III	
Ā	For the
B	Check if
	Address
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	Applicat
L	Tax-exe
J	Website

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations)

2018

OMB No. 1545-0047

Den	artment of	the Treesury	Do not enter social security numbers on this form as it may			ic.	Open to							
		ue Service	► Go to www.irs.gov/Form990 for instructions and the late		Inspec	tion								
Ā	For the	2018 cale	ndar year, or tax year beginning , 2018, and en	ding			, 20							
В	Check if	applicable:	C Name of organization X12 Incorporated			D Employ	er identification r	umber						
П	Address		Doing business as				46-1372675							
ᅙ	Name ch	•		√suite		E Telephor								
\Box	Initial ret	_	8300 Greensboro Dr		(425) 559-9769									
H		n/terminated		(420) 555-5752										
Η		return/terminated City or town, state or province, country, and ZIP or foreign postal code McLean, VA 22102-3661 G Gross receipts \$												
뭄				•				1440436						
ш	Applicati		F Name and address of principal officer: James Taylor, Chairman			-	subordinates? Yes							
			1734 Clarkson Rd #242, Chesterfield, MO 63017	L 5			s included? Yes	_						
<u></u>	Tax-exer	npt status:		7			l list. (see instruction	Urie)						
<u>J_</u>	Website		w.x12.org 1			exemption								
		organization:	✓ Corporation ☐ Trust ☐ Association ☐ Other ➤ L Year of for	mation:	2012	M State	of legal domicile:	VA						
P	art I	Summ												
	1	Briefly de	scribe the organization's mission or most significant activities: Dev	elop c	ross-indu	ıstıy busi	ness interchan	ge						
8	(standards	to facilitate global e-business											
& Governance														
Ē	2	Check th	is box $ ightharpoonup \square$ if the organization discontinued its operations or dispose	d of n	nore than	25% of	its net assets.							
₹	3		of voting members of the governing body (Part VI, line 1a)			3		7						
9	3		• • • • • • • • • • • • • • • • • • • •			4								
•	•		of independent voting members of the governing body (Part VI, line 1	ιυ) .										
Activities	5		nber of individuals employed in calendar year 2018 (Part V, line 2a)			5		0						
¥	6		nber of volunteers (estimate if necessary)			6		300						
₹	7a	Total unn	elated business revenue from Part VIII, column (C), line 12			7 a	<u></u>	0						
	Ь	Net unrel	ated business taxable income from Form 990-T, ling 38			7b		0						
			- NECEIVEL	П	Prior Y	DEL.	Current Y	'eur						
_	8	Contribut	tions and grants (Part VIII, line 1h)	+57				0						
3	9		service revenue (Part VIII, line 2g) . MAY. 2.2.7610	10	 	1268982		1439086						
Revenue		_		F	+-		 							
ě	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)	100	 	0		0						
	11		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10e, and 11e)			107		1350						
	12		enue—add lines 8 through 11 (must equal Plant VIII, coldmit(A), line 2		<u> </u>	1269089		1440436						
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)		<u> </u>	0	<u> </u>	0						
	14	Benefits	paid to or for members (Part IX, column (A), line 4)			0	_	1122						
	15	Salaries.	other compensation, employee benefits (Part IX, column (A), lines 5-10)			247000		295606						
Expense	16a		onal fundraising fees (Part IX, column (A), line 11e)			0		n						
Ž	ь		draising expenses (Part IX, column (D), line 25) ▶	\vdash		 •								
8	17			· 		070000		050055						
	· _		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	-		973058		959355						
	18	-	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-		1220058		1256082						
	19	Revenue	less expenses. Subtract line 18 from line 12	_		49031		<u> 184354</u>						
5				Beg	inning of Ci	errent Year	End of Yo	OQ.						
Net Assets Find Bales	20	Total ass	ets (Part X, line 16)	1		434044		658790						
34	21	Total liab	ilities (Part X, line 26)			645193		685585						
35	22	Net asser	ts or fund balances. Subtract line 21 from line 20			-211149		-26795						
P	art II		ture Block											
_			ry, I declare that I have examined this return, including accompanying schedules and st		to and to	to boot of a	mi kaandadaa aa	d balind it is						
tru	e. correc	ties of perju t. and compl	ete. Declaration of preparer (other than officer) is based on all information of which prep	erer ha	s anv know	ledae.	IIA KIIOMIOOGE SIK	u geller, it is						
		T &				- 1 I	1-110							
e:		 	Party & Mide			<u> </u>	2017							
Sig		y Sign	ature of officer	_	Di	ne								
He	re	IN	PETER L. ANDERSON, TREASURE	<u>r</u>										
		Туре	or print name and title											
Pa		Print/Ty	pe preparer's name Preparer's signature	Date		Check	# PTIN							
		_				self-emp								
	epare		ame >	Ц										
U9	e Oni					n's EIN ▶								
11-			athic patrice with the property shows about 2 (see instructions)		<u> Pho</u>	one no.								
_	<u></u>		s this return with the preparer shown above? (see instructions)			<u> </u>		a No						
For	Paperv	vork Redu	ction Act Notice, see the separate instructions.	tt. No. 1	12 <u>82</u> Y		Form 9	990 (2018)						



OUL SE	U (2018)		Page Z
Part		Statement of Program Service Accomplishments	
		Check if Schedule O contains a response or note to any line in this Part III	🗆
1		y describe the organization's mission:	
	To de	velop cross-industry electronic business interchange standards that enable individuals, companies, and organizations to	<u> </u>
	partic	ipate in global e-business.	
		.44441	
2		ne organization undertake any significant program services during the year which were not listed on the	
		Form 990 or 990-EZ?	∠ No
_		s," describe these new services on Schedule O.	
3		he organization cease conducting, or make significant changes in how it conducts, any program	
		xes?	∠ No
		s," describe these changes on Schedule O.	
4		ribe the organization's program service accomplishments for each of its three largest program services, as measu	
		nses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others,
	the to	tal expenses, and revenue, if any, for each program service reported.	
4a	(Code	e:) (Expenses \$including grants of \$) (Revenue \$	_)
	~=====	Products -	
•		ile, edit, maintain, and publish ASC X12 EDI standards, guidelines, and procedures. Sponsor forums for the evaluation,	
		ssion, and interpretation of ASC X12 EDI standards, guidelines, and data codes. Prepare and disseminate information	
	on the	ASC X12 standards to members and the general public.	
		,	
	*		
	*******	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4b	(Code	e:) (Expenses \$including grants of \$) (Revenue \$)
		ership -	•
		de administrative, logistical, and technical support to the members of the Accredited Standards Committee X12 for the on	aoina
		opment, maintenance, and balloting of ASC X12 EDI standards and derivative products.	
	~~~~~		
4c	(Code	e: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
	Meetin		-'
		de administrative, logistical, and technical support for the ASC X12 membership meetings at which ASC X12 EDI standard	
		ped and maintained.	15 al E
	CEACH	pou and maintained.	
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			*********
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		/===\data================================	
		***************************************	~
4.4		(Davids a Charles Octobrilla Octo	
4d		program services (Describe in Schedule O.)	
A =		nses \$ including grants of \$ ) (Revenue \$ )	
40	lotal	program service expenses ▶	



Part IV	Chec	klist o	f Rea	uired !	Schedu	les

				NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	4		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
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	/	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			<u> </u>
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
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	11c		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>✓</b>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<b>✓</b>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	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		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Dld the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
		E	. oon	M040

Part	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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
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		1
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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? If "Yes," complete Schedule L, Part II	26		1
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		1
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):			
8	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓_
	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		✓
94	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If Yes, complete schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		<b>V</b>
32	complete Schedule N, Part II	32		✓_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
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? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
_	<b>.</b>		Yes	No
18	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5			. 3.
Ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	,	,	, 1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	 1c	<b>,</b> -	٠ ند
			990	(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
_	Cates the surples of companies seconds on Ferm W.O. Tennomittel of West and Tour		Yes	No
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ļ	i
ь	Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ĺ	
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		$\vdash$	╁
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	1	1
Ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>	L	1
b	If "Yes," enter the name of the foreign country: ▶	ļ	ŀ	ł
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		١.
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	58	ļ	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<del>-</del>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		<del> </del>
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	1	ł
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
~	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	İ		1
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		L
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		├
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		l
f	Did the organization, during the year, pay premiums, directly or indirectly, or a personal benefit contract?.	77		├──
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	╁
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<b></b>	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
ь	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	<u> </u>
10	Section 501(c)(7) organizations. Enter:	ļ	j .	Į .
8	Initiation fees and capital contributions included on Part VIII, line 12	ł		
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:	ł		
``a	Gross income from members or shareholders	ľ		ĺ
_	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		
Ь	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.	<u> </u>		L
8	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>⊢</b> —
	Note. See the instructions for additional information the organization must report on Schedule O.	<u> </u>	,	1
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	the organization is licensed to issue qualified health plans	} :		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		Γ_
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		-	
	excess parachute payment(s) during the year?	15		1
	If "Yes," see instructions and file Form 4720, Schedule N.			$\lceil - \rceil$
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>/</u>
	If "Yes," complete Form 4720, Schedule O.	L		<u> </u>
		For	n 990	(2018)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins						
Section	on A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 6			ĺ				
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?								
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	1				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1				
6	Did the organization have members or stockholders?	8	<b>✓</b>					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	✓					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	<b>√</b>					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
a	The governing body?	8a	1	1				
b	Each committee with authority to act on behalf of the governing body?	8b	1					
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	•						
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode l	1				
OBCLI	on b. Policies (This oscilor & requests information about policies not required by the informational	<u> </u>	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		1				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	7	<del> </del>				
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		-					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	<b> </b>				
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1					
13	Did the organization have a written whistleblower policy?	13	<u> </u>	1				
14	Did the organization have a written document retention and destruction policy?	14		1				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
a	The organization's CEO, Executive Director, or top management official	15a	<b>'</b> ✓	1				
	Other officers or key employees of the organization	15b		1				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		/				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the							
	organization's exempt status with respect to such arrangements?	16b						
	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filled ▶							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  I Own website   Another's website   Upon request  Other (explain in Schedule O)	`		•				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interior financial statements available to the public during the tax year.	erest	policy	, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	<b>&gt;</b>					
	Todd Gould - Secretary, 8300 Greensboro Drive, Ste 800, McLean VA, 22102-3861 (425) 559-9769							

_			
ρ	80	A	

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

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

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

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

Check this box if neither the organization no	r any relate	d orga	aniz			ompe	nsa	ted any curren	it officer, director	r, or trustee.
				•	C) ition				_	
(A)	(B)		ot ch	eck	more	than o		(D)	(E)	(F) Estimated
Name and Title	Average hours per					is both or/trus		Reportable compensation	Reportable compensation from	amount of
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizationa (W-2/1089-MISC)	other compensation from the organization and related organizations
(1) Gary Beatty Director	11	,							0	0
(2) Dan Kazazz	1	<u> </u>	$\vdash$	_	┢		┢	ļ <u>-</u>	1	
Director	†	1				1	ļ	1 0		0
(3) Paul Mosley	1			$\vdash$	Г					
Director		1							o	0
(4) Cathy Sheppard	40				Г			[		
Executive Director		1			L	l		256630	0	0
(5) James Taylor	1									
Chair		✓	L	✓	Ļ,		<u> </u>	0	0	0
(6) Stephanie Fetzer	11	_						ļ		
Vice Chair	<u> </u>	<b>✓</b>	Ш	✓	<u> </u>	<u> </u>			0	
(7) Todd Gould	11		1	ار	l	l	l	ł	<u> </u>	
Secretary	<del>  </del>	✓	Щ	✓	_		<u> </u>	0	0	0
(8) Peter Anderson	5			/			ĺ	l		
Treasurer				~	-		├	4444		0
(9)	<b>†</b>									
(10)		"					<u> </u>			<del></del>
(11)			П				-			
(12)							-			
(13)							-			
(14)							-			

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mplo	7861	B, 81	nd ł	lighe	st C	ompensated E	Employees (continued)						
		(C)														
	(A)	(B) Position (do not check more than one						(C)	(E)			(F)				
	Name and title	Average	box,	unlet	в ре	rson	is both	n an	Reportable	Reportable		Estimat				
		hours per week (list any		_		lirect	or/trus	<del>,</del>	compensation	compensation related	from		ount of ther			
		hours for	Individual trustee or director	Institutional trustee	Officer	₹	Highest compen employee	Former	the	organizatio		comp	ensaho	ก		
		related organizations		₹	<b>Q</b>	Key employee	\$ \$	3	organization (W-2/1099-MISC)	(W-2/10 <del>99</del> -N	IISC)		m the nization			
		below dotted	QE	3	1	몽	8 8		(11-2) 1000-111190)				related			
		line)	를	1	l	3	1	ł	}			organ	Ization	3		
				8					1							
				<u> </u>	<u> </u>	⊢	_ <u>&amp;</u>	┡-	ļ							
(15)		<b></b>	]		)	ļ	]	ļ	}	}	1					
44.00		ļ		⊢	<u> </u>	<u> </u>		┝								
(16)						1		1								
44=		<del></del>	<u></u>	┝	⊢	┝		┢			_ +-					
(17)		ļ	1			ĺ	ľ	ľ	1							
44.00		<del>                                     </del>		┝	├─	<u> </u>	<u> </u>	<u> </u>								
(18)			ł					1	İ							
	<del></del>	<u> </u>		-		⊢	<del> </del>	┝	<del> </del>							
(19)				1	ŀ											
40.01			<del> </del>		-	⊢		├	<del> </del>							
(20)			ŀ			1	Ì	}	İ							
<b>604</b>		ļ ——	-	<u> </u>		⊢		┢	<del> </del>				——			
(21)		<del> </del>		1			Ì									
/O.CA	<del></del>			⊢	-	⊢		┢	<del> </del>				——			
(22)			1				Ì	ļ	1							
		<b></b>		├	-	┢	<del> </del> -	╁			-					
(23)			l													
(04)				┝	<u> </u>	├	-	┼	<del> </del>		<del>-  </del>					
(24)		<del> </del>	1	ĺ	ĺ	1	[	1	ļ		- 1					
(25)		<del></del>	-	┢	-	┝	├	╁								
(25)					1	l										
	Sub-total	L	Щ.		_	Ь	<u>.                                    </u>	_	261074		0					
	Total from continuation sheets to Part				:				2010/4		─サ					
	Total (add lines 1b and 1c)			-	-			•	261074							
2	Total number of Individuals (including but										00 000	of				
~	reportable compensation from the organi		2 to ti	1000	, 1131		above	J) **	1	ore triality is	00,000	O.				
	reportable compensation from the organi					_		_	<del>'</del>				Yes	No		
3	Did the organization list any former of	ficer direc	tor 0		n note	~	kou e		Novoe or high	act compa	neated					
3	employee on line 1a? If "Yes," complete									iost compo	i isatau	'   з		1		
	- •										· ·		-+			
4	For any individual listed on line 1a, is the organization and related organizations												.	į		
	individual	greater th	2011 J	100,	JUU	,, ,,	1 16	3,	COMPIBIO SCH	edule J IO	Sucri	4	1	ļ		
5	Did any person listed on line 1a receive of	 V accrila co	·	neat	Hon	fro	n env	 	related organia	 ration or ind	· · lividual	<b>——</b>				
•	for services rendered to the organization											5	.	1		
Section	on B. Independent Contractors	100, 0	<u> </u>	<u> </u>						· · · ·	<del></del>					
1	Complete this table for your five highest	nompenset	ad inc	lon	and.	ent	contr	act/	ore that receive	d more the	n \$100	nnn of				
•	compensation from the organization. Rep													17		
	year.	on compo		,,,,,	J		<u></u>	· ,	ou onding wit							
	(A)								(B)			(C)				
	Name and business add	irees							Description of s	ervices	(	Compens	ation			
Cathy	Sheppard, 9885 West Bajada Road, Peoria,	AZ 85383						Exe	ecutive Director				2!	56630		
								<u> </u>	· · · · · · · · · · · · · · · · · · ·							
								Π	•							
									<del>-</del>							
2	Total number of independent contractor	rs (includir	ng bu	t n	ot f	imit	ed to	th	ose listed abo	ove) who		<del></del>				
	received more than \$100,000 of compens								1	·						

Part	VIII	Statement of Revo		sponse or note t	o 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
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	s 1a					
	b	Membership dues .	1b					
	C	Fundralsing events .	1c		]		•	
	d	Related organizations	s 1d		•			,
Contributions, Giff and Other Similar		Government grants (cor	ntributions) 1e			•		
5 50	f	All other contributions, g	jifts, grants,					
3 5		and similar amounts not inc	cluded above   1f			•		İ
퉏임	g	Noncash contributions inclu	ded in lines 1a-1f: \$				•-	-
8	h	Total. Add lines 1a-1f		•		•		
$\overline{}$				Business Code		٠.		
를	2e	Membership Dues		900099	937923	937923		
Program Service Revenue	ь	Work Products	.44444	900099	134245	134245		
8	c	License Revenue		900099	363023	363023		
Ž	اما	Meetings		900099	3895	3895		
E		*********************						
5	f	All other program ser	vice revenue .					
윤	g	Total. Add lines 2a-2			1439086			
	3	Investment income	(including divid	dends, interest,				
		and other similar amo		•		ļ		
	4	Income from investmen	nt of tax-exempt b	ond proceeds				
	5					·		
		,	(i) Real	(ii) Personal		•		ļ · · · · · · · · · · · · · · · · · · ·
	6a	Gross rents		<u> </u>				
	Ь	Less: rental expenses		<del>  </del>				
į	c	Rental income or (loss)						
	ď	Net rental income or	(loss)					
	78	Gross amount from sales of	(i) Securities	(ii) Other		•	<del></del>	
	/ a	assets other than inventory		<del>                                     </del>				[
	ь	Less: cost or other basis	<b></b>	<del> </del>				ļ
	6	and sales expenses .						i
	c	Gain or (loss)	F	<del></del>			•	[
	d			•			<del></del>	<del></del>
	"	iter gain or (ioss) .						
venue	8a	Gross income from fuevents (not including \$						
Other Re		of contributions report See Part IV, line 18 .						
Į.	ь	Less: direct expenses	-	5	•			1
J		Net income or (loss) i						
		Gross income from ga See Part IV, line 19 .	aming activities.					
	ь	Less: direct expenses	s l			ļ	_	1
		Net income or (loss) f		tivities >				
		Gross sales of ir returns and allowance	nventory, less					
	b	Less: cost of goods s	sold t	•				
		Net income or (loss) 1		ventory ▶				
		Miscellaneous F		Business Code				
	11a	Sponsored education			1350	1350		
	b							
	G					<del>-</del>		
	d	All other revenue .						
		Total. Add lines 11a-			1350			· <del></del>
	12	Total revenue. See in			1440436	144 045	-,	

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lir			<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	L	·		
3	Grants and other assistance to foreign				•
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	1122			•
5	Compensation of current officers, directors, trustees, and key employees	295606	-		
6	Compensation not included above, to disqualified				
_	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
b	Legal	2104			
d	Accounting	26400	<del></del>	<del></del>	<del> </del>
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	655795			
12	Advertising and promotion	033/33		<del></del>	
13	Office expenses	9518	<del> </del>		
14	Information technology	18341			
15	Royalties				
16	Occupancy	2386			····-
17	Travel	19402			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	198525			
20	Interest		·	<u> </u>	
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization . Insurance	7676			
24	Other expenses, Itemize expenses not covered	7070	<del> </del>		
	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.)		<u></u>		
8	Card fees	8261	<del></del>		
b	Subscriptions	10755			
C	Licenses	191		<del> </del>	
d	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1256082	<del></del>		
26	Joint costs, Complete this line only if the	120002			
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 1 299684 547098 2 10006 2 3 3 Accounts receivable, net . . . . . . 102351 4 89726 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 .. Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions), Complete Part II of Schedule L..... 6 7 8 Prepaid expenses and deferred charges . . . 22003 9 21966 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b ь Less: accumulated depreciation . . . . 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 . 12 Investments—program-related. See Part IV, line 11... 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 434044 658790 17 Accounts payable and accrued expenses . . . . . . 95373 17 128710 18 Grants payable . . . . . . . . . . . . . . . . . . 18 19 19 549820 556875 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. . . . . . . . 22 23 Secured mortgages and notes payable to unrelated third parties . . 23 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 645193 26 26 Total liabilities. Add lines 17 through 25 685585. Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 -211149 -26795 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . . . . . . 31 Pald-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds . 33 33 -211149 -26795

Total liabilities and net assets/fund balances .

Form **990** (2018)

<u>658790</u>

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Form 96	00 (2018)			P	age 12
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			140436
2	Total expenses (must equal Part IX, column (A), line 25)	2		12	256082
3	Revenue less expenses. Subtract line 2 from line 1	3		1	84354
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-2	11149
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10			<u> 26795</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	• • •			ᆠᄔ
_				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		-	1	1
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain ir	וי	1	ļ
			20		· ,
28	Were the organization's financial statements compiled or reviewed by an Independent accountant?		<del>  ==</del>	_	<b>/</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				<u> </u>
_	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  Were the organization's financial statements audited by an Independent accountant?		2b	1	1
D	• • •		<u> </u>	+	╇
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	SCI OII 8	1	1	1
	Separate basis Consolidated basis Both consolidated and separate basis		1		ļ
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	iah	.		
·	of the audit, review, or compilation of its financial statements and selection of an independent accountant?				
	If the organization changed either its oversight process or selection process during the tax year, ex			†	<del> </del>
	Schedule O.	اا اسماح	.	1.	
30	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	,		1
-	the Single Audit Act and OMB Circular A-133?		3a		<b>/</b>
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao the		1	† 🔭
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b	}	]

Form **990** (2018)

### SCHEDULE C (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Description of the Organization is described below.

Description of the Organization is described below.

Description of the Organization is described below.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Open to Inspect Internal Revenue Service Go to www.ira.gov/Form990 for instructions and the latest information. Inspect Inspection 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 enswered "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.

		THE USAG HING LOUIT 21.00 (GROCHOUT OUR			
• Se	ction 501(c)(3) organizations	that have NOT filed Form 5768 (election	n under section 501	(h)): Complete Part II-B. Do r	not complete Part II-A.
	organization answered "Yes see separate instructions), t	s," on Form 990, Part IV, line 5 (Prox) hen	/ Tax) (see eeparate	e instructions) or Form 990	-EZ, Part V, line 35c (Proxy
• Se	oction 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization			Employer ider	ntification number
X12 Inc	corporated				46-1372675
Part	-A Complete if th	e organization is exempt und	er section 501(	c) or is a section 527 (	organization.
1	definition of "political car		•	. •	•
2		y expenditures (see instructions)			
3		cal campaign activities (see instruc			
Part		e organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organiza	ation under section	n 4955 ▶ 🥞	
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 ▶ \$	
3	•	ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	
<b>4a</b>	Was a correction made?				Yes No
<u>b</u>	If "Yes," describe in Part			<del></del>	
Part		e organization is exempt und			(c)(3).
1		tly expended by the filling organiz			
2	Enter the amount of the 527 exempt function act	filing organization's funds contrib	outed to other org	anizations for section	
3	Total exempt function	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,	
4		n file Form 1120-POL for this year			
5	Enter the names, address organization made paym the amount of political co	ses and employer identification null ents. For each organization listed, ontributions received that were pro fund or a political action committe	mber (EIN) of all se enter the amount mptly and directly	ection 527 political organi paid from the filing organi delivered to a separate p	zations to which the filing ization's funds. Also enter political 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)					

_	•
Pene	٠.

Ç	INCOME C (FOITH SOU OF SOUTEZ) 2010					rayu £		
Ра	Complete if the organiz section 501(h)).	ation is exempt	under section 50	)1(c)(3) and file	d Form 5768 (ele	ction under		
A	Check ▶ ☐ if the filing organization baddress, ElN, expenses,	•			iliated group membe	er's name,		
В	Check ▶ ☐ if the filing organization of	hecked box A and	"limited control" pr	ovisions apply.				
	Limits on	Lobbying Expend	ltures		(a) Filing	(b) Affiliated		
	(The term "expenditure:	<del></del>			organization's totals	group totals		
1	1a Total lobbying expenditures to influ	ence public opinio	n (grass roots lobby	ing)				
	<b>b</b> Total lobbying expenditures to influ	•		3)	<u></u>			
	c Total lobbying expenditures (add lin	•				<del></del>		
	d Other exempt purpose expenditure							
	e Total exempt purpose expenditures	•	•		ļ			
	f Lobbying nontaxable amount. Er columns.	nter the amount	from the following	table in both				
	If the amount on line 1e, column (a) or	(b) ls: The lobbyin	g nontaxable amount	ie:				
	Not over \$500,000	20% of the a	mount on line 1e.			• •		
	Over \$500,000 but not over \$1,000,000		us 15% of the excess of		İ			
	Over \$1,000,000 but not over \$1,500,00		us 10% of the excess of			•		
	Over \$1,500,000 but not over \$17,000,0		s 5% of the excess ov	ver \$1,500,000.	]			
	Over \$17,000,000 \$1,000,000.							
	g Grassroots nontaxable amount (ent				<u> </u>			
	h Subtract line 1g from line 1a. If zero	-			<b></b>			
	<ul><li>I Subtract line 1f from line 1c. If zero</li><li>j If there is an amount other than:</li></ul>				fle Form 4720			
	reporting section 4911 tax for this y					Yes No		
	(Some organizations that made Sec	a section 501(h) e e the separate ins	tructions for lines 2	e to complete all 2a through 2f.)	of the five column	s below.		
_	Lobb	ying Expenditure	s During 4-Year Av	eraging Period	<del></del>			
	Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total		
2	2a Lobbying nontaxable amount							
	b Lobbying ceiling amount (150% of line 2a, column (e))			•	::			
	c Total lobbying expenditures							
	d Grassroots nontaxable amount							
	e Grassroots ceiling amount (150% of line 2d, column (e))							
	f Grassroots lobbying expenditures							

	(election under section 501(h)).	Τ (	<b>a</b> )	(b)		
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	Amount		t
1	During the year, dld 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:		,	•		
a b	Volunteers?	-	-	'		
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
•	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?	<u> </u>				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ!			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<del> </del>			
!	Other activities?	-	<del> </del>			
J	Total. Add lines 1c through 1i	1	1			
<b>2a</b>	If "Yes," enter the amount of any tax incurred under section 4912	-				
b b	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			<u> </u>		
_	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		]	<del> </del>	<del>.</del>	
Part		c)(5).	or se	ction		
	501(c)(6).	-74-77				
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				<u></u>	✓
Part	Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."				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).	ts of				
а	Current year		28	ļ		
b	Carryover from last year		<u>2</u> b			
C	Total		2c			_
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the amount of line 3, what portion continued to the line 3, what portion continued to the line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, which is a line 3, whic		]			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobi and political expenditure next year?			1		
5	Taxable amount of lobbying and political expenditures (see instructions)		4			
Part	والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع	• •	5	L		
Provid	e the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gr instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Par	t II-A, I	nes 1	and

#### **SCHEDULE J** (Form 990)

Department of the Treasury

Name of the organization X12 incorporated

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** 

46-1372675

Part I Questions Regarding Compensation Yes Nio 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 Personal services (such as maid, chauffeur, chef) ☐ Discretionary spending account 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 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 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 Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, dld any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a 4b c 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 ilnes 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: a The organization? . . . . 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: 6e 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 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 

Page 2

Schedule J (Form 990) 2018

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

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

Note: The sum of columns (5)(1)—(8) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(B) Breakdown of W-2 and/or 1099-MISC compensation

(C) Reference and (D) Moderate of Columns (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Compensation (D) Com (C) Retirement and other deferred compensation (F) Compensation in column (S) reported as deterred on prior Form 990 (D) Nontavable benefits (E) Total of columns (R) Other reportable compensation (II) Bonue & Incentive compensation (I) Base compensation (A) Name and Title 256630 Cethy Sheppard 1Executive Director 202012 53818 **(II)** (A) (19) 8 99 (7) (44) Ø (14) (0) (11) (0) 9 (1) (II) Ø 80 (4) **(4)** 10 8 Ø 11 0 12 (II) (1) AD. Ø 14 (A) 60 15 (1) (FI) 16

Schedule J (Form 980) 2018

## 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

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization	Employer Identification number
X12 Incorporated	46-1372675
Form 990, Part VI, Section A, Line 6 - The members of the Corporation are the members of Accredited	Standards Committee X12.
***************************************	
Form 990, Part VI, Section A, Line 7a - The Nominating Committee issues a call for nominations to sen	ve on the Board of Directors and vets
Total day rate va decent ro Lilo fa The testing continues index	
candidates for qualification to serve. Qualified nominees are pr	esented to members and
ale shed by unto of manubous	
elected by vote of members.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Form 990, Part VI, Section A, Line 7b - Approval by the members who cast a ballot are required for the	election of board members
and other actions described in the bylaws.	
	~~~~
	~
Form 990, Part VI, Section B, Line 11b - The return is reviewed by the Board of Directors. Upon satisfa-	ctory review, the Treasurer signs and
I dill 390, Part 41, Section D. Line 115" 116 feath is reviewed by all board of breeded a open saleste	
files the return.	~
	~
Form 990, Part VI, Section B, Line 12c - All Directors are required to sign the conflict of interest policy	agreement to indicate acceptance of
the policy. All potential initiatives are examined for actual or p	otential conflict by the Board of
Directors.	
Form 990, Part VI, Section B, Line 15a - The compensation of the Executive Director is determined by t	he Board of Directors
Terminated in the Line of the Title Companies of the Libertain Director is commission by	TO DOGLO OF DICOMA

Farm 000 Best M. Castier C. Line 40. The Committeels Indoor accoming degraphs of interest	and mallers and France 200 are
Form 990, Part VI, Section C, Line 19 - The Committee's bylaws, governing documents, conflict of inter	est policy, and Form you are
available under the 'About' link on the home page of our websi	te.
•	
**	
Form 990, Part IX, Line 11g - Other Services- \$655795 is comprised of Membership/Meetings- \$115500	and Work Products- \$540295. These
Services are described on Form 990, Part III, Lines 4a, 4b, and 4	<u>lc.</u>