Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

For the 2018 calendar year, or tax year beginning , 2018, and ending Oct 1 30 . 20 1 9 C Name of organization National Association of Veterans' Research and Education Foundations D Employer identification number В Check if applicable: Address change Doing business as 52-1784596 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 900 1717 K ST NW (301)656-5005Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Washington, DC 20006 G Gross receipts \$ 678,859. Amended return F Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? Yes No Richard Starrs, 1717 K ST NW Suite 900, Washington, DC 20006 H(b) Are all subordinates included? Yes No If "No," attach a list. (see instructions)) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 **×** 501(c)(3) ___ 501(c) (Tax-exempt status: Website: ▶ www.navref.org **H(c)** Group exemption number ▶ Form of organization: X Corporation Trust Association 1992 M State of legal domicile: DC L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: NAVREF's mission is to advance the success 1 of the VA-affiliated nonprofit research and education corporations. Activities & Governance 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 12 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 3 6 0 Total unrelated business revenue from Part VIII. column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, line 38 7b 0. **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 131,462. 39,382. Revenue 9 Program service revenue (Part VIII, line 2g) 696,491. 614,603. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 19,248. 24,874. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 847,201 678,859 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 466,776 462,977. 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 26,299. b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 305,921. 293,489. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 772,697. 756,466. 19 Revenue less expenses. Subtract line 18 from line 12 74,504. -77,607. **Beginning of Current Year** End of Year Assets or Balances 20 Total assets (Part X, line 16) 1,724,504. 1,605,378. 21 Total liabilities (Part X, line 26) . 508,085. 421,876. 22 Net assets or fund balances. Subtract line 21 from line 20 1,216,419. 1,183,502. Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 04/16/2020 Sign Signature of officer Here Richard Starrs, Chief Executive Officer Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN **Paid** Check if self-employed P01019482 Javier Goldin **Preparer** Firm's EIN ▶ 26-4694278 Firm's name ► GOLDIN GROUP LLC **Use Only** Firm's address ▶ 4641 MONTGOMERY AVE STE 515, BETHESDA, MD 20814-3435 Phone no. (301)913-0008 May the IRS discuss this return with the preparer shown above? (see instructions) Yes X No

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Part	·
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	NAVREF's mission is to advance the success
	of the VA-affiliated nonprofit research and education corporations.
	NAVREF envision a nation in which veterans receive the finest care based on
	innovative research & education
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$240 , 168 . including grants of \$0 .) (Revenue \$30 , 000 .)
	Program Development: In 2018, in collaboration with VA Office of Research & Development, NAVREF initiated the Access to
	Clinical Trials for Veterans (ACT for Veterans) program. This is a multiyear effort designed to provide Veterans with greater
	access to industry sponsored clinical trials and make VA a partner of choice for industry sponsored trials. Given that VA
	serves over 9 million veterans, it is imperative that those veterans be afforded the opportunity to receive the latest
	innovative treatments without leaving the healthcare system. By engaging multiple stakeholders from VA, pharma, and patient
	advocacy groups, ACT has been able to identify barriers and propose new procedures to streamline operations. This initiative
	is largely possible due to financial support from outside donors who recognize the importance of clinical trials to the
	healthcare of veterans. NAVREF has been actively involved, not only through staff participation, but also by seeking the
	financial support needed to hire the ACT for Veterans Program Coordinator, and to bring stakeholders together for two
	face-to-face meetings. One of the most significant products of the initiative has been the joint establishment with VA of the Partnered
	See Part III, Ln 4a statement
4b	(Code:) (Expenses \$ 238,524. including grants of \$ 0.) (Revenue \$ 147,400.)
	Education: Education is a critical component of NAVREF's vision, mission and values. NAVREF offers a variety of educational
	opportunities to its members. These include: (1) training workshops- typically 2 day events focused on topics of interest,
	(2) "NPC Essentials"- an annual workshop designed to introduce new executive directors and senior staff to their new roles and
	responsibilities, key functions of the NPCs, and the relationship between the NPCs and VA, (3) a monthly webinar
	series - a member-driven program that delivers 1.5 hours of educational contact each month in order to address NPC-related
	topics and present services to members. In addition, NAVREF offers members a free Best Practice Consultation service which
	involves an intense preparatory review of bylaws, strategy, policies, procedures, and finances followed by a site visit to
	discuss specific issues and solutions with the NPC's executives and board of directors. The centerpiece of NAVREF's educational
	program is our annual conference. The 3-day event averages 125 attendees from member organizations and focuses on the most
	relevant topics related to administration, governance, financial management, human resources, and revenue development. Plenary
	See Part III, Ln 4b statement
4c	(Code:) (Expenses \$ 88,593. including grants of \$ 0.) (Revenue \$ 464,103.)
	Member Communications & Services: NAVREF ensures the success of its members by providing both direct and indirect services.
	Members are encouraged to reach out to NAVREF staff by phone or email for technical assistance and support. Information is also
	disseminated to members via the organization's website, email, and the bi-monthly newsletter produced by staff. This newsletter
	contains articles, updates, columns, and reminders keeping all members up-to-date on current activities within the non-profit
	sector, the clinical research industry, and the veteran research community. Over its 28-year history, NAVREF has developed
	contacts with numerous experts in NPC governance, finances, human resources, grants management, advocacy, and research
	administration. Many of these experts make themselves available to NAVREF and its' members to address emerging issues. NAVREF
	also provides members with a popular web-based "Member Forum" which allows members to pose questions to other members and NPC staff.
	In keeping with its vision, NAVREF provides a clinical trial matchmaking service which connects member
	organizations with clinical research opportunities for veterans. NAVREF staff actively pursue relationships with pharmaceutical
	See Part III, Ln 4c statement
<i>A</i> ~I	Other program convices (Describe in Schedule C.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 61,603. including grants of \$ 0.) (Revenue \$ 3,100.)
40	(Expenses \$ 61,603. including grants of \$ 0.) (Revenue \$ 3,100.) Total program service expenses ▶ 628.888.
70	TOTAL DIOUIGITI 301 VIDE EADERISES F UZO,000.

Checklist of Required Schedules Part IV No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," × 1 2 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . × 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 × Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 4 X 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 X Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 × 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 9 X 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . 10 × If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a X Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b X c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII × d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets × Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e × Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f × 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional × Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 × b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 14b × 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 × 20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 1? I&E'()(6800)(160000)ete Schedule I, Parts I and II

X

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete Schedule J</i>	23	×	
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		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		×
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		×
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? <i>If "Yes," complete Schedule L, Part II</i>	26		×
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		×
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		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		×
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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		×
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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
•	or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
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? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
_	Entantha number reported in Day 0 of Farm 1000 Fator 0 if not and 1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	-		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	reportable gaming (gambling) winnings to prize winners?	1c	×	
_				

Part \	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	3		Yes	No
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 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
	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		×
	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		×
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		×
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
-	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
	If "Yes," indicate the number of Forms 8282 filed during the year			. ,
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
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		
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:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			

Part VI

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C								
	Check if Schedule O contains a response or note to any line in this Part VI				×				
Secti	on A. Governing Body and Management								
		_		Yes	No				
1a		12							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar								
	committee, explain in Schedule O.								
b	b Enter the number of voting members included in line 1a, above, who are independent . 1b 12								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	h							
	any other officer, director, trustee, or key employee?		2		×				
3	Did the organization delegate control over management duties customarily performed by or under the direct	ct							
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	L	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	-	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	-	5		X				
6	Did the organization have members or stockholders?	-	6	×					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoir one or more members of the governing body?		7a	×					
b	3								
8	stockholders, or persons other than the governing body?	_	7b	×					
	the year by the following:		8a	×					
a	0 0 ,								
b	Each committee with authority to act on behalf of the governing body?	-	8b	×					
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								
the organization's mailing address? If "Yes," provide the names and addresses in Schedule O									
				Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	1	0a		×				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters		0b						
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•	1a	×					
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	1	2a	×					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts	_	2b	×					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	,"							
40	describe in Schedule O how this was done		2c	×					
13	Did the organization have a written whistleblower policy?	_	13 14	×					
14 15	Did the organization have a written document retention and destruction policy?	у	14	×					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		-						
a	The organization's CEO, Executive Director, or top management official		5a	×					
b	Other officers or key employees of the organization	<u> </u>	5b		<u>×</u>				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nt							
_	with a taxable entity during the year?		6a		×				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate it participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the								
	organization's exempt status with respect to such arrangements?	1	6b						
	on C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ DC								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 99 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Inother's website X Upon request Check Chec	U-I (Sect	tion 5	01(c)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of financial statements available to the public during the tax year.	intere	est p	oolicy	, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and Richard Starrs, 1717 K ST NW Ste 900, Washington, DC 20006 (301)656-5005	reco	rds l	•					

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

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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 employees."
- 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.

Check this box if fletther the organization he		u 0.g	<u> </u>		C)	ompo	71100			, 61 11 40 100 1
(A) Name and Title	(B) Average hours per week (list any	box, office	unles er and	eck s pe d a d	rson	e than o is both or/trust	n an tee)		(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Paul Russo	2.00									
Director		×						0.	0.	0.
(2) Shelley Cobb Treasurer	3.00	×		×				0.	0.	0.
(3) Ronald Hakes Vice Chair	3.00	×		×				0.	0.	0.
(4) Mary Sano Director	2.00	×						0.	0.	0.
(5) Scott Gruber Director	2.00	×						0.	0.	0.
(6) Roberta Rusconi Chair	5.00	×		×				0.	0.	0.
(7) Kelsie Page Director	2.00	×						0.	0.	0.
(8) Robert Forrester Director	2.00	×						0.	0.	0.
(9) Jeffrey Moore Director	2.00	×						0.	0.	0.
(10)Cindy Reutzel Director	2.00	×						0.	0.	0.
(11) Danielle Fleumer Director	2.00	×						0.	0.	0.
(12) Richard Starrs Chief Executive Director	40.00			×				201,250.	0.	16,794.
(13) Brown McCallum Director	2.00	×						0.	0.	0.
(14)										

REV 05/20/19 PRO

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title		(C) Position (do not check more than of box, unless person is both officer and a director/trust					n an	(D) Reportable compensation	(E) Reportable compensation from			
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC	or a	other inpensation from the ganization d relater ganization	on d
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b c	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)					 		> > >	201,250.	0			794. 794.
2	Total number of individuals (including but reportable compensation from the organi	t not limited				ed						10,	794.
3	Did the organization list any former of employee on line 1a? If "Yes," completes	ficer, direc				ee,	key e					Yes	No X
4	For any individual listed on line 1a, is the organization and related organizations individual	greater that	an \$1	50,	000	? /:	"Ye	s, "	complete Sch	edule J for s	uch	×	
5	Did any person listed on line 1a receive of for services rendered to the organization												×
Section	on B. Independent Contractors								-		'		
1	Complete this table for your five highest compensation from the organization. Repyear.												tax
	(A) Name and business add	lress							(B) Description of s	ervices		C) ensation	
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who			

Part VIII	Statement of Revenue
-----------	----------------------

		Check if Schedule O contains a res	ponse or note to	any line in this	Part VIII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ıts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
s, G	С	Fundraising events 1c					
ar /	d	Related organizations 1d					
s, G	е	Government grants (contributions) 1e					
ion r Si	f	All other contributions, gifts, grants,					
but the		and similar amounts not included above 1f	39,382.				
ntri d O	g	Noncash contributions included in lines 1a–1f: \$	•				
Co	h	Total. Add lines 1a-1f	•	39,382.			
ıue			Business Code				
ven	2a	Membership Dues	541990	464,103.	464,103.	0.	0.
, Re	b	Conference and Workshops	541990	147,400.	147,400.	0.	0.
Zi Zi	С	FOVA	541990	3,100.	3,100.	0.	0.
Ser	d						
am	е						
Program Service Revenue	f	All other program service revenue.					
<u> </u>	g	Total. Add lines 2a–2f		614,603.			
	3	Investment income (including divid and other similar amounts)		04.054			0.4.05.4
	4	,		24,874.	0.	0.	24,874.
	4 5	Income from investment of tax-exempt be	•				
	5	Royalties	(ii) Personal				
	6a	Gross rents	(,,				
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory					
	b	Less: cost or other basis					
		and sales expenses .					
	С	Gain or (loss)					
	d	Net gain or (loss)	▶				
nne	8a	Gross income from fundraising events (not including \$					
Other Revenu		of contributions reported on line 1c).					
erl		See Part IV, line 18 a					
Sth	b	Less: direct expenses b					
		Net income or (loss) from fundraising	events . >				
	9a	Gross income from gaming activities. See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming acti	ivities ►				
	10a	Gross sales of inventory, less					
	_	returns and allowances a					
		Less: cost of goods sold b					
	С	Net income or (loss) from sales of inve	1				
	11a	Miscellaneous Revenue	Business Code				
	i ia b						
	C						
	d	All other revenue					
	e	Total. Add lines 11a–11d	▶				
	12	Total revenue. See instructions .	•	678,859.	614,603.	0.	24,874.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses **(D)** Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV. line 21 . . . Grants and other assistance to domestic 2 individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV. lines 15 and 16 . . . Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 202,950. 174,424. 22,617. 5,909. Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages 21,760. 195,256. 167,811. 5,685. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 25,165. 3,263. 29,281. 853. Other employee benefits 9,308. 1,037. 9 8,000. 271. 10 Payroll taxes 26,182. 22,502. 2,918. 762. 11 Fees for services (non-employees): Management Legal Accounting 34,414. 0. 34,414. 0. Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 0. 51,490. 39,410. 12,080. 12 Advertising and promotion 13 11,710. 11,267. 318. 125. Office expenses 14 Information technology 15 Occupancy 10,854. 7,265. 3,345. 244. 16 2,417. 2,417. 17 0. 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 126,814. 119,229. 7,498. 87. 20 21 Payments to affiliates 1,091. 938. 121. 32. 22 Depreciation, depletion, and amortization . 23 6,946. 6,077. 718. 151. Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Other/Miscellaneous 3,096. 50. 35,389. 32,243. Bank service charge 0. 0. 0. 0. C Memberships 12,364. 12,140. 174. 50. d All other expenses **Total functional expenses.** Add lines 1 through 24e 25 756,466. 628,888. 101,279. 26,299. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) if

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Part X Balance Sheet

P	art X						
		Check if Schedule O contains a response or	r note	to any line in this Par	tX	<u></u>	<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			593,850.	1	421,151.
	2	Savings and temporary cash investments	1,083,947.	2	1,153,301.		
	3	Pledges and grants receivable, net	26,345.	3	8,702.		
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and					
		trustees, key employees, and highest co	ompen	sated employees.			
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified pers	sons (as	s defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), ar					
		sponsoring organizations of section 501(c)(9) volun	ntary e	mployees' beneficiary			
ts		organizations (see instructions). Complete Part II of Sche	edule L			6	
Assets	7	Notes and loans receivable, net				7	
Ř	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			15,602.	9	19,054.
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	47,164.	3,762.	10c	2,671.
	11	Investments—publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11 .			12	
	13	Investments-program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			998.	15	499.
	16	Total assets. Add lines 1 through 15 (must equa			1,724,504.	16	1,605,378.
	17	Accounts payable and accrued expenses	192,042.	17	139,336.		
	18	Grants payable				18	
	19	Deferred revenue			316,043.	19	282,540.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D .		21	
es	22	Loans and other payables to current and for					
≣		trustees, key employees, highest compen					
Liabilities		disqualified persons. Complete Part II of Schedu	ıle L			22	
	23	Secured mortgages and notes payable to unrela		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrelated		· –		24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines	s 17–2	4). Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			508,085.	26	421,876.
Ses		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 and		CK here ► 🗵 and			
anc	27	Unrestricted net assets			1,133,510.	27	1,183,502.
Bal	28	Temporarily restricted net assets		-	82,909.	28	
l br	29	Permanently restricted net assets				29	
Fund Balances		Organizations that do not follow SFAS 117 (ASC 9					
Net Assets or		complete lines 30 through 34.		J			
ets	30	Capital stock or trust principal, or current funds		-		30	
SS	31	Paid-in or capital surplus, or land, building, or ed		-		31	
it A	32	Retained earnings, endowment, accumulated in				32	
Se	33	Total net assets or fund balances		-	1,216,419.	33	1,183,502.
	34	Total liabilities and net assets/fund balances .			1,724,504.	34	1,605,378.

Form **990** (2018)

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Part	XI Reconciliation of Net Assets			-					
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	(578,8	359.				
2	Total expenses (must equal Part IX, column (A), line 25)	2		756,4	166.				
3	Revenue less expenses. Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,2	216,4	19.				
5	5 Net unrealized gains (losses) on investments								
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9							
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
	33, column (B))	10	1,1	L83,5	02.				
Part	XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	olain i	n						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	×					
	If "Yes," check a box below to indicate whether the financial statements for the year were compared to the statement of the s								
	reviewed on a separate basis, consolidated basis, or both:	onou c	"						
	▼ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		. 2b	×					
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a						
	separate basis, consolidated basis, or both:								
	▼ Separate basis □ Consolidated basis □ Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersigh	nt						
	of the audit, review, or compilation of its financial statements and selection of an independent account			×					
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	n						
	Schedule O.								
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n						
	the Single Audit Act and OMB Circular A-133?				×				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	rgo th	е						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b						
			Fo	rm 990	(2018)				

Additional information from your Form 990: Return of Organization Exempt from Income Tax

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4a (continued)

Continuation Statement

Description

Research Program (PRAP), a dedicated resource for internal and external stakeholders interested in

conducting multisite trials withinwithin VA. The PRP is

essential to ensuring that Veterans will have greater access to trials within VA.

The PRP will shepherd trials through the start-up process (from initial contact

through IRB approval), provide education regarding VA procedure, and serve as a

clearinghouse of information regarding VA assets and capabilities. NAVREF also pursues

an Outreach Program to highlight the VA research program and the capabilities of

the nonprofit foundations. This program involves meeting with dozens of biomedical

research organizations and vendors, patient advocacy groups, veterans service

organizations, and any stakeholder who supports the health of veterans. Through outreach

NAVREF is heightening awareness of VA research and the nonprofits and exploring

opportunities to partner and collaborate to benefit veterans' health.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4b (continued)

Continuation Statement

Description

speakers from the US Congress, Department of Veterans Affairs, National Institutes of Health, and the life sciences industry provide keen insight on developing trends and initiatives. NAVREF also negotiates with

other non-profit organizations to provide additional educational content for member employees and VA affiliated personnel at no cost to the members.

Form 990: Return of Organization Exempt from Income Tax Form 990, Page 2, Part III, Line 4c (continued)

Continuation Statement

Description

companies and contract research organizations interested in conducting research studies at VA medical centers.

NAVREF negotiates with vendors to provide services

for member organizations at group discounts.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

National Association of Veterans' Research and Education Foundations 52-1784596 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

Part	Support Schedule for Organiza	ations Descr	ibed in Secti	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	i)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 8	Amounts from line 4						
9	similar sources						
	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 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	n, or fifth tax y	ear as a sectio	on 501(c)(3)
<u>C1</u> :	organization, check this box and stop he						🟲 📋
<u>Secu</u>	on C. Computation of Public Support Public support percentage for 2018 (line 6)			1 column (f)		14	%
15	Public support percentage for 2017 (interest					15	
16a	331/3% support test—2018. If the organi						
	box and stop here. The organization qua						
b	33 ¹ /3% support test—2017. If the organithis box and stop here. The organization						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "organization	eets the "facts	-and-circumst	ances" test, ch	neck this box a	and stop here	. Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization resupported organization	ation meets the neets the "fac	e "facts-and-o	circumstances stances" test.	" test, check	this box and	stop here.
18	Private foundation. If the organization di	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Schedule A (Form 990 or 990-EZ) 2018

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")			22,730.	131,462.	39,382.	193,574.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	574,440.	614,644.	636,595.	696,491.	614,603.	3,136,773.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	574,440.	614,644.	659,325.	827,953.	653,985.	3,330,347.
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	•						
	Add lines 7a and 7b						
8	line 6.)						3,330,347.
Secti	on B. Total Support						3,330,347.
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	574,440.	614,644.	659,325.	827,953.	653,985.	3,330,347.
10a			,	•	•	•	
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	1,092.	5,535.	16,472.	25,829.	33,242.	82,170.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	1,092.	5,535.	16,472.	25,829.	33,242.	82,170.
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part VI.)						
40	· ·						
13	Total support. (Add lines 9, 10c, 11, and 12.)		600 170		050 505	600 000	2 410 515
14	First five years. If the Form 990 is for the	575,532.					3,412,517.
17	organization, check this box and stop he	•					. , . ,
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line			13. column (f))		15	97.59 %
16	Public support percentage from 2017 Sci		=			16	98.43 %
	on D. Computation of Investment In				· ·	<u> </u>	
17	Investment income percentage for 2018 (y line 13, colu	mn (f))	17	2.41 %
18	Investment income percentage from 2017	7 Schedule A, F	Part III, line 17			18	1.57 %
19a	331/3% support tests-2018. If the organ					ore than 331/3	
	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as a	a publicly supp	orted organizat	ion . 🕨 🕱
b	331/3% support tests-2017. If the organize						33 ¹ /3%, and
	line 18 is not more than 331/3%, check this	box and stop h	ere. The organi	zation qualifies	as a publicly s	upported orgar	nization
20	Private foundation. If the organization di	d not check a l	box on line 14,	19a, or 19b, c	heck this box	and see instru	ictions >

Part IV **Supporting Organizations**

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

ecti	on A. All Supporting Organizations						
			Yes	No			
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.	1					
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	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.	3a					
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b					
С	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.	3c					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a					
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.	4b					
С	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.	4c					
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).	Fo					
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?	5a					
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c					
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6					
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7					
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 or 990-EZ).	8					
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a					
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b					
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c					
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	10a					
	supporting organizations)? If "Yes," answer 10b below.						
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b					

Part I	V 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					
	A family member of a person described in (a) above?	11b					
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c					
Section	on B. Type I Supporting Organizations						
			Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to						
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or						
	controlled the organization's activities. If the organization had more than one supported organization,						
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported						
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.						
2	Did the approximation approach fourths benefit of any approximation at how there the approached	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? <i>If "Yes," explain in Part</i>						
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,						
	supervised, or controlled the supporting organization.	2					
Section	on C. Type II Supporting Organizations						
Ocotin	on or Type in 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		100	110			
-	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					
Section	on D. All Type III Supporting Organizations						
			Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the						
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax						
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the						
	organization's governing documents in effect on the date of notification, to the extent not previously provided?						
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported						
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how						
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a						
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's						
	supported organizations played in this regard.						
Soction	on 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 i	netru	otion	<u>- </u>			
ı a	The organization satisfied the Activities Test. Complete line 2 below.	เอเน	CHOIL	u).			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i> .						
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see in:	struct	ions).			
2	Activities Test. Answer (a) and (b) below.			No			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of						
-	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>						
	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.						
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or						
	trustees of each of the supported organizations? Provide details in Part VI.	3a					
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	01					
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		i .			

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount	•		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly int	tegrated Type III support	ing organization (see

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Section D-Distributions				Current Year			
1	Amounts paid to supported organizations to accomplish e	exempt purposes					
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	orted					
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive				
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.						
3	Excess distributions carryover, if any, to 2018						
a	From 2013						
b	From 2014						
	From 2015						
d							
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from Section D, line 7: \$						
a	Applied to underdistributions of prior years						
	Applied to 2018 distributable amount						
	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а							
b							
c	Excess from 2016						
	Excess from 2017						
	Excess from 2018						

Schedule A (Form 990 or 990-EZ) 2018

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ▶ Attach to Form 990 or Form 990-EZ.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• S	section 501(c)(4), (5), or (6) orga	nizations: Complete Part III.			
Name	of organization			Employer iden	tification number
Nati	ional Association of	Veterans' Research and E	ducation Four	ndations 52-17845	96
Part	I-A Complete if the	e organization is exempt und	er section 501(d	c) or is a section 527 of	organization.
1	Provide a description of definition of "political can	the organization's direct and in nage in the organization's direct and in the organization.	direct political ca	mpaign activities in Part	IV. (see instructions for
2	Political campaign activity	y expenditures (see instructions) .			
3		cal campaign activities (see instruc			
Par		e organization is exempt und			
1	= -	excise tax incurred by the organiza			
2	-	excise tax incurred by organization	•		·
3 4a	•	ed a section 4955 tax, did it file Fo	•		Yes No
b					
Part		e organization is exempt und	er section 501(c), except section 501	(c)(3).
1		ly expended by the filing organiz			
2		filing organization's funds contribution or services of the contribution of the contri			
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
4		n file Form 1120-POL for this year		-	Yes No
5	organization made payme the amount of political co	ses and employer identification nurents. For each organization listed, ontributions received that were profund or a political action committe	enter the amount mptly and directly	paid from the filing organi delivered to a separate p	zation's funds. Also enter olitical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Pa	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
Α	Ch	theck 🕨 🗌 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name,						
			· · · · · · · · · · · · · · · · · · ·	hare of excess lobbying expenditures).				
В	Ch	eck 🕨	<u> </u>	ed box A and "limited control" provisions apply.				
			-	ring Expenditures	(a) Filing	(b) Affi		
			•	ans amounts paid or incurred.)	organization's totals	group	totals	
1	la		,	oublic opinion (grass roots lobbying)	0.			
	b	Total lo	bbying expenditures to influence a	a legislative body (direct lobbying)	1,647.			
	С	Total lo	bbying expenditures (add lines 1a	and 1b)	1,647.			
	d	Other e	exempt purpose expenditures		754,819.			
	е	Total e	xempt purpose expenditures (add	lines 1c and 1d)	756,466.			
	f Lobbying nontaxable amount. Enter the amount from the following table in both							
	columns.				138,470.			
	L	If the an	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
	L	Not over	\$500,000	20% of the amount on line 1e.				
	L	Over \$50	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.				
	L	Over \$1,	000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.				
	L	Over \$1,	500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.				
		Over \$17	7,000,000	\$1,000,000.				
	g	Grassro	oots nontaxable amount (enter 25%	% of line 1f)	34,618.			
	h Subtract line 1g from line 1a. If zero or less, enter -0							
	i Subtract line 1f from line 1c. If zero or less, enter -0							
	j			on either line 1h or line 1i, did the organization	file Form 4720			
		reportir	ng section 4911 tax for this year?			Yes	☐ No	
			4-Yea	r Averaging Period Under Section 501(h)				
		(Som	•	tion 501(h) election do not have to complete all	of the five colum	ns below		
	See the separate instructions for lines 2a through 2f.)							

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total			
2a	Lobbying nontaxable amount	117,719.	121,460.	140,905.	138,470.	518,554.			
b	Lobbying ceiling amount (150% of line 2a, column (e))					777,831.			
С	Total lobbying expenditures	12,751.	13,024.	2,542.	1,647.	29,964.			
d	Grassroots nontaxable amount	29,430.	30,365.	35,226.	34,618.	129,639.			
е	Grassroots ceiling amount (150% of line 2d, column (e))					194,459.			
f	Grassroots lobbying expenditures								

Page 3

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	า 5768	•	
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	ıΑ	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Publications, or published or broadcast statements?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\(-\)				
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	;)(5), (or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."	;)(5), d	or se	ction	line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
a	Current year		2a			
b	Carryover from last year		2b			
c	Total		2c 3			
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion or		3			
7	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	ying	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part						
Provid	the the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Pai	rt II-A, li	ines 1	and
Pt I	-A Line 1: NAVREF doesn't engage in direct or indirect political c	ampa:	ign			
acti	vities					
	<u> </u>					

Schedule C (Form 990 or 990-EZ) 2018 Page 4						
Part IV	Supplemental Information (continued)	_				
	<u> </u>	—				

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

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

lame of	the organization		Employer identification number
Nati	onal Association of Veterans' Researc	h and Education Foundations	52-1784596
Part			ds or Accounts.
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	, ,	,,
	Aggregate value of contributions to (during year)		
2			
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		<u> </u>
5	Did the organization inform all donors and donor		
	funds are the organization's property, subject to the	ne organization's exclusive legal contro	\square ? \square Yes \square No
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene	efit of the donor or donor advisor, or for	or any other purpose
	conferring impermissible private benefit?		· · · · · ·
Part	II Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recrea		f a historically important land area
	Protection of natural habitat	•	f a certified historic structure
	☐ Preservation of open space	Treservation of	a contined historic structure
2	Complete lines 2a through 2d if the organization h	ald a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year.	eld a qualified conservation contribution	Held at the End of the Tax Year
	Total acreage restricted by conservation easemen		
	Number of conservation easements on a certified	. ,	
d	Number of conservation easements included in		
	_		
3	Number of conservation easements modified, tran	sferred, released, extinguished, or terr	minated by the organization during the
	tax year ►		
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re	garding the periodic monitoring, ins	pection, handling of
	violations, and enforcement of the conservation ea	asements it holds?	· · · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcin	g conservation easements during the year
	>		5 ,
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing	conservation easements during the year
-	▶ \$		
8	Does each conservation easement reported on line	e 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports		
Э	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easem	•	ianciai statements that describes the
Dout	<u> </u>		Other Cimiler Assets
Part		· ·	
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF	, , , , , , , , , , , , , , , , , , , ,	
	works of art, historical treasures, or other simila		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S		
	works of art, historical treasures, or other simila		ducation, or research in furtherance of
	public service, provide the following amounts related		
	(i) Revenue included on Form 990, Part VIII, line 1		• \$
	(ii) Assets included in Form 990, Part X		• \$
2	If the organization received or held works of art	, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
U	rassets iniciaueu in FUIIII ₹₹U, Fäll A		3

Schedule D (Form 990) 2018 Page **2**

Part	III Organizations Maintaining Col	llections of A	Art, Hist	torical T	reasures, c	or Oth	ner Similar As	sets (continued)
3	Using the organization's acquisition, accelection items (check all that apply):	ession, and oth	ier recor	ds, chec	k any of the	follow	ing that are a s	ignificant use of its
а	☐ Public exhibition		d	Loan	or exchange	progra	ams	
b	Scholarly research		е		_	-		
C	☐ Preservation for future generations							
4	Provide a description of the organization's	s collections a	nd expla	in how th	nev further th	e ora	anization's exen	not purpose in Part
	XIII.				,	3		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5	During the year, did the organization solid	cit or receive o	donation	s of art.	historical trea	sures	or other simila	ar
	assets to be sold to raise funds rather than							
Part								
	Complete if the organization ans		on For	m 990 F	Part IV line 9	orr	eported an arr	ount on Form
	990, Part X, line 21.			, .	G,	,	op 0.10 a a a	
	Is the organization an agent, trustee, cus	stodian or othe	er interm	ediary fo	or contribution	ns or	other assets no	ot
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part X							_ 100 _ NO
	ii 100, oxplain the artangement iii art x	and complet	10 110 10	nowing to	2010.		A	mount
С	Beginning balance					1c		
d	Additions during the year					1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on						account liability	2 Vac Na
	If "Yes," explain the arrangement in Part X							
	Endowment Funds.	III. Check here	ii iiie ez	фіапаціої	mas been pi	ovide	u On Fait Aiii .	· · ·
ı aı	Complete if the organization ans	swered "Ves"	on For	m 990 F	Part IV line 1	10		
) Current year	(b) Prid		(c) Two years b		(d) Three years back	(e) Four years back
10		y current your	(5) 1 11	or your	(c) Two yours a	Juon	(a) Thirde years back	(b) I our yours back
1a	Beginning of year balance	+						+
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the c		d balanc	e (line 1g	, column (a)) l	held a	s:	
а	Board designated or quasi-endowment ▶		<u></u> %					
b		6						
С	Temporarily restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c sl							
3a	Are there endowment funds not in the pos	ssession of the	e organiz	zation tha	at are held an	nd adn	ninistered for th	e
	organization by:							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related organ	izations listed	as requii	red on Sc	chedule R? .			3b
4	Describe in Part XIII the intended uses of t	the organization	n's endo	wment fu	unds.			
Part	VI Land, Buildings, and Equipmen	nt.						
	Complete if the organization ans	swered "Yes"	on For	m 990, F	Part IV, line 1	11a. S	See Form 990,	Part X, line 10.
	Description of property	(a) Cost or oth		` '	r other basis		ccumulated	(d) Book value
		(investme	nt)	(0.	ther)	de	oreciation	
1a	Land		0.					0.
b	Buildings							
C	Leasehold improvements							
d	Equipment				28,300.		28,300.	0.
e	Other				21,535.		18,864.	2,671.
	Add lines 1a through 1e (Column (d) must	equal Form 99	0 Part \)	.,	2.671

 $\mathsf{B}\mathsf{A}\mathsf{A}$

Part VII	Investments – Other Securitie Complete if the organization an		rm 990 Part IV line	a 11h Saa Form	000 Part V line 12
	(a) Description of security or categor (including name of security)		(b) Book value	(c) Met	hod of valuation: -of-year market value
(4) Financial				Cost of end	-oi-year market value
(1) Financial	derivatives				
(2) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII	Investments – Program Relate		000 D. I.W. I'.	44.0.5	000 D. I.V. II 40
	Complete if the organization an	swered "Yes" on For			
	(a) Description of investment		(b) Book value		hod of valuation: -of-year market value
(1)					
(2)					
(3)					
<u>(4)</u>					
(5)					
<u>(6)</u> (7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 13.) 🕨	>			
Part IX	Other Assets.		'		
	Complete if the organization an	swered "Yes" on For	rm 990, Part IV, line	e 11d. See Form	990, Part X, line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
<u>(8)</u> (9)					
	mn (b) must equal Form 990, Part X,	col. (B) line 15.)			
Part X	Other Liabilities.	() /			
	Complete if the organization an	swered "Yes" on For	rm 990, Part IV, line	e 11e or 11f. See	e Form 990, Part X,
	line 25.				, ,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes				
(2)					
(3)					
(4)					
(5)					
(6) (7)					
(8)					
(9)					
	b) must equal Form 990, Part X, col. (B) line 25.)	•			
	r uncertain tax positions. In Part XIII, pro		ote to the organization	's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018 Page 4

Part		•	Retur	rn.
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	723,549.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a 44,690.		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	44,690.
3	Subtract line 2e from line 1		3	678,859.
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		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	-	5	678,859.
Part			er Ret	turn.
	Complete if the organization answered "Yes" on Form 990, I			
1	Total expenses and losses per audited financial statements		1	756,466.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	756,466.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIII.)	4b	-	
	Add lines 4a and 4b		4c	
5		a 10 l		
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5	756,466.
Part 1	XIII Supplemental Information.			
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	XIII Supplemental Information.	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
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Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
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Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line
Part 2 Provid	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part	V, line 4; Part X, line

Schedule D (Fo	orm 990) 2018	Page 🕻
Part XIII	Supplemental Information (continued)	

SCHEDULE J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

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

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

National Association of Veterans' Research and Education Foundations 52-1784596 Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract | Independent compensation consultant X Compensation survey or study ☐ Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a × **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b × × Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a × × 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: × 6a × 6b If "Yes" on line 6a or 6b, describe in Part III. 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed × Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe × 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2018 Page 2

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

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

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

Note: The sum of columns (B)(i) (iii) ic			f W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Richard Starrs	(i)	201,250.	0.	1,700.	15,094.	0.	218,044.	0.
1 Chief Executive Director		0.	0.	0.	0.	0.	0.	0.
	(i)							
_ 2	(ii)							
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
_10	(ii)							
	(i)							
_11	(ii)							
	(i)							
12	(ii)							
	(i)				 			
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Part III S	upplemental Information					
Provide the in	nformation, explanation, o	r descriptions required for	r Part I, lines 1a, 1b, 3, 4	la, 4b, 4c, 5a, 5b, 6a, 6b,	, 7, and 8, and for Part II.	Also complete this par
or any additi	ional information.					

Schedule J (Form 990) 2018

Page 3

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

National Association of Veterans' Research and Education Foundations 52-1784596
Pt VI, Line 6: Explanation of Classes of Members or Shareholder
Pt VI, Line 6: NAVREF is the membership association of VA-affiliated nonprofit
research and education corporations established in accordance with 38 USC 7361-7366.
Pt VI, Line 7a: How Members or Shareholders Elect Governing Body
Pt VI, Line 7a: All members have the right to elect Class A board members during
regularly scheduled annual elections. When a position becomes vacant between
elections, the governing board appoints a replacement to complete the year for
the vacated postion until the next election.
Pt VI, Line 11b: Form 990 Review Process
Pt VI, Line 11b: Each year, the board reviews a draft of NAVREF's IRS Form 990
in its board meeting. The organization's outside preparer presents the form to
the board and answers all questions. After the review and discussion, the preparer
finalizes the form and sends it to the NAVREF CEO. The CEO reviews the form once
more time and signs it. The CEO then sends an electronic copy to each board member
before filing the form with the IRS.
Pt VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts
Pt VI, Line 12c: Annually during the fall board meeting, board members and the
executive director review the conflict of interest policy and complete their
disclosure forms. The disclosure forms are evaluated by the executive director
and/or chair. In addition, on every quarterly board agenda the following statement
is printed, "Prior to the start of the meeting or at any time during the meeting,
please disclose any potential conflicts of interest pertinent to service on the
NAVREF board that were not reported on your most recent conflict of interest
disclosure form." If a conflict is identified, the board will recuse the member
from any applicable matter

Name of the organization	Employer identification number
National Association of Veterans' Research and Education Foundations	52-1784596
Pt VI, Line 15a: Compensation Review & Approval Process for CEO, Ex	ec. Dir.,
or Top Management - NAVREF's process for determining compensation f	or the CEO
begins with the annual performance evaluation. The board chair prov	ides other
board members with the draft evaluation every year and every third	year the board
engages in discussion with NAVREF's compensation consultant or othe	r external
sources on the appropriate range for the CEO's compensation. The ch	air and the
consultant consider the CEO's job description and performance evalu	ation, NAVREF's
pay philosophy, the national increase in the cost of living and ave	rage cost
of living increases provided in the Washington, DC area as well as	comparable
cities nationwide. The consultant reviews national and local salary	surveys and
assembles data that demonstrates the salary range for similarly qua	lified individuals
in comparable positions. The chair provides the draft evaluation and	d the results
of the consultant's work to the full board along with a recommendat	ion for the
CEO's compensation. After excusing the CEO and board members who may	y have a conflict
of interest (if any), the remaining board members review and discus	s these materials,
including the comparability data, and then approve the CEO's compen	sation. The
board's deliberations and decision are recorded in the meeting minu	tes. The board
engaged an outside consultant in FY2016 for the CEO's compensation	review. In
preparation for the FY2019 review, the board engaged an outside con	sultant and
used the consultant's input to establish the CEO's compensation for	2019.
Pt VI, Line 19: Other Organization Documents Publicly Available. Av	ailable on
site upon request.	
Pt VI, Line 8b: No committees have the authority to make decisions	on behalf
of the governing board	
Pt VI, Line 7b: NAVREF members vote on bylaws.	
Other: NAVREF engages with the VA and other federal agencies on iss	ues and policy

National Association of Veterans' Research and Education Foundations 52-1784596
matters of importance to the Non-Profit Corporations and VA research. These
other agencies included the National Institutes of Health, Department of Defense,
Office of Government Ethics, and Office of Management and Budget. Additionally,
NAVREF works with non-profit organizations, scientific professional societies
and pharmaceutical industry partners on matters of mutual interest. Operating
and leading a VA-affiliated NPC requires significant cooperation and collaboration
with U.S. Department of Veterans' Affairs at the local medical center level and
the central office level. NAVREF facilitates exchanges between VA and its' members
by identifying issues/concerns and proposing solutions through engagement with
numerous VA offices: Office of Research & Development, Non-Profit Program Office,
Technology Transfer Program, Office of General Counsel, Office of Academic Affiliation.
Primary working relationships exist with VA's Office of Research & Development.
NAVREF regularly attends meetings of the National Research Advisory Council,
among other forums, to foster relationships with VA research leaders and maintain
awareness of emerging issues and programs.
Pt III, Line 4d:
Expenses: \$61,603 including grants of: \$0 Revenue: \$3,100
Description: See Schedule O

Form **8879-E0**

Department of the Treasury

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2018, or fiscal year beginning $\ \, \text{Oct} \ 1 \ \,$, 2018, and ending $\ \, \text{Sep} \ 30, 20 \ 19 \ \,$

▶ Do not send to the IRS. Keep for your records.

▶ Go to www.irs.gov/Form8879EO for the latest information.

OMB No. 1545-1878

Internal Revenue Service Name of exempt organization Employer identification number National Association of Veterans' Research and Education Foundations 52-1784596 Name and title of officer Richard Starrs, Chief Executive Officer Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I. **1a** Form 990 check here ► 🗵 **b Total revenue**, if any (Form 990, Part VIII, column (A), line 12) . . . 2a Form 990-EZ check here ▶ □ b Total revenue, if any (Form 990-EZ, line 9) **b Total tax** (Form 1120-POL, line 22) 3a Form 1120-POL check here ► 3b 4a Form 990-PF check here ▶ □ b Tax based on investment income (Form 990-PF, Part VI, line 5) . . . 4b **5a** Form 8868 check here ▶ □ **b Balance Due** (Form 8868, line 3c) Part II **Declaration and Signature Authorization of Officer** Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only □ I authorize to enter my PIN as my signature ERO firm name Enter five numbers, but do not enter all zeros on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. X As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature ▶ Date $\triangleright 04/16/2020$ Part III **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ERO's signature ▶ Date ▶

> **ERO Must Retain This Form — See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

Additional information from your 2018 Federal Exempt Tax Return

Form 990: Return of Organization Exempt from Income Tax Part III, Line 4d (continued) (1)

Other Expenses Itemization Statement

Description	Amount
Advocacy	37,202.
Friends of VA Medical Care and Health Research	0.
VA Partnership	24,401.
Total	61,603.

Form 990: Return of Organization Exempt from Income Tax Line 4b Expenses

Itemization Statement

Description	Amount
Annual conference	126,368.
Other education program	112,156.
Total	238,524.

Form 990: Return of Organization Exempt from Income Tax Other amt. not included

Itemization Statement

Description	Amount
Charitable Donations	9,382.
Grant	30,000.
Total	39,382.

Form 990: Return of Organization Exempt from Income Tax

Line 3 Column D Itemization Statement

Description	Amount
Net Investment Income	69,564.
Capital Gain - reported on Part XI	-44,690.
Total	24,874.

Form 990: Return of Organization Exempt from Income Tax Part IX Line 24 (continued) (1)

Line 24 col (B)

Itemization Statement

Description	Amount
Training	3,357.
Workshops	24,210.
Other expenses	4,676.
Total	32,243.

Form 990: Return of Organization Exempt from Income Tax Part IX Line 24 (continued) (1)

Line 24 col (C)

Itemization Statement

Description	Amount
Training	2,134.
Workshops	0.
Other expenses	962.
Total	3,096.

Form 990: Return of Organization Exempt from Income Tax Part IX Line 24 (continued) (1)

Line 24 col (D)

Itemization Statement

Description	Amount
Training	32.
Workshops	0.
Other expenses	18.
Total	50.

Form 990: Return of Organization Exempt from Income Tax Line 17, column (A)

Itemization Statement

Description	Amount
accounts payable and accrued expenses	161,981.
accrued vacation	30,061.
Total	192,042.