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Form	<b>990</b>

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## EXTENDED TO AUGUST 17, 2015

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

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▶ Do not enter social security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at <u>www.irs.gov/form990</u>.



AI		and e and e and e and e and e and e	enaing						
B c	Check if pplicab	e: C Name of organization		D Employer identifie	cation number				
	Addr	THE AMERICAN RADIO RELAY LEAGUE, INC.							
	Name			06-600004					
	Initia		Room/suite	E Telephone number					
	Final		nooni, suite		594-0225				
L	⊥returr termi ated			G Gross receipts \$	20,197,347.				
	Amer			H(a) Is this a group re					
				for subordinates					
	pend	<sup>ng</sup> SAME AS C ABOVE		H(b) Are all subordinates in	····· = =				
11	Гах-ех	empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) 0	or 527		list. (see instructions)				
		te: WWW • ARRL • ORG		H(c) Group exemption					
		f organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year		State of legal domicile: CT				
	art I	Summary	1						
	1	Briefly describe the organization's mission or most significant activities: PROMO	OTION	OF INTEREST	IN AMATEUR				
Ce		RADIO AND THE ESTABLISHMENT OF AMATEUR RAI	DIO NE	TWORKS.					
nar	2	Check this box      if the organization discontinued its operations or dispose			ets.				
ver	3			3	15				
ß	4	Number of independent voting members of the governing body (Part VI, line 1b)			15				
ა ა	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		110					
itie	6	Total number of volunteers (estimate if necessary)		45727					
Activities & Governance	7 a			7a	2,519,834.				
Ā	b	Net unrelated business taxable income from Form 990-T, line 34			0.				
				Prior Year	Current Year				
đ	8	Contributions and grants (Part VIII, line 1h)		2,498,154.	1,853,335.				
Revenue	9	Program service revenue (Part VIII, line 2g)		10,323,926.	10,931,148.				
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		567,578.	666,658.				
Ĕ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,492,387.	1,073,999.				
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		14,882,045.	14,525,140.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		37,752.	14,396.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,929,270.	7,151,204.				
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) <b>•</b> 507, 25	54.						
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,050,280.	6,845,218.				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,017,302.	14,010,818.				
	19	Revenue less expenses. Subtract line 18 from line 12		1,864,743.	514,322.				
OL				ginning of Current Year	End of Year				
sets	20	Total assets (Part X, line 16)		25,795,161.	26,424,199.				
Net Assets	21	Total liabilities (Part X, line 26)		11,286,664.	11,249,437.				
Float	22	Net assets or fund balances. Subtract line 21 from line 20		14,508,497.	15,174,762.				
Pa	art II	Signature Block							
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts, and to the best of my	knowledge and belief, it is				

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer         BARRY SHELLEY, CFO         Type or print name and title			Date							
Paid	Print/Type preparer's name PAUL BALLASY	Preparer's signature	Date	Check PTIN if self-employed P00852868							
Preparer	Firm's name <b>COHNREZNICK LLP</b>			Firm's EIN <b>22-1478099</b>							
Use Only	Firm's address 350 CHURCH STREE: HARTFORD, CT 0610			Phone no. 959 - 200 - 7000							
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)										
432001 11-0	11-07-14       LHA For Paperwork Reduction Act Notice, see the separate instructions.       Form 990 (2014)										

Form	990 (2014) THE AMERICAN RADIO RELAY LEAGUE, INC.	06-6000004	Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	THE PURPOSES FOR WHICH OUR CORPORATION IS FORMED ARE THE		
	THE PROMOTION OF INTEREST IN AMATEUR RADIO COMMUNICATION		
	EXPERIMENTATION; THE ESTABLISHMENT OF AMATEUR RADIO NETWO		
	PROVIDE ELECTRONIC COMMUNICATIONS IN THE EVENT OF DISASTE	ERS OR OTHER	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		<b>V</b> .
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	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 n	• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expenses, ar	nd
	revenue, if any, for each program service reported.	F 700	170
4a	(Code:) (Expenses \$ 6,106,347. including grants of \$ 9,436. ) (Revenu		/
	PROMOTION OF PUBLIC INTEREST IN AND EXPERIMENTATION WITH		10
	COMMUNICATIONS, ENCOURAGEMENT OF THE EXCHANGE OF IDEAS AN	ND EXPERTISE	
	AMONG MEMBERS AND VARIOUS OTHER MEMBERSHIP PROGRAMS.		
41	(Code: ) (Expenses \$ 2,862,460 · including grants of \$ ) (Revenu	es 2,345,	582 \
4b	(Code:) (Expenses \$2,862,460. including grants of \$) (Revenu QST: MONTHLY PERIODICAL FOR ARRL MEMBERS (CIRCULATION APP		
	TO DELIVER NEWS AND INFORMATION RELATED TO AMATEUR RADIO		/
	PRODUCT REVIEWS AND EDITORIAL CONTENT. APPROXIMATELY 872		
	MONTHLY ARE DISTRIBUTED THROUGH WHOLESALERS.		
	MONTHEI ARE DISTRIBUTED THROUGH WHOLESALERS.		
40	(Code: ) (Expenses \$ 888,043. including grants of \$ 4,960. ) (Revenu	323	<b>660.</b> )
4c	(Code:) (Expenses \$ 888,043. including grants of \$ 4,960. ) (Revenu ADVOCACY: PROMOTE THE USE OF AMATEUR RADIO, ESPECIALLY AS		)
	COMMUNICATION IN TIME OF DISASTER. MONITOR FCC REGULATION		
	TO AMATEUR RADIO ON BEHALF OF MEMBERS. MONITOR LEGISLATIC		
	RELATES TO AMATEUR RADIO TO KEEP MEMBERS INFORMED OF IMPO		ES
	AND TO AMAIDON MADIO TO NUM MUMBERO INFORMED OF THE		
4d	Other program services (Describe in Schedule O.)		
÷υ	(Expenses \$ 439,675 · including grants of \$ ) (Revenue \$	500.)	
40	Total program service expenses ► 10,296,525.		
-10		Form <b>9</b>	<b>90</b> (2014)
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orm	990	(2014)	)

			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	Х	
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		X
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			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, IX, or X			
••	as applicable.			
-	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
a		11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		- 23	
b		11b		х
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.		x
<b>ا</b> م	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u></u>
a	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			x
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	A	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	A	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
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		<u> </u>
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	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			37
	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		_X_
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		<u> </u>
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		<u>X</u>
20a	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		

Form 990 (2014)

Form 990 (2			AMERICAN	-	LEAGUE,	INC.
Part IV	Checklist of Re	equire	d Schedules (	continued)		

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
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		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 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? If "Yes," complete			
	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	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
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? // "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	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		X
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 officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	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?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
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		_X_
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
<b>0</b> -	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	6-		v
~~	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X 000	

Form **990** (2014)

Form	990 (2014) THE AMERICAN RADIO RELAY LEAGUE, INC. 06-600	004	F	Page 5					
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance								
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	L							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ו							
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7							
	(gambling) winnings to prize winners?	1c	Х						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a 110	)							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х						
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Х						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X					
b	If "Yes," enter the name of the foreign country:								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X					
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit								
	any contributions that were not tax deductible as charitable contributions?	6a		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts								
	were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а									
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х						
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required								
	to file Form 8282?	7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>					
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	-							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-							
11	Section 501(c)(12) organizations. Enter:								
a	Gross income from members or shareholders 11a	-							
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	-							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-							
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>							
Ŀ	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.								
α	Enter the amount of reserves the organization is required to maintain by the states in which the								
-	organization is licensed to issue qualified health plans 13b	-							
	Enter the amount of reserves on hand	140		x					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		<u></u>					
u	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	140	L	L					

Form 990	) (2014)
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#### THE AMERICAN RADIO RELAY LEAGUE, INC.

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 15			
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	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	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	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			37
_	taxable entity during the year?	16a		X
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			
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright$ CT			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at (s	allable	9	
	for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website X Upon request Other (explain in Schedule O)	C	- 1	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	TINANC	al	
00	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  CONTROLLER - 860-594-0200			
	225 MAIN STREET, NEWINGTON, CT 06111		000	

THE AMERICAN RADIO RELAY LEAGUE, INC.

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

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

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

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

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, 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.

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

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

(A)	(B)	l	mea	(C		1001		(D)	(E)	(F)
Name and Title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours per	box	not cł , unles	ss per	son i	s both	ı an	compensation	compensation	amount of
	week	offic	cer an	id a di	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	truste		e	bens		(W-2/1099-MISC)		organization
	organizations below	ual tr	tional		ploye	t corr /ee	~			and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MR. WILLIAM EDGAR	10.00	_		0	×	1 0	ш			
DIRECTOR		х						0.	0.	0.
(2) MR. DENNIS BODSON	10.00									
DIRECTOR		х						0.	Ο.	0.
(3) MR. JAMES WEAVER	10.00									
DIRECTOR		х						0.	Ο.	0.
(4) MR. ROBERT VALLIO	10.00									
DIRECTOR		Х						0.	0.	0.
(5) MR. GEORGE ISELY	10.00									
DIRECTOR		Х						0.	0.	0.
(6) MR. RICHARD NORTON	10.00									
DIRECTOR		Х						0.	0.	0.
(7) MR. DAVID NORRIS	10.00									
DIRECTOR		Х						0.	0.	0.
(8) MR. BRIAN MILESHOSKY	10.00									
DIRECTOR		Х						0.	0.	0.
(9) MR. DOUG REHMAN	10.00									_
DIRECTOR		Х						0.	0.	0.
(10) DR. DAVID WOOLWEAVER	10.00									_
DIRECTOR		Х						0.	0.	0.
(11) MR. MIKE LISENCO	10.00									-
DIRECTOR		Х						0.	0.	0.
(12) MR. GREGORY WIDIN	10.00									•
DIRECTOR	10.00	Х						0.	0.	0.
(13) MR. THOMAS FRENAYE	10.00								0	0
DIRECTOR	10.00	Х						0.	0.	0.
(14) MR. JIM PACE	10.00								0	0
DIRECTOR	10.00	Х						0.	0.	0.
(15) MR. CLIFF AHRENS	10.00	77							<u> </u>	<u>^</u>
DIRECTOR	10.00	Х	$\left  - \right $			-		0.	0.	0.
(16) MR. BRUCE FRAHM	10.00			v					<u>^</u>	<u>^</u>
SECOND VP THROUGH 1/17/2014 (17) MR. JAMES FENSTERMAKER	10 00			X				0.	0.	0.
SECOND VP	10.00			x				0.	0.	0.
SECOND AL				Δ				υ.	υ.	<b>0.</b>

									GUE, INC.	06-60	)00(	004	Pa	age <b>8</b>
Part VII Section A. Officers, Di	rectors, Trust	tees, Key Emp	oloy	ees,	anc	l Hig	hest	C	ompensated Employee	s (continued)				
(A) Name and title		<b>(B)</b> Average hours per week	(do box	not cl , unles	(C Pos heck i ss per	<b>C)</b> ition more f rson is		ne an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related		Esti amo	(F) imate ount c other	
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s	comp fro orga and		e on ed
(18) MR. RICK NISWANDER TREASURER		5.00			x				0.		ο.			0.
(19) MS. KAY CRAIGIE		10.00												_
PRESIDENT		10.00			X				0.		0.			0.
(20) MR. JOHN BELLOWS		10.00			37									0
INT'L VP (21) MR. RICHARD RODERICK		10.00			X				0.		0.			0.
FIRST VP		10.00			x				0.		0.			0.
(22) MR. BARRY SHELLEY		40.00			<u> </u>				0.					0.
CFO					x				147,501.		0.	9	.5(	)3.
(23) MR. DAVID SUMNER		40.00											1	
CEO					х				175,040.		0.	26	,51	L2.
(24) MR. BRENNAN PRICE		40.00												
СТО							Х		134,729.		0.	15	, 39	92.
(25) MR. HAROLD KRAMER		40.00												
<u>coo</u>							Х		145,540.		0.	9	,26	52.
(26) MR. STEVEN FORD	<b>GED</b>	37.50					х		112 100			0	0.5	76
EDITORIAL & PRODUCTION MANA									<u>113,169.</u> 715,979.		0.		07 0,74	
1b Sub-total c Total from continuation she									207,729.		0.		, 33	
d Total (add lines 1b and 1c) .									923,708.		0.	117		
2 Total number of individuals (ir								re		000 of reportable		/	700	
compensation from the organ	ization 🕨													7
											r	`	Yes	No
3 Did the organization list any f		-				• •	•		•					
line 1a? If "Yes," complete Sc												3		X
4 For any individual listed on lin													x	
<ul><li>and related organizations greater</li><li>5 Did any person listed on line</li></ul>											·····	4		
rendered to the organization?												5		Х
Section B. Independent Contract			2010	01 30		56/30	<u>, , , , , , , , , , , , , , , , , , , </u>							
1 Complete this table for your f	ive highest cor	npensated ind	ере	nder	nt co	ontra	ctors	s th	at received more than \$	100,000 of comp	ensat	ion fror	n	
the organization. Report com	pensation for t	he calendar ye	ear e	endin	ng w	ith o	r with	nin	the organization's tax y	ear.				
	(A)								(B)		_	(C)		
	and business								Description of s	ervices	C	ompen	satior	<u>ו</u>
BOOTH, FRERET AND	-			ΕI	MA	Y						1 7 7		n c
ROAD, SILVER SPRIN	IG, MD Z	0904-60	<u> </u>					-	LEGAL			133	,1:	50.
								1						

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 1

								GUE, INC.	06-600	0004
Part VII Section A. Officers, Directors, Trustees, Key Employees, and High (A) (B) (C)						ligh	est (		, ,	
(A) Name and title	(B) Average hours per	Position (check all that apply)					ly)	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) MR. JONATHAN SIVERLING TECHNICAL RELATIONS SPECIALIST	37.50					x		105,124.	0.	19,475.
(28) MR. MICHAEL KEANE	37.50							105,124.	0.	19,475.
IT MANAGER						x		102,605.	0.	27,863.
		-								
		-								
		-								
		-								
		-								
		-								
Total to Part VII, Section A, line 1c								207,729.		47,338.

Form	n 990 (2			RADIO REI	LAY LEAGUE,	INC.	06-6000	004 Page <b>9</b>
Pa	rt VII	Statement of Reven	ue					
		Check if Schedule O conta	ains a response o	or note to any lin			(2)	
					<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	<b>(D)</b> Revenue excluded from tax under sections 512 - 514
s s	1 a	Federated campaigns	1a					512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
ັບ ອີ		Fundraising events						
ífts, r Ai		Related organizations						
, Gi nila		Government grants (contributi						
Sin		All other contributions, gifts, gran						
ler uti	•	similar amounts not included abov		1,853,335.				
et ib	a	Noncash contributions included in lines		282,165.				
no Du	-	Total. Add lines 1a-1f	-	<u> </u>	1,853,335.			
0.0				Business Code				
n,	2 a	MEMBERSHIP DUES		Dusiness Oode	5,915,074.	5,915,074.		
vice	z u b	ADVERTISING INCOME		541800	2,519,834.		2,519,834.	
Ser	Č	CIRCULATION/PUBLICATION	1	511120	1,158,659.	1,158,659.	_ / * _ * / * * _ *	
E S	d	PROGRAM & SERVICE FEES	<u> </u>		852,127.	852,127.		
Program Service Revenue	ŭ	EXAM FEES			485,454.	485,454.		
Pro	f	All other program service reve	<u></u>		,	,		
	a I				10,931,148.			
	3	Investment income (including						
	Ũ	other similar amounts)			392,101.			392,101.
	4	Income from investment of tax			· · · · ·			,
	5	Royalties			38,168.			38,168.
	•	noyanico	(i) Real	(ii) Personal	,			,
	6 a	Gross rents	(i) Hour					
		Less: rental expenses						
		Rental income or (loss)						
		d Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	4,133,146.					
	b	Less: cost or other basis						
		and sales expenses	3,858,589.					
	с	Gain or (loss)						
		Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·		274,557.			274,557.
		Gross income from fundraising						
anu	•	including \$						
evel (		contributions reported on line						
Å		Part IV, line 18	,					
Other Revenue	b	Less: direct expenses						
Ò		Net income or (loss) from fund		►				
		Gross income from gaming ac						
		Part IV, line 19	а					
	b	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less						
		and allowances	а	2,801,851.				
	b	Less: cost of goods sold		1,813,618.				
		Net income or (loss) from sales		►	988,233.			988,233.
		Miscellaneous Revenue		Business Code				
	11 a	OTHER INCOME		900099	47,598.	47,598.		
	b							
	с							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>&gt;</b>	47,598.			
	12	Total revenue. See instructions.			14,525,140.	8,458,912.	2,519,834.	1,693,059.

Form 990 (2014)

THE AMERICAN RADIO RELAY LEAGUE, INC. Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX         Do not include amounts reported on lines 6b,       (A)       (B)       (C)       (D)         7b, 8b, 9b, and 10b of Part VIII.       Total expenses       Program service expenses       Management and general expenses       Fundraising expenses											
7b, 8	3b, 9b, and 10b of Part VIII.										
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21										
2	Grants and other assistance to domestic	4.4. 0.0.6	44.000								
	individuals. See Part IV, line 22	14,396.	14,396.								
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,	358,556.		358,556.							
~	trustees, and key employees	330,330.									
6	Compensation not included above, to disqualified										
	persons (as defined under section $4958(f)(1)$ ) and										
7	persons described in section 4958(c)(3)(B)	5,259,305.	3,433,263.	1,573,870.	252,172						
7 8	Other salaries and wages Pension plan accruals and contributions (include	5,257,505.	5, 35, 205.	1,5,5,0,0.	454,114						
0	section 401(k) and 403(b) employer contributions)	282,608.	172,711.	97,211.	12,686						
9	Other employee benefits	841,919.	514,525.	289,602.	37 792						
0	Payroll taxes	408,816.	247,464.	142,112.	37,792 19,240						
1	Fees for services (non-employees):	100,0100	21//1010		197210						
	Management										
	Legal	134,664.	134,664.								
	Accounting	31,600.		31,600.							
	Lobbying	84,176.	84,176.								
	Professional fundraising services. See Part IV, line 17										
f	Investment management fees										
	Other. (If line 11g amount exceeds 10% of line 25,										
-	column (A) amount, list line 11g expenses on Sch 0.)	226,156.	206,462.	19,384.	310						
2	Advertising and promotion	3,175.	3,175.								
3	Office expenses	1,262,132.	1,018,636.	74,020.	169,476 1,464						
4	Information technology	130,177.	62,687.	66,026.	1,464						
5	Royalties										
6	Occupancy	377,811.	271,003.	106,808.							
7	Travel	431,400.	389,565.	28,106.	13,729						
8	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
9	Conferences, conventions, and meetings										
0	Interest										
1	Payments to affiliates	040 255									
2	Depreciation, depletion, and amortization	242,357.	181,768.	60,589.							
3		108,563.	75,994.	32,569.							
4	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.) PRINTING & PUBLICATION	1,682,778.	1,682,778.								
	PROGRAM SERVICES	999,219.	989,646.	9,573.							
b	ADMINISTRATIVE EXPENSES	452,207.	196,293.	255,914.							
	RENTALS & LEASES	286,412.	282,516.	3,896.							
	All other expenses	392,391.	334,803.	57,203.	385						
е 5	Total functional expenses. Add lines 1 through 24e	14,010,818.	10,296,525.	3,207,039.	507,254						
<u>5</u> 6	Joint costs. Complete this line only if the organization	, , , , , , , , , , , , , , , , , ,			2011201						
5	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										

33

34

	990 (2 <b>† X</b>	2014) THE AMERICAN R Balance Sheet	ADIC	RELAY LEAGUE	, INC.	06-	6000004 Page 11
1 4	ιΛ		. to	line in this Dort V			
		Check if Schedule O contains a response or not	e to any			T	
					<b>(A)</b> Beginning of year		( <b>B)</b> End of year
	1	Cash - non-interest-bearing			1,191,475.	1	815,902.
	2	Savings and temporary cash investments			832,222.	2	971,834.
	3	Pledges and grants receivable, net			1,141,832.		920,264.
	4	Accounts receivable, net			561,140.	4	369,552.
	5	Loans and other receivables from current and fo			· ·		
		trustees, key employees, and highest compensa	ted em	oloyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualif	ied pers	sons (as defined under			
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect	ion 501	(c)(9) voluntary			
sts		employees' beneficiary organizations (see instr).		F		6	
Assets	7	Notes and loans receivable, net				7	
A	8	Inventories for sale or use	710,506.	8	667,320.		
	9				113,715.	9	293,601.
	10a	Land, buildings, and equipment: cost or other		7 256 420			
		basis. Complete Part VI of Schedule D	10a	5,753,271.	919,417.	10.	1 603 150
			20,324,854.	10c 11	<u>1,603,159</u> 20,782,567.		
	11 12	Investments - publicly traded securities		20,324,034.	11	20,102,301.	
	12	Investments - program-related. See Part IV, line -		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa	25,795,161.	16	26,424,199.		
	17	Accounts payable and accrued expenses			993,786.	17	649,467.
	18	Grants payable				18	
	19	Deferred revenue			32,428.	19	15,795.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F	Part IV c	of Schedule D		21	
S	22	Loans and other payables to current and former					
iliti		key employees, highest compensated employee	s, and c	lisqualified persons.			
Liabiliti						22	
-	23	Secured mortgages and notes payable to unrela				23	
	24 05	Unsecured notes and loans payable to unrelated		Γ		24	
	25	Other liabilities (including federal income tax, par parties, and other liabilities not included on lines					
					10,260,450.	25	10 584 175.
	26				11,286,664.	26	<u>10,584,175.</u> 11,249,437.
	20	Organizations that follow SFAS 117 (ASC 958				20	
Ś		complete lines 27 through 29, and lines 33 an					
Ce	27				9,193,967.	27	8,961,363.
Net Assets or Fund Balances	28				2,166,018.	28	2,193,086.
d B	29				3,148,512.	29	4,020,313.
Fun		Organizations that do not follow SFAS 117 (As	SC 958)	, check here 🕨 🗌			
P		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 eq		Γ		31	
let.	32	Retained earnings, endowment, accumulated inc	come, o	r other funds	14,508,497.	32	15,174,762.
~	33	Total net assets or fund balances		I	JUO.4J/_	1 333	

Total net assets or fund balances

Total liabilities and net assets/fund balances

# <u>e</u> 11

15,174,762. 26,424,199.

Form **990** (2014)

33 34

14,508,497. 25,795,161.

Form 99		06-	5000004	Pa	<sub>.ge</sub> 12
Part >	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
<b>1</b> To	otal revenue (must equal Part VIII, column (A), line 12)	1	14,52	-	
<b>2</b> To	otal expenses (must equal Part IX, column (A), line 25)	2	14,01		
<b>3</b> Re	evenue less expenses. Subtract line 2 from line 1	3		4,3	
<b>4</b> Ne	et assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,50		
5 Ne	et unrealized gains (losses) on investments	5	15	<u>1,9</u>	43.
<b>6</b> Do	pnated services and use of facilities	6			
<b>7</b> In	vestment expenses	7			
<b>8</b> Pr	ior period adjustments	8			
<b>9</b> Ot	ther changes in net assets or fund balances (explain in Schedule O)	9			0.
<b>10</b> Ne	et assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	blumn (B))	10	15,17	<u>4,7</u>	62.
Part >	III Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			_	Yes	No
<b>1</b> Ac	ccounting method used to prepare the Form 990: 🗌 Cash 🛛 🛛 Accrual 📃 Other				
lf <sup>+</sup>	the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule (	Э.			
2a W	ere the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
lf	"Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
se	parate basis, consolidated basis, or both:				
L	Separate basis Consolidated basis Both consolidated and separate basis				
b W	ere the organization's financial statements audited by an independent accountant?		2b	Х	
lf	"Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
_	onsolidated basis, or both:				
Ľ	X Separate basis Consolidated basis Both consolidated and separate basis				
c If	"Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
re	view, or compilation of its financial statements and selection of an independent accountant?		<u>2c</u>	Х	
	the organization changed either its oversight process or selection process during the tax year, explain in Sche				
	a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	t and OMB Circular A-133?		<u>3a</u>		X
b lf	"Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requir	ed audit			
or	audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2014)

SC	HED	ULE A						_		OMB No. 1545-0047
		0 or 990-EZ)		Public Cha	rity Status an	d Pub	blic Su	ipport		
(10)	111 33	001 330-22)	Co	omplete if the organ	ization is a section 501	l(c)(3) orga	anization	or a section		2014
Doport	mont of	the Treesury			17(a)(1) nonexempt cha					Open to Public
		the Treasury ue Service	Informati		Attach to Form 990 or F Form 990 or 990-EZ) and i			www.irs.gov/fo	rm000	Inspection
Nam	e of t	he organizati						ww.ii3.gov/io		identification number
				AMERICAN R	ADIO RELAY LI	EAGUE	TNC			6-6000004
Par	tl	Reason	for Public (	Charity Status	All organizations must co	omplete th	is part.) Se	e instructions		0 000001
					For lines 1 through 11, c					
1	//gain		-		n of churches described	-	-	I)(A)(i)		
2				ion 170(b)(1)(A)(ii).			11110(0)(	· <i>\\~</i> \\'}		
3					inization described in so	ection 170	(h)(1)(A)(ii	i)		
4		=	-		njunction with a hospital			-	(iii). Enter	the hospital's name.
•		city, and state	-		·)				,,,	·····,
5		•	-	or the benefit of a col	lege or university owned	l or operat	ed bv a do	vernmental u	nit describe	ed in
				Complete Part II.)	0 ,		, 0			
6					nental unit described in	section 17	70(b)(1)(A)	(v).		
7				-	ntial part of its support fi				ne general r	oublic described in
-		-		omplete Part II.)					- <b>3</b>	
8		•		• •	1)(A)(vi). (Complete Par	t II.)				
9	X	-			than 33 1/3% of its sup		contributio	ns, membersl	nip fees, an	d gross receipts from
		0			t to certain exceptions,			-	•	•
					(less section 511 tax) fro					-
				mplete Part III.)	,		•	, ,		
10		An organizati	on organized	and operated exclusi	vely to test for public sa	fety. See	section 50	)9(a)(4).		
11		An organizati	on organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly	supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section	509(a)(3). C	heck the box in
		lines 11a thro	ough 11d that	describes the type of	f supporting organization	n and com	plete lines	11e, 11f, and	11g.	
а		<b>Type I.</b> A s	upporting orga	anization operated, si	upervised, or controlled	by its supp	ported org	anization(s), t	pically by	giving
		the suppor	ted organizatio	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	pporting
		organizatio	n. <b>You must c</b>	complete Part IV, Se	ections A and B.					
b		<b>Type II.</b> A s	supporting org	anization supervised	or controlled in connect	tion with its	s supporte	d organizatio	n(s), by hav	ing
		control or n	nanagement c	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	orted
		organizatio	n(s). <b>You mus</b>	t complete Part IV,	Sections A and C.					
с		] Type III fur	nctionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	d with,
		its supporte	ed organizatio	n(s) (see instructions)	. You must complete l	Part IV, Se	ctions A,	D, and E.		
d		] Type III no	n-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection w	ith its suppor	ted organiz	ation(s)
		that is not f	functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	uirement and	an attentiv	reness
	requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.									
е	e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III									
		functionally	integrated, or	r Type III non-functior	nally integrated supporti	ng organiz	ation.			
f	Ente	r the number	of supported o	organizations						
g				n about the supporte		(- ) - ··				
	(i	i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o listed i	rganization n your	(v) Amount or		(vi) Amount of
		organization	I		above or IRC section		document?	support Instruct		other support (see Instructions)
					(see instructions))	Yes	No			

	(see instructions))	Yes	No	instruction by	maradionay
Total					

_	edule A (Form 990 or 990-EZ) 2014	Organizationa	Described in	Sections 170		1170/6//1//////	Page 2	
Pá	Support Schedule for	-					-	
	(Complete only if you checked fails to qualify under the tests			0	on falled to quality i	under Part III. If the	organization	
<u></u>		s listed below, plea	se complete Part	iii. <i>)</i>				
	ction A. Public Support							
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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)							
	Public support. Subtract line 5 from line 4.							
Se	ction B. Total Support	1	I	1	1			
	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	<b>(f)</b> Total	
7	Amounts from line 4							
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources $\dots$							
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	Total support. Add lines 7 through 10							
12	Gross receipts from related activities,	etc. (see instructio	ons)			12		
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)		
	organization, check this box and stor	phere						
Se	ction C. Computation of Publi	ic Support Per	centage					
14	Public support percentage for 2014 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%	
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	%	
<b>16</b> a	a 33 1/3% support test - 2014. If the o					nore, check this box	k and	
	stop here. The organization qualifies							
k	<b>33 1/3% support test - 2013.</b> If the o	organization did no	ot check a box on					
	and <b>stop here.</b> The organization qualifies as a publicly supported organization							
17a	<b>17a 10% -facts-and-circumstances test - 2014.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization							
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
ł	<b>b 10% -facts-and-circumstances test - 2013.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or							
•	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the							
	organization meets the "facts-and-circ						, ▶□	
18								
				, · , · · -, · · 17	,			

Schedule A (Form 990 or 990-EZ) 2014

#### Schedule A (Form 990 or 990 EZ) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC. 06-6000004 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

#### Section A. Public Support Calendar year (or fiscal year beginning in) (b) 2011 (c) 2012 (d) 2013 (a) 2010 (e) 2014 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 2084625.11610786. 2637906. 2366928. 2023173. 2498154. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 12854274.12969340.13078961.13467163.13732999.66102737. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 15492180.15336268.15102134.15965317.15817624.77713523. 6 Total. Add lines 1 through 5 ..... 7a Amounts included on lines 1, 2, and Ο. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year n c Add lines 7a and 7b 0 77713523. Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total 9 Amounts from line 6 15492180.15336268.15102134.15965317.15817624.77713523. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 494,299. 619,478. 400,690. 430,269. 411,307. 2356043. and income from similar sources **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 411,307. 494,299. 619,478. 400,690. 430,269. 2356043. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 46,536. 48,033. 335,486. 43,109. 150,210. 47,598. assets (Explain in Part VI.) 15946596.15980777.15768148.16414040.16295491.80405052. **13** Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, ► check this box and **stop here** Section C. Computation of Public Support Percentage 96.65 % 15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f) 15 95.92 Public support percentage from 2013 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage 2.93 17 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f) % 3.56 18 Investment income percentage from 2013 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not ► X more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2014

#### Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC. 06-6000004 Page 4 Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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")? *If* "Yes" and *if you checked 11a or 11b 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 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).*
- **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 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer (b) 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

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

No

## Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC. 06-6000004 Page 5 Part IV Supporting Organizations (continued)

			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		
с	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		
	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	1		
~	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,			
0	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			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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	-		
Ŭ	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	3		
Sec	supported organizations played in this regard. tion E. Type III Functionally-Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction of the second sec	uctions).		
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			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? 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.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in $P_{art} V_{I}$ .	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
5	of its supported organizations? If "Yes," describe in <i>Part VI the role played by the organization in this regard.</i>	3b		
	on to supported organizations: in res, describe in Part VI the role played by the organization in this regard.	30		

Sche	dule A (Form 990 or 990-EZ) 2014 THE AMERICAN RADIO RELA			06-6000004 Page 6
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust or	n Nov. 20, 1970. See ins	structions. All
	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
	ion A - Aujusted Net income			(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 o	rganization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2014

## Schedule A (Form 990 or 990-EZ) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC. 06-6000004 Page 7

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 exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	5	
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 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Centi	en E. Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
Secu	on E - Distribution Allocations (see instructions)		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
C				
d				
e	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
_j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
b				
<u> </u>				
	Excess from 2013			
е	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014       THE       AMERICAN       RADIO       RELAY       LEAGUE       INC       06-6000004       Page 8         Part VI       Supplemental Information.       Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.         Also complete this part for any additional information.       (See instructions).
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:
OTHER INCOME-REIMBURSEMENT OF SHARED EXPENSES AND SALE OF USED EQUIPMENT
2010 AMOUNT: \$ 43,109.
2011 AMOUNT: \$ 150,210.
2012 AMOUNT: \$ 46,536.
2013 AMOUNT: \$ 48,033.
2014 AMOUNT: \$ 47,598.

SCHEDULE C	Political Campaign and Lobbying Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)	For Organizations Exempt From Income Tax Under section 501(c) and section 527	2014
Department of the Treasury Internal Revenue Service	<ul> <li>Complete if the organization is described below.</li> <li>Attach to Form 990 or Form 990-EZ.</li> <li>Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.</li> </ul>	Open to Public Inspection
If the organization ans	wered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activit	ties), then
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations: Complete Parts I-A and B. Do not complete Part I-C.	
<ul> <li>Section 501(c) (othe</li> </ul>	r than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.	
<ul> <li>Section 527 organiz</li> </ul>	ations: Complete Part I-A only.	
If the organization ans	wered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), ther	า
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complet	e Part II-B.
<ul> <li>Section 501(c)(3) org</li> </ul>	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not co	mplete Part II-A.
If the organization ans	wered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Pa	art V, line 35c (Proxy
Tax) (see separate inst	ructions), then	

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of org	Janization			E	mpioyer	Identification	i number
	THE AME	RICAN RADIO RELAY	LEAGUE, INC		0	6-60000	04
Part I-A		janization is exempt under			' organi	zation.	
2 Politica	al expenditures	zation's direct and indirect political			►\$		
Part I-B	Complete if the org	anization is exempt under	section 501(c)(3)				
1 Enter th	he amount of any excise tax	incurred by the organization under	section 4955		▶\$		
2 Enter th	he amount of any excise tax	incurred by organization managers	s under section 4955		▶\$		
3 If the o	rganization incurred a sectio	n 4955 tax, did it file Form 4720 fo	r this year?			Yes	No No
<b>4a</b> Was a	correction made?					Yes	No No
)	" describe in Part IV.						
Part I-C	Complete if the org	anization is exempt under	section 501(c), e	xcept section 50	)1(c)(3).		
1 Enter th	he amount directly expended	d by the filing organization for secti	on 527 exempt functio	n activities	▶\$		
2 Enter th	he amount of the filing organ	ization's funds contributed to othe	r organizations for sect	ion 527			
exempt	t function activities				▶\$		
		. Add lines 1 and 2. Enter here and					
line 17	b				▶\$		
		1120-POL for this year?				Yes	No
5 Enter th	he names, addresses and en	nployer identification number (EIN)	of all section 527 politi	cal organizations to w	vhich the f	filing organiza	tion
made p	payments. For each organiza	tion listed, enter the amount paid f	rom the filing organizat	ion's funds. Also ente	er the amo	ount of politica	al
contrib	utions received that were pro	omptly and directly delivered to a s	eparate political organi	ization, such as a sep	arate seg	regated fund	or a
politica	I action committee (PAC). If	additional space is needed, provid	e information in Part IV				
	(a) Name	(b) Address	(c) FIN	(d) Amount paid fro	om (	Amount of	nolitical

<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Schedule C (Form 990 or 990-EZ) 2014 Part II-A Complete if the org section 501(h)).	THE Al anizatio	MERICAL n is exem	N RADIO RELA Npt under section	AY_LEAGUE, 501(c)(3) and file	ENC • 06-6 ed Form 5768 (ele	000004 Page 2 ection under
expenses, and shar	e of exces	s lobbying e	<b>e</b> 1 (		group member's name	e, address, EIN,
Limit	ts on Lobb	oying Exper			<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience publ	ic opinion (g	rass roots lobbying)		10,396.	
<b>b</b> Total lobbying expenditures to influ	ience a leg	islative bod	y (direct lobbying)		84,176.	
c Total lobbying expenditures (add lir	nes 1a and	l 1b)			94,572.	
d Other exempt purpose expenditure					13,916,246.	
e Total exempt purpose expenditures	•				14,010,818.	
f Lobbying nontaxable amount. Ente					850,541.	
If the amount on line 1e, column (a) of	r (b) is:		bying nontaxable amo	ount is:		
Not over \$500,000			he amount on line 1e.			
Over \$500,000 but not over \$1,000			0 plus 15% of the exce			
Over \$1,000,000 but not over \$1,50			0 plus 10% of the exce			
Over \$1,500,000 but not over \$17, Over \$17,000,000	000,000	\$225,00 \$1,000,0	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000		φ1,000,0				
g Grassroots nontaxable amount (en	ter 25% of	line 1f)			212,635.	
h Subtract line 1g from line 1a. If zero					0.	
i Subtract line 1f from line 1c. If zero					0.	
j If there is an amount other than zer	o on eithe	r line 1h or l	ine 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year?				[	Yes No
(Some organizations th		a section 50	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all o	of the five columns be	elow.
	Lobb	oying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2011	<b>(b)</b> 2012	(c) 2013	( <b>d)</b> 2014	(e) Total
2a Lobbying nontaxable amount	77:	1,107.	916,494.	800,865.	850,541.	3,339,007.
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>						5,008,511.
c Total lobbying expenditures	8	5,673.	86,152.	86,344.	94,572.	353,741.
d Grassroots nontaxable amount	192	2,777.	229,124.	200,216.	212,635.	834,752.
e Grassroots ceiling amount (150% of line 2d, column (e))						1,252,128.
f Grassroots lobbying expenditures				32.	10,396.	10,428.

Schedule C (Form 990 or 990-EZ) 2014

#### Schedule C (Form 990 or 990 EZ) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC. 06-600004 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	ı)	(b	)
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	5), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	'No," OR	(b) Part	III-A, line	e 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).				
а	Current year		<b>2</b> a		
b	Carryover from last year		<b>2</b> b		
С	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditure next year?		4		
_5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
Prov	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-	A, lines 1 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCI	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047
(Forn	n 990)	Complete if the org	anization answered "Yes" to Form 990,		2014
Departr	nent of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
	Revenue Service	Information about Schedule D (For	m 990) and its instructions is at <u>www.irs.gov/</u>		
Name	e of the organizati	on THE AMERICAN RADIO	RELAY LEAGUE, INC.	Emp	ployer identification number $06-600004$
Par	t I Organiza		d Funds or Other Similar Funds or A	cour	
	organizatio	on answered "Yes" to Form 990, Part IV, line	e 6.		
			(a) Donor advised funds	<b>(b)</b> Fun	ids and other accounts
1	Total number at er	nd of year			
2		of contributions to (during year)			
3		of grants from (during year)			
4		t end of year			
5			writing that the assets held in donor advised fun	ds	
	are the organizatio	on's property, subject to the organization's	exclusive legal control?		Yes 📃 No
6	Did the organizatio	on inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used c	only	
	for charitable purp	oses and not for the benefit of the donor of	r donor advisor, or for any other purpose confer	ring	
	impermissible priv				
Par	t II Conserv	ation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part IV,	line 7.	
1	Purpose(s) of cons	servation easements held by the organization	on (check all that apply).		
	Preservation	n of land for public use (e.g., recreation or e	ducation)	/ impor	tant land area
	Protection o	of natural habitat	Preservation of a certified h	istoric	structure
	Preservation	n of open space			
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form of a co	nserva	tion easement on the last
	day of the tax year	r.			
					Held at the End of the Tax Year
а	Total number of co	onservation easements		2a	
	•			2b	
			ucture included in (a)	<u>2c</u>	
d			after 8/17/06, and not on a historic structure		
				2d	
3		vation easements modified, transferred, rele	eased, extinguished, or terminated by the organ	ization	during the tax
	year ►				
4		where property subject to conservation eas			
5	•	tion have a written policy regarding the per			
~	,	forcement of the conservation easements it			
6			and enforcing conservation easements during the		
7	-		enforcing conservation easements during the ye e satisfy the requirements of section 170(h)(4)(B)		۵
8		1 ()		.,	Yes No
9			on easements in its revenue and expense staten		
5	-	•	tion's financial statements that describes the org		
	conservation ease	· · · · · · · · · · · · · · · · · · ·		anzan	
Par			Art, Historical Treasures, or Other S	Simila	r Assets.
		f the organization answered "Yes" to Form			
1a	If the organization	elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement ar	id balai	nce sheet works of art,
			nibition, education, or research in furtherance of		
		tnote to its financial statements that describ			· · · · · · · · · · · · · · · · · · ·
b			C 958), to report in its revenue statement and b	alance	sheet works of art, historical
	-		ducation, or research in furtherance of public ser		
	relating to these it		•	<i>·</i> •	2
	-				\$
					\$
2	. ,	, , , , , , , , , , , , , , , , , , , ,	asures, or other similar assets for financial gain,	provide	)
		unts required to be reported under SFAS 1			
а	-		· · · · ·		\$

b Assets included in Form 990, Part X

LHA	For	Paperwork	Reduction	Act Notice,	see the	Instructi	ons for F	orm 990.
432051								
10-01-1	4							

		RICAN RADIO				0	06-60			age <b>2</b>
Pai	t III Organizations Maintaining Co								,	
3	Using the organization's acquisition, accession	n, and other records	s, check any of the	following th	at are a si	gnificant	use of its c	ollection	items	
	(check all that apply):									
а	Public exhibition	d	Loan or exc	change prog	Irams					
b	Scholarly research	е	Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	how they further t	he organizat	ion's exe	mpt purp	ose in Part	XIII.		
5	During the year, did the organization solicit or							_		_
	to be sold to raise funds rather than to be ma							Yes		No
Pai	<b>t IV</b> Escrow and Custodial Arrang		ete if the organization	on answered	l "Yes" to	Form 99	0, Part IV, I	ine 9, or		
	reported an amount on Form 990, Parl									
1a	Is the organization an agent, trustee, custodia							٦.,		٦
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	ind complete the foll	owing table:							
								Amount		
	Beginning balance									
	Additions during the year									
-	Distributions during the year									
f	Ending balance Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.					IILY ?				] <b>NO</b>
Par						10				<u> </u>
		(a) Current year	(b) Prior year	(c) Two ye			years back	(e) Four	vears	hack
1a	Beginning of year balance	9,122,980.	6,677,041.		47,506.		745,132.		714,	
	Contributions	880,801.	1,586,149.		, 24,421.		, 394,849.			358.
	Net investment earnings, gains, and losses	442,728.	941,707.	1	, 69,395.		, 121,025.	, ,		698.
	Grants or scholarships	,			,		,			
	Other expenditures for facilities									
-	and programs	113,102.	81,917.		64,281.		13,500.		З,	390.
f	Administrative expenses									
g	End of year balance	10,333,407.	9,122,980.	6,6	77,041.	5,	247,506.	3,	745,	132.
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (a	)) held as:		· · · ·		· · · · ·		
а	Board designated or quasi-endowment	56.90	%	,,						
	Permanent endowment  38.90	%	_							
		<b>1.2</b> 0 %								
	The percentages in lines 2a, 2b, and 2c shoul	d equal 100%.								
3a	Are there endowment funds not in the posses	sion of the organiza	tion that are held a	nd administ	ered for th	ne organi	zation	_		
	by:								Yes	No
	(i) unrelated organizations							3a(i)		Х
	(ii) related organizations							3a(ii)		Х
b	If "Yes" to 3a(ii), are the related organizations	listed as required or	Schedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipme	ent.								
	Complete if the organization answered	"Yes" to Form 990,	Part IV, line 11a. S	ee Form 99	0, Part X,	line 10.				
	Description of property	(a) Cost or o		t or other	1	Accumula		<b>(d)</b> Bool	k value	а
		basis (investm	nent) basis	(other)	de	preciatio	n			
	Land					0.0.1				
	Buildings			4,693.		094,6				1.
	Leasehold improvements			31,159.		135,9		1,145		
d	Equipment			2,333.		<u>536,7</u>			5,62	
	Other			8,245.		985,8			2,3	
Tota	I. Add lines 1a through 1e. <i>(Column (d) must ec</i>	ual Form 990, Part 2	<u>X. column (B), line 1</u>	0c.)				1,603		
							Schedule	D (Form	1 990)	2014

Complete if the organization answered "Yes" t	to Form 990, Part IV,	line 11b. See Form 990, Pa	rt X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val	uation: Cost or end	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(G) (H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Complete if the organization answered "Yes" t				of your market you
(a) Description of investment	(b) Book value	(c) Method of Val	uation. Cost of end	of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" t	to Form 990, Part IV,	line 11d. See Form 990, Pa	rt X, line 15.	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990. Part X. col. (B) line	15)			
Part X Other Liabilities.			· · ·	
Complete if the organization answered "Yes" t	to Form 990, Part IV,	line 11e or 11f. See Form 9	90, Part X, line 25.	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) DEFERRED LIFE MEMBER DUES		7,053,882.		
(3) DEFERRED TERM MEMBER DUES		3,530,293.		
(4)		.,		
(5)				
(6)				
(7)				
(8)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	25) ►	10,584,175.		
		10 004 1/3 1		

THE AMERICAN RADIO RELAY LEAGUE, INC.

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

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Schedule D (Form 990) 2014

Part VII Investments - Other Securities.

_	edule D (Form 990) 2014 THE AMERICAN RADIO RELAY LI		-		6000004 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts With	n Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	16,490,701.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	151,943.		
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	1,813,618.		
е	Add lines 2a through 2d			2e	1,965,561.
3	Subtract line 2e from line 1			3	14,525,140.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines <b>4a</b> and <b>4b</b>			4c	0.
				5	14,525,140.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			•	
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per F	•	
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990. Part I. line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	ents Wi	th Expenses per F	•	n.
	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per F	•	
Pa	<b>rt XII</b> Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	ents Wi	th Expenses per F	Retur	n.
<b>Pa</b>	Reconciliation of Expenses per Audited Financial Stateme           Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.           Total expenses and losses per audited financial statements	ents Wi	th Expenses per F	Retur	n.
Pa 1 2	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents Wit	th Expenses per F	Retur	n.
Pa 1 2	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ents Wit	th Expenses per F	Retur	n.
<b>Pa</b> 1 2 a b	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a 2b 2c	th Expenses per F	Retur	n. 15,824,436.
<b>Pa</b> 1 2 a b	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	th Expenses per F	Retur	n. <u>15,824,436.</u> 1,813,618.
Pa 1 2 a b c d	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a 2b 2c 2d	th Expenses per F	1	n. 15,824,436.
Pa 1 2 b c d e	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	th Expenses per F	1 2e	n. 15,824,436. 1,813,618.
Pa 1 2 b c d 3	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d	th Expenses per F	1 2e	n. 15,824,436. 1,813,618.
Pa 1 2 a b c d e 3 4	<b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 4a	th Expenses per F	1 2e	n. 15,824,436. 1,813,618.
Pa 1 2 a b c d e 3 4 a b	<b>TXII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	th Expenses per F	1 2e	n. <u>15,824,436.</u> <u>1,813,618.</u> <u>14,010,818.</u> 0.
Pa           1           2           a           b           c           d           e           3           4           b           c           5	<b>TXII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	th Expenses per F	1 2e 3	n. <u>15,824,436.</u> <u>1,813,618.</u> <u>14,010,818.</u>

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

USE OF ENDOWNMENT FUNDS IS PRIMARILY FOR THE MAINTENANCE AND UP KEEP OF

W1AW AND FOR AWARDS TO DESERVING RADIO AMATEURS.

PART X, LINE 2:

THE LEAGUE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF

THE INTERNAL REVENUE CODE. HOWEVER, THE LEAGUE IS SUBJECT TO FEDERAL AND

STATE INCOME TAX AS A RESULT OF UNRELATED BUSINESS INCOME ARISING FROM NET

ADVERTISING INCOME. THERE ARE NO UNRELATED BUSINESS INCOME TAXES DUE FOR

THE YEAR ENDED DECEMBER 31, 2014.

 Schedule D (Form 990) 2014
 THE AMERICAN RADIO RELAY LEAGUE, INC.
 06-6000004 Page 5

 Part XIII
 Supplemental Information (continued)
 CLOSED AND MANAGEMENT CONTINUALLY EVALUATES EXPIRING STATUTES OF

 LIMITATIONS, AUDITS, PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW

 AUTHORITATIVE RULINGS.
 THE LEAGUE RECOGNIZES INTEREST AND PENALTIES

 ASSOCIATED WITH UNCERTAIN TAX POSITIONS AS PART OF THE INCOME TAX

 PROVISION AND INCLUDES ACCRUED INTEREST AND PENALTIES WITH THE RELATED TAX

 LIABILITY IN THE STATEMENTS OF FINANCIAL POSITION.
 THE LEAGUE HAS NO

 UNRECOGNIZED TAX POSITIONS AT DECEMBER 31, 2014.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD - INVENTORY

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD - INVENTORY

1,813,618.

1,813,618.

SCHEDULE I			irants and Oth					OMB No. 1545-0047
(Form 990)			vernments, an ete if the organizatio					2014
Department of the Treasury Internal Revenue Service		-	on about Schedule I	Attach to For	m 990.		n	Open to Public Inspection
Name of the organizat			RELAY LEAG				<i>.</i>	Employer identification number $06-6000004$
Part I General Ir	nformation on Grants a							
criteria used to a	zation maintain records t award the grants or assis	stance?		· · · · · · · · · · · · · · · · · · ·		•		
	IV the organization's pro							N/ line O1 fer env
	nd Other Assistance to I hat received more than \$	-				anization answered "Y	es" to Form 990, Part	IV, line 21, for any
1 (a) Name and ac	ddress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	per of section 501(c)(3) and the section 501(c)(3) and the section of the section		·	e line 1 table			•	·
	Reduction Act Notice,							Schedule I (Form 990) (2014)

#### Schedule I (Form 990) (2014)

06-600004

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EDUCATION GRANTS	3	0.	2,936.	FAIR MARKET VALUE	RADIO EQUIPMENT
LEGAL FUND	5	4,960.	0.		
COLVIN AWARD	3	6,500.	0.		
Part IV Supplemental Information. Provide the information	equired in Part I, lir	ie 2, Part III, column	(b), and any other a	dditional information.	
FORM 990, SCHEDULE 1, PART IV					
EDUCATION GRANTS: APPLICATIONS A	RE RANKED	BASED ON S	PECIFIC CR	ITERIA	
INCLUDING: EVIDENCE OF A WELL THO	UGHT OUT E	LAN, COMMI	TMENT FROM	I SCHOOL	

ADMINISTRATION, AVAILABILITY OF A SUPPORTING AMATEUR RADIO CLUB, AND

THE TEACHER HAVING ATTENDED OR WILLING TO ATTEND AN ARRL TEACHERS

INSTITUTE CLASS. ARRL PURCHASES ALL THE EQUIPMENT DIRECTLY FOR THE

GRANTEE. NO CASH IS PROVIDED TO THE RECIPIENT.

#### LEGAL FUND: ARRL WILL FINANCIALLY ASSIST LEGAL CASES PERTAINING TO

 Schedule I (Form 990)
 THE AMERICAN RADIO RELAY LEAGUE, INC.
 06-6000004 Page 2

 Part IV
 Supplemental Information

 AMATEUR RADIO THAT MAY HAVE A SIGNIFICANT IMPACT ON THE WAY AMATEUR

 RADIO OPERATES.
 ALL ATTORNEY BILLS ARE PAID DIRECTLY AND NO CASH IS

COLVIN AWARD: APPLICANTS ARE RANKED BASED ON ABILITY TO SHOW AN ALL

INCLUSIVE PLAN, INCLUDING REASONABLE EXPENSES AND REVENUE SOURCES.

PRIORITY IS GIVEN TO MULTI-NATIONAL GROUPS AND APPLICATIONS SHOWING THE

GREATEST ENHANCEMENTS TO THE CONDITION OF AMATEUR RADIO IN THE PROPOSED

LOCATION. EXPENSES FOR ANNUAL DX EXPEDITIONS FAR EXCEED ANY GRANT FUNDS

GIVEN TO THE RECIPIENT.

PROVIDED TO THE GRANT RECIPIENT.

SC	HEDULE J Compensation Information							
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		00	4 /			
•		Compensated Employees		20	14	ŀ		
-		Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic		
	tment of the Treasury al Revenue Service	Information about Schedule J (Form 990) and its instructions is at www.irs.gov/for	rm990.	Inspe				
Nam	e of the organization	•		identificatio	on nui	nber		
		THE AMERICAN RADIO RELAY LEAGUE, INC.	06-6	500000	4			
Pa	rt I Question	s Regarding Compensation						
					Yes	No		
1a	Check the appropri	ate box(es) if the organization provided any of the following to or for a person listed in Form S	<del>)</del> 90,					
	Part VII, Section A,	ine 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or c	harter travel Housing allowance or residence for perso	nal use					
	Travel for com	panions Payments for business use of personal re-	sidence					
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	3					
	Discretionary s	pending account Personal services (e.g., maid, chauffeur, c	hef)					
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or p	rovision of all of the expenses described above? If "No," complete Part III to explain		1b				
2	Did the organization	require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and office	s, including the CEO/Executive Director, regarding the items checked in line 1a?		2				
3	Indicate which, if an	y, of the following the filing organization used to establish the compensation of the organiza	tion's					
	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for methods used by a related organization	on to					
		tion of the CEO/Executive Director, but explain in Part III.						
	X Compensation	committee Written employment contract						
	Independent o	ompensation consultant Compensation survey or study						
	Form 990 of o	her organizations X Approval by the board or compensation c	ommittee					
4	During the year, dic	any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing						
	organization or a re	-						
а		e payment or change-of-control payment?				X		
b		ceive payment from, a supplemental nonqualified retirement plan?				X		
С	-	ceive payment from, an equity-based compensation arrangement?		4c		X		
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
-		)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1					
	contingent on the r			-		v		
						X X		
b		ation?		<u>5b</u>				
•		5b, describe in Part III.						
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1					
-	contingent on the n	-		6.		x		
						X		
D		ation?		<u>6b</u>				
7		6b, describe in Part III.						
1		n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		-		x		
0		es 5 and 6? If "Yes," describe in Part III		7				
8		reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		0		x		
0				8				
9		d the organization also follow the rebuttable presumption procedure described in		9				
	Regulations section	53.4958-6(c)? eduction Act Notice, see the Instructions for Form 990.		ule J (Forn	. 000	2014		
цпΑ			Sched	aule o (FOM	1 330)	2014		

Schedule J (Form 990) 2014

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

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

		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title	-	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
(1) MR. BARRY SHELLEY	(i)	146,630.	0.	871.	8,798.	705.	157,004.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MR. DAVID SUMNER	(i)	174,217.	0.	823.	10,734.	15,778.		0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) MR. BRENNAN PRICE	(i)	134,597.	0.	132.	8,408.	6,984.	150,121.	0.
СТО	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MR. HAROLD KRAMER	(i)	144,717.	0.	823.	8,683.	579.	154,802.	0.
<u>coo</u>	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(ii)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### 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.

Schedule J (Form 990) 2014

(Fo	rm 990)						20	1/	1
		Complete if the organic	anizations a	answered "Yes" o	n Form 990, Part IV, lines 29	) or 30.	20	14	ł
	ment of the Treasury I Revenue Service	Attach to Form 990.		(Farme 000) and its		<i>(</i> , , , , , , , , , , , , , , , , , , ,	Open To Inspe		ic
Nam	e of the organizatior			(Form 990) and its	s instructions is at <u>www.irs.</u>	<u>gov/form990.</u> Employer	identificatio		mber
	· · · · · · · · · · · · · · · · · ·	THE AMERICAN	RADTO	RELAY LEA	AGUE, INC.		6-6000		
Pa	tl Types of	Property	1412 10		1002/ 11:00		0000		
			(a)	(b)	(c)		(d)		
			Check if applicable	Number of contributions or items contributed	Noncash contribution amounts reported on Form 990, Part VIII, line 1g		d of determin ontribution ar	•	s
1	Art - Works of art								
2	Art - Historical trea	sures							
3	Art - Fractional inte	erests							
4	Books and publica	tions							
5	Clothing and hous	ehold goods							
6	Cars and other veh	nicles							
7	Boats and planes								
8	Intellectual propert	ty							
9	Securities - Publicl	y traded	X	4	282,165.				
10	Securities - Closely	/ held stock							
11	Securities - Partne	rship, LLC, or							
	trust interests								
12	Securities - Miscell	laneous							
13	Qualified conserva	tion contribution -							
	Historic structures								
14	Qualified conserva	tion contribution - Other							
15	Real estate - Resid	lential							
16	Real estate - Comr	nercial							
17	Real estate - Other								
18	Collectibles								
19									
20		l supplies							
21	Taxidermy								
22									
23	Scientific specime	ns							
24		acts							
25		)							
26	Other 🕨 (	)							
27	Other 🕨 (	)							
28	Other 🕨 (	)							
29	Number of Forms	8283 received by the organiz	zation during	g the tax year for co	ontributions				
	for which the orga	nization completed Form 828	83, Part IV, I	Donee Acknowledg	jement 29				
								Yes	No
30a	During the year, di	d the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	n 28, that it			
	must hold for at lea	ast three years from the date	e of the initia	l contribution, and	which is not required to be u	sed for			
	exempt purposes f	for the entire holding period?	?				30a		X
b	If "Yes," describe t	the arrangement in Part II.							
31	Does the organizat	tion have a gift acceptance p	oolicy that re	equires the review o	of any non-standard contribut	ions?	31	Х	
32a	Does the organizat	tion hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				1
	contributions?						32a	Х	
b	If "Yes," describe i	n Part II.							
33	If the organization	did not report an amount in	column (c) f	or a type of proper	ty for which column (a) is che	cked,			
	describe in Part II.								

**Noncash Contributions** 

LHA	For Denewyork Deduction Act Nation, and the Instructions for Form 000
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2014)

OMB No. 1545-0047

SCHEDULE M

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

#### SCHEDULE M, LINE 32B:

#### THE LEAGUE MAINTAINS ACCOUNTS WITH A FINANCIAL INSTITUTION WHICH IS

USED TO LIQUIDATE DONATED SECURITIES.

OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 14 Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) / Form 990 or 990-EZ or to provide any additional information. Open to Public Attach to Form 990 or 990-EZ. Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service Employer identification number Name of the organization THE AMERICAN RADIO RELAY LEAGUE, INC. 06-6000004 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EMERGENCIES; THE FURTHERANCE OF PUBLIC WELFARE; THE ADVANCEMENT OF THE RADIO ART; THE FOSTERING AND PROMOTION OF NON-COMMERCIAL INTERCOMMUNICATION BY ELECTRONIC MEANS THROUGHOUT THE WORLD; THE FOSTERING OF EDUCATION IN THE FIELD OF ELECTRONIC COMMUNICATION; THE PROMOTION AND CONDUCT OF RESEARCH AND DEVELOPMENT TO FURTHER THE DEVELOPMENT OF ELECTRONIC COMMUNICATION; THE DISSEMINATION OF TECHNICAL, EDUCATIONAL AND SCIENTIFIC INFORMATION RELATING TO ELECTRONIC COMMUNICATION; AND THE PRINTING AND PUBLISHING OF DOCUMENTS, BOOKS, MAGAZINES, NEWSPAPERS AND PAMPHLETS NECESSARY OR INCIDENTAL TO ANY OF THE ABOVE PURPOSES. FORM 990, PART VI, SECTION A, LINE 6: FULL MEMBERS ARE RESIDENTS OF THE UNITED STATES WHO HOLD AN UNEXPIRED AMATEUR RADIO OPERATOR'S LICENSE WHO HAVE SUBMITTED A MEMBERSHIP APPLICATION AND PAID THE ANNUAL MEMBERSHIP DUES. OTHER NON-FULL MEMBERS ARE THOSE WHO HOLD A VALID LICENSE BUT ARE NOT RESIDENTS OF THE U.S. OR ARE RESIDENTS BUT DO NOT YET HOLD A VALID LICENSE. FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION IS GOVERNED BY A BOARD OF DIRECTORS CONSISTING OF 15 DIRECTORS, EACH REPRESENTING A TERRITORIAL DIVISION REPRESENTING A

GEOGRAPHICAL AREA AS DEFINED IN THE BY LAWS. THE DIRECTORS ARE ELECTED TO

TERMS OF 3 YEARS BY THE FULL MEMBERS ELIGIBLE TO VOTE IN EACH TERRITORIAL

DIVISION. TO BE ELIGIBLE AS A FULL MEMBER, AN APPLICANT MUST BE A RESIDENT

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization THE AMERICAN RADIO RELAY LEAGUE, INC.	Employer identification number $06-6000004$
A UNITED STATES CITIZEN TEMPORARILY RESIDING ELSEWHERE, AN	D THE HOLDER OF
AN UNEXPIRED AMATEUR RADIO OPERATOR'S LICENSE OR RECIPROCA	L OPERATING
AUTHORIZATION ISSUED BY THE UNITED STATES. IN ORDER TO BE	ELIGIBLE FOR
ELECTION, A DIRECTOR MUST HAVE BEEN A FULL MEMBER FOR AT L	EAST FOUR
CONTINUOUS YEARS IMMEDIATELY PRECEDING NOMINATION AND THRO	UGHOUT THE
SUBSEQUENT TERM OF OFFICE.	

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

THE FORM 990 IS PREPARED WITH THE ASSISTANCE OF INDEPENDENT ACCOUNTANTS AND, BEFORE FILING, IS RECONCILED TO THE ORGANIZATION'S BOOKS AND RECORDS AND REVIEWED AND APPROVED BY BOTH THE CONTROLLER AND CHIEF FINANCIAL OFFICER OF THE ORGANIZATION. ALSO, PRIOR TO FILING WITH THE IRS, AN ELECTRONIC COPY IS PROVIDED TO MEMBERS OF THE BOARD OF DIRECTORS.

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

WHEN REQUESTED BY THE ETHICS AND ELECTIONS COMMITTEE AND NOT LESS FREQUENTLY THAN ONCE A YEAR, EACH BOARD MEMBER SHALL PROMPTLY SUBMIT A STATEMENT TO THE COMMITTEE IDENTIFYING ALL BUSINESS AND OTHER AFFILIATIONS IN WHICH THE BOARD MEMBER HAS A FINANCIAL INTEREST AS DEFINED IN THE ORGANIZATION'S BY LAWS. IN ADDITION, A BOARD MEMBER SHALL PROMPTLY DISCLOSE TO THE ETHICS AND ELECTIONS COMMITTEE ANY MATTER THAT COULD REASONABLY BE CONSIDERED TO BE A "FINANCIAL BENEFIT" TO SUCH BOARD MEMBER, WHETHER OR NOT THE BOARD MEMBER BELIEVES A CONFLICT EXISTS. AFTER DISCLOSURE OF THE POTENTIAL CONFLICT OF INTEREST, THE DISINTERESTED MEMBERS OF THE ETHICS AND ELECTIONS COMMITTEE SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS OR CONTINUING AND PERVASIVE CONFLICT OF INTEREST EXISTS. NEITHER THE BOARD NOR ANY COMMITTEE OF THE BOARD SHALL VOTE UPON ANY PROPOSED MATTER, TRANSACTION, CONTRACT, OR ARRANGEMENT IN CONNECTION WITH 432212 08-27-14 Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page <b>2</b>
Name of the organization	Employer identification number
THE AMERICAN RADIO RELAY LEAGUE, INC.	06-6000004
WHICH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST HAS BEEN	DISCLOSED BY A
BOARD MEMBER UNTIL SUCH TIME AS THE ETHICS AND ELECTIONS C	OMMITTEE HAS
ADDRESSED THE ACTUAL OR POSSIBLE CONFLICT OF INTEREST.	
ALSO, EACH BOARD MEMBER SHALL ANNUALLY SIGN A STATEMENT WH	ICH AFFIRMS THAT
SUCH PERSON:	
(I) HAS RECEIVED A COPY OF THE CURRENT CONFLICT OF INTERES	T POLICY;
(II) HAS READ AND UNDERSTANDS THE POLICY;	
(III) HAS AGREED TO COMPLY WITH THE POLICY; AND	
(IV) UNDERSTANDS THAT THE ASSOCIATION IS A NON-PROFIT ORGA	NIZATION AND THAT
IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENG	AGE PRIMARILY IN
ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT	PURPOSES.
FORM 990, PART VI, SECTION B, LINE 15:	

A) THE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER IS DETERMINED BY THE BOARD OF DIRECTORS BASED ON A RECOMMENDATION OF THE ADMINISTRATION AND FINANCE COMMITTEE. THE A&F COMMITTEE'S RECOMMENDATION IS BASED ON THE PERFORMANCE OF THE INCUMBENT IN COMPARISON TO A SET OF GOALS AND OBJECTIVES FOR THE ORGANIZATION AND THE INDIVIDUAL.

B) THE INITIAL BASE COMPENSATION OF THE OTHER STAFF OFFICERS IS DETERMINED BY THE CHIEF EXECUTIVE OFFICER PARTIALLY ON INFORMATION OF COMPARABLE ORGANIZATIONS AND THE ANNUAL ADJUSTMENT, IF ANY, IS BASED ON THE INDIVIDUAL PERFORMANCE OF THE OFFICER.

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

THE ORGANIZATION'S BY LAWS, ARTICLES OF ASSOCIATION AND FINANCIAL

STATEMENTS ARE ALL POSTED ON THE ARRL WEB SITE. THE CONFLICT OF INTEREST

POLICY IS INCLUDED IN THE BY LAWS.

SCHE	D	U	LE	R

#### (Form 990)

#### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number 06-600004

Department of the Treasury Internal Revenue Service

## Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

#### THE AMERICAN RADIO RELAY LEAGUE, INC.

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
	-				
	-				

## Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section	<b>(f)</b> Direct controlling entity		<b>g)</b> 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
THE ARRL FOUNDATION, INC 23-7325472	TO OPERATE FOR CHARITABLE,						
225 MAIN STREET	EDUCATIONAL AND SCIENTIFIC						
NEWINGTON, CT 06111-1400	PURPOSES	CONNECTICUT	501(C)3	11	N/A		Х
	-						

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

#### Schedule R (Form 990) 2014 THE AMERICAN RADIO RELAY LEAGUE, INC.

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Part III

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

	(a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k)										(1.)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(		(i)		
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income	Share of total income	Share of end-of-year		ortionate	Code V-UBI	Genera	
or related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	led from tax under		allocations?		20 of Schedule	partn	ownership
		country)		sections 512-514)		assets	Yes	No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Yes	10
	1										
	-										
	-										
	-										
	1										
	1										
	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(t contr ent	(i) ction (b)(13) trolled tity?
		country)				400010		Yes	No
								<sup> </sup>	<u> </u>
									<u> </u>
								1 '	

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х	
	Gift, grant, or capital contribution to related organization(s)	1b		X	
	Gift, grant, or capital contribution from related organization(s)	1c		X	
	Loans or loan guarantees to or for related organization(s)	1d		X	
	Loans or loan guarantees by related organization(s)	1e		X	
f	Dividends from related organization(s)	1f		X	
g	Sale of assets to related organization(s)	1g		X	
	Purchase of assets from related organization(s)	1h		X	
	Exchange of assets with related organization(s)	1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X	
ο	Sharing of paid employees with related organization(s)	10		X	
р	Reimbursement paid to related organization(s) for expenses	1p		X	
q	Reimbursement paid by related organization(s) for expenses	1q	X		
r	Other transfer of cash or property to related organization(s)	1r		X	
S	Other transfer of cash or property from related organization(s)	1s		X	

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

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1)			
<u>(2)</u>			
(3)			
(4)			
(5)			
<u>(6)</u>			

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners s 501(c)(3 orgs.? Yes N	<b>(g)</b> Share of end-of-year assets	(r Dispro tion allocat Yes	) opor- ate ions? <b>No</b>	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managin partner? Yes No	(k) Percentage ownership

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### Part VII | Supplemental Information

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