORELINE TO STOP THE CONSTRUCTION OF AN OIL REFINERYTHE MOUNT VERNON LADIES' ASSOCIATION HAS WORKED TIRELESSLY WITH PARTNERS ON BOTH SIDES OF THE POTOMAC RIVER TO

PROTECT THE RURAL LANDSCAPE IN MOUNT VERNON'S VIEW SHED FROM OVERDEVELOPMENT. THIS EFFORT WAS TESTED AGAIN IN 2018 AS WE JOINED FORCES WITH LIKE-MINDED ORGANIZATIONS TO SUCCESSFULLY STOP THE CONSTRUCTION OF A NATURAL GAS COMPRESSOR STATION THAT MIGHT HAVE UNDERMINED THESE ACHIEVEMENTS.

IN THE FIVE YEARS SINCE ITS OPENING, THE LIBRARY HAS DELIVERED A PROFOUND IMPACT ON SCHOLARS, EDUCATORS, AND LEADERS IN MYRIAD PROFESSIONS. TO MARK THAT ANNIVERSARY, WE HOSTED A SERIES OF EVENTS, INCLUDING A PRESENTATION BY THE LIBRARY'S NEW EXECUTIVE DIRECTOR, DR. KEVIN BUTTERFIELD, AND A VIRTUAL EDUCATION PROGRAM CREATED IN

PARTNERSHIP WITH THE HARRY S. TRUMAN PRESIDENTIAL LIBRARY IN

Name of the organization THE MOUNT VERNON LADIES' ASSOCIATION

Employer identification number

54-0564701 OF THE UNION INDEPENDENCE, MISSOURI. OUR FOUNDING DEBATES PROGRAM, SPONSORED BY THE AMMERMAN FAMILY FOUNDATION TO HONOR JAMES C. REES, COMMEMORATED THE ANNIVERSARY WITH PRESENTATIONS BY NOTABLE HISTORIANS AND JOURNALISTS WHO EXPLORED THE THEME, "HISTORY, MEMORY, IDENTITY: WHAT IT MEANS TO BE AN AMERICAN." HIGHLIGHTING RESEARCH AND SCHOLARSHIP ACROSS THE ESTATE, THE LIBRARY ALSO FACILITATED THE PUBLICATION OF A NEW BOOK, STEWARDS OF MEMORY: THE PAST, PRESENT, AND FUTURE OF HISTORIC PRESERVATION AT GEORGE WASHINGTON'S MOUNT VERNON, EDITED BY CAROL BORCHERT CADOU, FORMER SENIOR VICE PRESIDENT FOR HISTORIC PRESERVATION AND COLLECTIONS, WITH LUKE J. PECORARO, FORMER DIRECTOR OF ARCHAEOLOGY, AND THOMAS REINHART, DIRECTOR OF PRESERVATION.

OUR PROGRAMS, EVENTS, AND OUTREACH ARE DESIGNED TO BUILD CONNECTIONS WITH TODAY'S VISITORS. THUS, IN A NOD TO POPULAR INTEREST IN HEMP CULTIVATION, WE WORKED IN PARTNERSHIP WITH THE INDUSTRIAL HEMP RESEARCH PROGRAM AT THE UNIVERSITY OF VIRGINIA TO PLANT THE CROP IN OUR FIELDS FOR THE FIRST TIME SINCE WASHINGTON'S LIFETIME. THE HEMP'S HARVEST GARNERED WIDESPREAD MEDIA ATTENTION AND YIELDED A CROP DESTINED FOR USE IN ON-SITE TEXTILE DEMONSTRATIONS. WHEN THE ACCLAIMED MUSICAL HAMILTON APPEARED AT THE NEARBY KENNEDY CENTER DURING THE SUMMER MONTHS, WE MOUNTED A TEMPORARY EXHIBITION SHOWCASING HAMILTON-RELATED OBJECTS AND DOCUMENTS. IN JUNE, A PORTION OF THE CAST TRAVELED TO MOUNT VERNON FOR A SPECIAL TOUR OF THE ESTATE AND TO RECORD AN EPISODE OF OUR PODCAST.

WASHINGTON'S ROLE AS AN ENTERPRISING SPIRITS MAKER CONTINUES TO DELIGHT VISITORS TO HIS RECONSTRUCTED DISTILLERY. THIS YEAR, WE ADDED A NEW TWIST TO THE STORY, CRAFTING THE FIRST BATCH OF RUM IN THE DISTILLERY'S TWELVE-YEAR HISTORY. ALTHOUGH WASHINGTON NEVER MADE RUM IN HIS

Schedule O (Form 990 or 990-EZ) (2018)

Name of the organization THE MOUNT VERNON LADIES ASSOCIATION **Employer identification number** 54-0564701 OF THE UNION DISTILLERY, THE SPIRIT WAS CERTAINLY PART OF THE CULTURE AT MOUNT VERNON, PARTICULARLY BEFORE THE AMERICAN REVOLUTION. IN ANOTHER NEW DISTILLING VENTURE WE ALSO PRODUCED BOURBON FOR THE FIRST TIME. FOR THIS PROJECT, THEY DREW UPON WASHINGTON'S RECORDS FROM 1797, IN WHICH HE LAMENTED THAT THERE WAS NOT ENOUGH RYE GRAIN ON HAND TO PRODUCE WHISKEY, FORCING HIM TO RELY ON CORN AND WHEAT INSTEAD. THE BOURBON WILL BE AGED FOR A MINIMUM OF FOUR YEARS. WHILE EXPERIMENTING WITH THESE SPIRITS, THE DISTILLERY CONTINUES TO PERFECT ITS SIGNATURE PRODUCT, GEORGE WASHINGTON'S RYE WHISKEY, WHICH RECENTLY EARNED A SILVER MEDAL AT THE AMERICAN CRAFT SPIRITS ASSOCIATION AWARDS. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: REMARKABLE DISCOVERY: AN EARLIER GENERATION OF PANELING COMPOSED OF MOLDED AND PAINTED PLASTERA TECHNIQUE RESERVED FOR THE FINEST ROOMS IN THE MOST ELITE HOMES IN THE CHESAPEAKE REGION. THE ROOM'S EXISTING WOOD PANELS, INSTALLED IN THE LATE 1750'S TO EARLY 1760'S, HAD WARPED UNDER THE STRAINS OF WEATHER AND TIME AND WERE SUCCESSFULLY REHYDRATED USING INNOVATIVE PRESERVATION METHODS. IN PREPARATION FOR THE ROOM'S REINSTALLATION AND UNVEILING IN EARLY 2019, THE CURATORIAL TEAM WORKED BEHIND THE SCENES TO RE-CREATE THE ROOM'S DOCUMENTED FURNISHINGS: A SOFA AND EIGHT CHAIRS UPHOLSTERED IN SILK AND WOOL DAMASK DYED A STRIKING SAXON BLUEA HIGHLY FASHIONABLE HUE INVENTED IN THE 1750'S. NEW RESEARCH AND INSIGHTS ALSO INSPIRED CHANGES TO THE MANSION'S CENTRAL PASSAGE IN 2018. EARLY IN THE YEAR, THE SPACE WAS RETURNED TO A MORE AUTHENTIC REPRESENTATION OF ITS 1799 APPEARANCE, TRADING ITS DARK, WOOD-GRAINED PANEL WALLS FOR A LIGHTER BEIGE COLOR. ORIGINALLY FINISHED

WITH PANELING IN THE LATE 1750'S, THE CENTRAL PASSAGE WAS ROUTINELY

Name of the organization THE MOUNT VERNON LADIES' ASSOCIATION

Employer identification number

54-0564701 OF THE UNION UPDATED WITH THE MOST FASHIONABLE PAINT COLORS DURING WASHINGTON'S LIFETIMEENDING AT THE TIME OF HIS DEATH WITH THE CURRENT COLOR, KNOWN, IN THAT ERA, AS "STONE." MICROSCOPIC PAINT ANALYSIS CONFIRMED THAT THE TYPE OF WOOD-GRAINED TREATMENT ON VIEW SINCE 1981 WAS NOT IN PLACE UNTIL AFTER WASHINGTON'S DEATH. THE CENTRAL PASSAGE'S REPAINTING PROVIDED A PRIME OPPORTUNITY FOR ATTENTION TO ONE OF OUR MOST TREASURED OBJECTS, THE KEY TO THE BASTILLE, PRESENTED IN ITS ORIGINAL GILT DISPLAY CASE. THE CASE IS A RARE, POSSIBLY UNIQUE EXAMPLE OF 18TH-CENTURY CRAFTSMANSHIP, BELIEVED TO HAVE BEEN CUSTOM DESIGNED FOR PRESIDENT WASHINGTON BY A PHILADELPHIA CARVER. ALTHOUGH THE CASE'S DELICATE WOOD FRAME AND FRAGILE GLASS PANES REMAINED REMARKABLY INTACT, OTHER ELEMENTS REQUIRED RESTORATION, SUCH AS THE GILT EXTERIOR AND A MISSING ORNAMENTAL CENTRAL DROP, WHICH WAS FORTUNATELY DOCUMENTED IN AN EARLY PUBLICATION. NEW METAL MOUNTS WERE ALSO CRAFTED TO SUPPORT BOTH THE CASE ITSELF AND THE KEY INSIDE. OUR PROFESSIONAL STAFF ALSO LAUNCHED SIGNIFICANT PROJECTS BEHIND THE SCENES AND BELOW THE FLOORBOARDS OF THE MANSION, ENSURING THE HOME'S LONG-TERM SUSTAINABILITY. AS A KEY STEP IN THIS PROCESS, THE ARCHAEOLOGY TEAM CONDUCTED AN UNUSUAL EXCAVATION INSIDE THE MANSION BASEMENT, UNCOVERING FASCINATING EVIDENCE OF EARLY DRAINS AND WALL FOUNDATIONS GUIDING US TO A MORE DETAILED AND ACCURATE UNDERSTANDING OF HOW AND WHEN THE CELLAR EVOLVED. OUTSIDE THE MANSION, WE LAID THE GROUNDWORK FOR THE RESTORATION OF THE EAST SLOPE, WHERE A HEAVY STORM IN 2017 HAD DAMAGED A SECTION OF BRICK WALL AND SURROUNDING HILLSIDE. WORKING WITH LEADING STRUCTURAL AND GEOTECHNICAL ENGINEERING EXPERTS,

WE CONDUCTED A COMPREHENSIVE ASSESSMENT TO IDENTIFY SOLUTIONS FOR A

LANDSCAPE PROBLEM THAT HAS VEXED MOUNT VERNON SINCE WASHINGTON'S

Name of the organization THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

LIFETIME. SITE WORK TO IMPROVE DRAINAGE SYSTEMS AND REBUILD THE WALL

WILL BEGIN IN EARLY 2020.

TO ENSURE ITS SAFETY IN THE EVENT OF A FIRE, WE COMMENCED WORK ON THE INSTALLATION OF A NEW STATE-OF-THE-ART FIRE SUPPRESSION SYSTEM INSIDE THE MANSION, WHICH WILL BE COMPLETED IN LATE 2019. THE SYSTEM WILL BE EXPANDED TO INCLUDE THE ORIGINAL OUTBUILDINGS ONCE ADDITIONAL FUNDING HAS BEEN SECURED.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ASSOCIATION'S PROCESS FOR PREPARING AND REVIEWING THE FEDERAL FORM 990, CONTAINS FOUR LEVELS OF REVIEW: 1) A DRAFT OF THE FEDERAL FORM 990 IS PREPARED BY THE ASSOCIATION'S TAX ADVISORS, MARCUM LLP, BASED ON FINANCIAL INFORMATION IN THE CERTIFIED AUDIT, ORGANIZATIONAL INFORMATION DOCUMENTED FROM THE AUDIT, PREPARATION OF INFORMATION SCHEDULES BY THE FINANCE DEPARTMENT AND ANSWERS TO CHECKLIST QUESTIONS; 2) THE DRAFT OF FEDERAL FORM 990 IS REVIEWED BY THE ASSOCIATION'S MANAGEMENT (PRESIDENT/CEO, CHIEF FINANCIAL OFFICER AND CONTROLLER) FOR ACCURACY AND COMPLETENESS; 3) THE AUDIT COMMITTEE REVIEWS THE FINAL DRAFT WITH THE INDEPENDENT AUDITOR; AND 4) THE FINAL DRAFT IS THEN PROVIDED TO THE FULL BOARD FOR REVIEW PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE ASSOCIATION'S CONFLICT OF INTEREST POLICY REQUIRES THE ANNUAL COMPLETION OF A CONFLICT OF INTEREST FORM BY ALL DIRECTORS, OFFICERS AND KEY EMPLOYEES. THE FORM WAS PREPARED BY OUTSIDE COUNSEL AND ASKS FOR DOCUMENTATION OF POTENTIAL CONFLICTS OF INTEREST IN THE FOLLOWING AREAS:

FINANCIAL INTERESTS, GIFTS OR ENTERTAINMENT THAT MIGHT INFLUENCE DECISION

Name of the organization THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION

Employer identification number 54-0564701

MAKING, AND ANY OTHER ACTIVITIES. THE FORMS ARE REVIEWED BY THE CHIEF

FINANCIAL OFFICER AND ARE DISCUSSED WITH THE OUTSIDE COUNSEL AND THE

EXECUTIVE COMMITTEE OF THE BOARD, IF APPROPRIATE. THE PRESIDENT/CEO REVIEWS

THE COMPLETED FORM OF THE CHIEF FINANCIAL OFFICER, AND TAKES ANY

APPROPRIATE ACTION. IF A CONFLICT IS IDENTIFIED ON THE QUESTIONNAIRE, THE

CONFLICT IS SENT TO THE EXECUTIVE COMMITTEE AND IS RESOLVED APPROPRIATELY

BASED ON THE CIRCUMSTANCES.

FORM 990, PART VI, SECTION B, LINE 15:

ON A PERIODIC BASIS, THE ASSOCIATION WORKS WITH A COMPENSATION CONSULTANT

TO PERFORM COMPARATIVE MARKET STUDIES ON OVER 50 FULL-TIME POSITIONS. THIS

STUDY INCLUDED ALL EXECUTIVE AND MANAGEMENT POSITIONS AND A NUMBER OF FRONT

LINE STAFF POSITIONS. COMPENSATION IS BENCHMARKED AGAINST OUR PEER GROUP

(MUSEUMS AND HISTORICAL SITES), SIMILAR POSITIONS IN THE WASHINGTON DC

METRO AREA AND THE NOT-FOR-PROFIT INDUSTRY AT-LARGE. MARKET ADJUSTMENTS ARE

MADE AND SALARY GRADES ADJUSTED BASED ON THESE STUDIES.

IN ADDITION, PRESIDENT/CEO COMPENSATION IS REVIEWED AND APPROVED BY THE

EXECUTIVE COMMITTEE BOARD. IN 2017 THE BOARD HIRED AN INDEPENDENT EXECUTIVE

SEARCH FIRM THAT SPECIALIZED IN NON-PROFIT CEO COMPENSATION TO ANALYZE OUR

PRESIDENT/CEO COMPENSATION STRUCTURE TO ENSURE IT IS CONSISTENT WITH

CURRENT MARKET AND INDUSTRY RATES.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NV,NY,NC,ND

OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

Name of the organization THE MOUNT VERNON LADIES' ASSOCIATION OF THE UNION	Employer identification number 54-0564701
THE ASSOCIATION'S ARTICLES OF INCORPORATION ARE AVAILABLE	TO THE PUBLIC
THROUGH THE STATE OF VIRGINIA STATE CORPORATION COMMISSION	. THE BYLAWS AND
THE CONFLICTS OF INTEREST POLICY, WHICH REQUIRES ANNUAL DI	SCLOSURE OF
CONFLICTING INTERESTS BY BOARD OF DIRECTORS AND OFFICERS,	ARE NOT MADE
AVAILABLE TO THE PUBLIC. FINANCIAL STATEMENTS ARE POSTED O	N THE
ASSOCIATION'S WEBSITE AND ARE AVAILABLE IN HARD COPY UPON	SPECIFIC REQUEST.
IN ADDITION, SUMMARIZED FINANCIAL INFORMATION IS DISCLOSED	IN THE
ASSOCIATION'S ANNUAL REPORT.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF INTEREST RATE SWAP AGREEMENT	800,377.
CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	-280,635.
TOTAL TO FORM 990, PART XI, LINE 9	519,742.
	_