Form	<b>990</b>
------	------------

(Rev.	January	2020)

# **EXTENSION ATTACHED**

OMB No. 1545-0047 2019

Return of	Organization	Exempt From	Income lax
an anation E01(a)	E27 av 1017(a)(1) af the 1	whereast Devenue Code (au	and well and for and all and

.

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.

. .

Open to Public

Depa Inter	artment o nal Reve	of the Treasury nue Service				er social sec r <b>s.gov/Form</b>	curity numbe 1990 for ins						n.			ection	فا
Α	For th	e 2019 calen	dar year	, or tax year l	beginni	ing			, 2019,	and end	ding				,		
В	Check if	applicable:	С										D Emplo	oyer ider	ntification nu	ımber	
	Add	dress change	Ameri	.can Coun	ncil	on Ger	many,	Inc.					13-	-1889	9074		
	Nar	me change	14 E	60th St	Ste	1000	-						E Telepi				
	Init	ial return	New Y	York, NY	1002	2-7132							(21	2) 8	826-36	36	
		al return/terminated											(22				
		nended return											<b>G</b> Gross	receints	Ś Δ	,616,2	<u>۵</u> ۵
		plication pending	F Name	and address of p	orincinal o	officer: C+	P	0 - 1-	. 1		H(a	) Is this			ubordinates?		X No
		plication pending	Como	As C Abo		Sto	even E.	. Sok	)T		`	•				Yes	No
-	Tax o	exempt status:	X 501(c		c) (	)◀ (	(insert no.)	101	'(a)(1) or	527	_	If "No,	l subordinate " attach a lis	st. (see i	nstructions)		
J						) (		434		JZT		. Crown	exemption i		•		
<u>,</u> К		of organization:	X Corpo	usa.org		Association	Other ►			Year of form					legal domic	NV	
Pa		Summar		Tation nust	ι ,	ASSOCIATION	Other		-		nation.	195	2	State O	legal uomic	ne. NI	
ГС	1			rganization's	missio	n or most	significar	nt activiti	es·The		rica	n Co	uncil	on (	Corman		2)
				dent, no:													
- SC				rman-Ame				<u></u>	guni	20010	<u> </u>		<u>und 10</u>		<u>a</u>	<u></u>	
Governance		<u> </u>	<u></u>		<u></u>	<u></u>	<u>erono.</u>										
Nel	2	Check this bo	ox ►	if the organi	ization	discontin	ued its op	erations	or disp	osed of	more	than 2	25% of its	net a	ssets.		
ဗိ			oting me	mbers of the	govern	ing body	(Part VI, li	ine 1a).						3	1		37
<b>ര</b> ്ഗ				ent voting me													36
itie				iduals employ													9
Activities &				nteers (estima													36
¥				ess revenue f										-			0.
	b	Net unrelated	d busines	ss taxable inc	come fro	om Form	990-1, line	e 39			 I			7b	-		0.
		o									_		Prior Yea			rent Yea	
e				nts (Part VIII									1, <u>388,</u>		1	<u>,556,3</u>	
Revenue				nue (Part VII									<u>198,</u>			124,3	
Jev.				Part VIII, colu									309,	202.		371,9	929.
				/III, column (/ Iines 8 throug									1 0 0 5	0.21	2	052 0	
				nounts paid (								-	112			,052,5	
				r members (F							_		112,	000.		68,2	295.
		•		ensation, emp									1 0 2 C	<u> </u>	1	040 5	700
ŝ	15				-				-	-	-	-	1,036,	698.	L	,042,	/80.
Expenses	16a			ing fees (Part							-						
, x	b	Total fundrais	sing exp	enses (Part I)	X, colur	mn (D), lii	ne 25) 🕨		11	12,189	).						
ш	17	Other expens	ses (Part	IX, column (	(A), line	es 11a-110	d, 11f-24e	)					813,	791.		941,6	611.
	18	Total expens	es. Add	lines 13-17 (r	must ec	qual Part I	IX, columr	n (A), lir	e 25)				1,962,	489.	2	,052,6	686.
	19	Revenue less	s expens	es. Subtract I	line 18	from line	12				[		-66,	658.		-1	127.
e or												Beginni	ng of Curre	ent Year	En En	d of Yeaı	r
Net Assets or Fund Balances	20			line 16)								11	1,577,	278.	12	,847,0	092.
°.As	21	Total liabilitie	es (Part )	X, line 26)									177,	748.		248,3	357.
Pun	22	Net assets or	r fund ba	lances. Subtr	ract line	e 21 from	line 20					11	1,399,	530.	12	,598,	735.
Pa	rt II	Signatu	re Bloc	k													
Unde	er penalti	ies of perjury, I de	eclare that	I have examined t han officer) is bas	this return	ı, including a	ccompanying	schedules	and stater	ments, and	I to the	best of r	ny knowledg	e and be	elief, it is true	e, correct, a	ind
com	olete. De	claration of prepa	arer (other t	nan officer) is bas	sed on all	information	of which prep	barer has a	ny knowle	age.							
		Cianati	we of office														
Siç	jn		ure of office										ate				
He	re			. Sokol								Pres	ident				
			r print name		г.	Dreperate	anotur-		,	Deta			1		DTIN		
		Print/Type p				Preparer's si	111/11	1.5	d)	Date			Check	if	PTIN		
Pa		Michae					1 SCHe	11	-(	10/1	2/20	20	self-emplo	yed	P0202	4184	
Pre	epare			CHALL &									4				
US	e Onl	Firm's addr	ress 🏲 3	07 5th A	ve, 1	<u>15th</u> F	loor						Firm's EIN	► 13	3-4036'	703	

	NEW YORK, NY	10016-6517	Phone no. (21	2)	268-280	0
May the IRS	discuss this return with the prepare	r shown above? (see instructions)		Σ	Yes	No
BAA For Pa	perwork Reduction Act Notice, see	the separate instructions.	TEEA0101L 01/21/20		Form <b>99(</b>	<b>)</b> (2019)

Form	8868
UIII	

(Rev. January 2020) Department of the Treasury Internal Revenue Service

Т

#### Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-0047

01

► File a separate application for each return.

#### Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.* 

#### Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

 Name of exempt organization or other filer, see instructions.
 Taxpayer identification number (TIN)

Type or print	American Council on Germany, Inc.	13-1889074	
File by the	Number, street, and room or suite number. If a P.O. box, see instructions. 14 E 60th St Ste 1000		
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. New York, NY 10022-7132		

Enter the Return Code for the return that this application is for (file a separate application for each return) .....

Application Is For		Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

٠	The books are in the care of ►	Steven	Ε.	Sokol				

elephone No. 🕨	(212)	826-3636	
----------------	-------	----------	--

Fax No. ►

)	If the organization does not have an office or place of business in the United States, check this box	
)	If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group,	
	check this box ► . If it is for part of the group, check this box ► and attach a list with the names and TINs of all members	5
	the extension is for.	

1	I request an automatic 6-month extension of time until	11/15	, 20 <u>20</u> ,	to file the exempt organization return
	for the organization named above. The extension is	for the organiz	zation's return	for:

X calendar year 20 19 or

	► tax year beginning	, 20	, and ending	, 20	<sup>.</sup>	
2	If the tax year entered in line 1 is for	less than 12 mo	onths, check reason:	Initial return		Final return
	Change in accounting period					

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$ 0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3 c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

Form	n 990 (2019) American Council on Germany, Inc.	13-1889074	Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	See Schedule 0		
2	Did the organization undertake any significant program services during the year which were not listed on the prior	e	
	Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		_
3		vices? Yes	X No
_	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations and revenue, if any, for each program service reported.	to others, the total exp	penses. enses,
42	a (Code: ) (Expenses \$ 744,890. including grants of \$ ) (Re	evenue \$	)
	See Schedule 0		/
4 t	b (Code:) (Expenses \$ 340,503. including grants of \$) (Re	venue \$	)
	See Schedule 0		
4 0		evenue \$ <u>124</u> ,	,328.)
	See_Schedule_O		
		<b></b>	
		<b></b> _	
4 c	d Other program services (Describe on Schedule O.)See Schedule O(Expenses \$ 254,194, including grants of \$ 68,295.) (Revenue \$	Ň	
4	(Expenses\$254,194. including grants of\$68,295.) (Revenue\$e Total program service expenses►1,628,966.	)	
	$\mathbf{T}_{\mathbf{U}} = \mathbf{T}_{\mathbf{U}} = $		

Form 990 (2019) American Council on Germany, Inc.

 Part IV
 Checklist of Required Schedules

1 41	oneckist of required benedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If 'Yes,' complete Schedule D, Part I</i> .	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	Х	
k	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	11 b		Х
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	11 c		Х
C	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.	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
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	11 f	Х	
12 <i>a</i>	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
k	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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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	Х	
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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
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	Х	
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? <i>If 'Yes,' complete Schedule G, Part I</i> (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If 'Yes,' complete Schedule G, Part II</i>	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i>	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			37
BAA	domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	<b>21</b> Form	990	X (2019)

13-1889074

Page 3

 Form 990 (2019)
 American Council on Germany, Inc.

 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? <i>If 'Yes</i> ,' <i>complete Schedule I, Parts I and III</i>	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	Х	
24 :	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
I	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
(	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I.	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
	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):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV	28a		Х
	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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? <i>If 'Yes,' complete Schedule R, Part L</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	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		Х
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		Х
	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	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 13		162	110
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1 c		(2010)
BAA		гorm	9 <b>90</b> (	(2019)

· <b>·</b> · · · · · · · · · · · · · · · · ·
${\bf d} {\rm Did}$ the organization act as an 'on behalf of' issuer for bonds outstanding at any time
25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage transaction with a disqualified person during the year? If 'Yes,' complete Schedule L,
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified that the transaction has not been reported on any of the organization's prior Forms 990 or 99 Schedule 1. Part 1.

Form 990 (2019) American Council on Germany, Inc. 13-1889	074	F	Page 5
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
		Yes	No
2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State-			
<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return <b>2a</b>	9		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0	<b>3b</b>		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		v	
financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
<b>b</b> If 'Yes,' enter the name of the foreign country► <u>Germany</u>			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Х
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Λ
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		
<b>6 a</b> 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		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
services provided to the payor?	7a	Х	
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	Х	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.0		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7c		Л
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			Х
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
	/1		Л
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
Form 1098-C?	7h		
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?			
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9 b</b>		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10 b</b>			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year <b>12b</b>			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
<b>a</b> is the organization licensed to issue qualified health plans in more than one state?	13a	-	
<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	iou		
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans 13b			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?			Х
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation on Schedule O</i>	14b		
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		Х
If 'Yes,' see instructions and file Form 4720, Schedule N.			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
If 'Yes,' complete Form 4720, Schedule O.			

13-1889074

Page 6

Pa	rt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b bel	ow, a	and	for
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang Schedule O. See instructions.	jes o	n	
	Check if Schedule O contains a response or note to any line in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1	a Enter the number of voting members of the governing body at the end of the tax year 1 a 37 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 on Schedule O.			
	b Enter the number of voting members included on line 1a, above, who are independent 1b 36			
2		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	2		X
4	Did the organization make any significant changes to its governing documents	5		Λ
•	since the prior Form 990 was filed?	4		Х
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6	Х	Х
	a 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?	- 7 a	x	
	b Are any governance decisions of the organization reserved to (or subject to approval by) members,			
_	stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	_	V	
	a The governing body? b Each committee with authority to act on behalf of the governing body?	8 a 8 b	X X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		Λ	v
50	organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q ction B. Policies (This Section B requests information about policies not required by the Internal Re	9		$\frac{X}{x}$
380	LIGH B. POICIES (This Section B requests information about policies not required by the internal Re	venu	Yes	No
10	a Did the organization have local chapters, branches, or affiliates?	10 a	X	
	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?	10 b	Х	
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
12	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If 'Yes,' describe in Schedule O how this was done</i> SeeSchedule.Q	12 c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official. See . Schedule0	15a	Х	
		15b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
		16 a		Х
	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 events take with respect to such arrangements?	16b		
Sec	organization's exempt status with respect to such arrangements?	100		
17				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50 available for public inspection. Indicate how you made these available. Check all that apply.	1(c)(3	s on	ly)
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule O)	1. 1		
	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year. See Schedule O	vie to		
20				
	Steven E. Sokol 14 East 60th Street, Suite 1000 New York NY 10022-1006 (212	) 8	26-3	3636

Form 990 (2019) American Council on Germany, Inc.	13-1889074	Page 7						
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employe	es, and						
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								
<b>1 a</b> Complete this table for all persons required to be listed. Report compensation for the calendar year ending w organization's tax year.	vith or within the							

• 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.

See instructions for the order in which to list the persons above.

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

		(C)							
(A) Name and title	(B) Average hours per	Pos thar is	s both a	on (do not cho one box, unles ooth an officer director/truste		nd a	(D) Reportable compensation from the organization	<b>(E)</b> Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	employee Key employee	Highest compensated	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Steven E. Sokol	40								
President	0	Х	Σ	Κ			339,244.	0.	26,947.
(2) Karen Furey	40								
Corp Sec/ExecVP	0		Σ	K			138,733.	0.	17,690.
(3) Robert L Fenstermacher Chief Content Off.	$-\frac{40}{0}$					Х	135,833.	0.	17,539.
(4) Michele R Steinbuch	40								
Vice President	0					Х	108,806.	0.	16,510.
(5) John B. Emerson	1								
Chairman	0	Х	Σ	Χ			0.	0.	0.
(6) William R. Harman, Esq.	1								
VC/Treasurer	0	Х	Σ	Χ			0.	0.	0.
(7) Dr. Richard M. Hunt	1								
Vice Chairman	0	Х	Σ	Χ			0.	0.	0.
(8) Dale L. Ponikvar, Esg.	1								
Counsel	0	Х	Σ	Κ			0.	0.	0.
(9) Paul Stewart Atkins, Esg.	1								
Director	0	Х		_			0.	0.	0.
(10) Reginald J. Brown	1								_
Director	0	Х		_			0.	0.	0.
(11) Martin Bussmann	1								_
Director	0	Х					0.	0.	0.
(12) Anthony Casciano	1								
Director	0	Х					0.	0.	0.
(13) Anne E. Cohen, Esq.	1							0	0
Director	0	Х		_			0.	0.	0.
(14) David W. Detjen	1	v						0	0
Director	0	Х					0.	0.	0.
BAA	TEEA0	107L	07/31/1	19					Form <b>990</b> (2019)

13-1889074

Page 8

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(B) (C)												
	(A) Name and title	Average hours per (do not che box, unless officer and veek			a dire	n is bot ctor/trus	h an stee)	<b>(D)</b> Reportable compensation from the organization	<b>(E)</b> Reportable compensation from related organizations		(F) ated amo of other ensation f	
		for related organiza - tions below dotted line)	ndividual trustee or director	nstitutional trustee	Ney employee Officer	employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	the c an	d related anization	ion I
						ä	-					
(15)	<u>Frances A. Devlin</u> Director	<u>1_</u> 0	X					0.	0.			0.
(16)	<u>Stanfrod S. Warshawsky</u>	1										
	Director	0	Х					0.	0.			0.
	Ambassador Richard W. Fisher Director	<u>1</u> 0	X					0.	0.			0.
(18)	Alan H. Fleischmann	1										
	Director	0	Х					0.	0.			0.
(19)	David Geanacopoulos Director	<u>1_</u> 0	X					0.	0.			0.
(20)	<u>Andrew Gundlach</u> Director	<u>1</u>	X					0.	0.			0.
(21)	Karl-Theodor_zu_Guttenberg	1										
	Director	0	Х					0.	0.			0.
(22)	Ludwig Willisch	1										
(02)	Director	0	Х		_			0.	0.			0.
(23)	Monu Joseph							0	0			0
(24)	Director	0	Х					0.	0.			0.
	Dr. Andre Kelleners Director	<u>1</u> 0	X					0.	0.			0.
(25)	<u>Francis J. Kelly</u>	1						0				•
1 4	Director Subtotal	0	Х					0.	0.		70 0	0.
	Total from continuation sheets to Part VII, Secti	ο <b>ρ</b> Λ					•	722,616.	0.		78,6	
	Total (add lines 1b and 1c).						•	722,616.	0.		78,6	0.
	Total number of individuals (including but not limited						ved			ensatio		00.
-	from the organization $\blacktriangleright$ 4				,					onioutio		
											Yes	No
3	Did the organization list any <b>former</b> officer, direc									3		X
4	on line 1a? If 'Yes,' complete Schedule J for suc For any individual listed on line 1a, is the sum of	reportab	le co	npen	satio	n and	oth	er compensation f		3		<u> </u>
	the organization and related organizations greate such individual				• • • • •					4	Х	
5	Did any person listed on line 1a receive or accru for services rendered to the organization? <i>If 'Yes</i>	e comper s,' comple	nsatio e <i>te Sc</i>	n froi <i>hedu</i>	m an le J i	y unre for suc	elate ch p	ed organization or erson	individual	5		Х
Sec	tion B. Independent Contractors											
1	Complete this table for your five highest compen compensation from the organization. Report compen											
	(A)				<u></u> 900		<u>g</u> .	(B)			C)	
	Name and business add	ress						Description o	f services	Compe	ensatio	n
2	Total number of independent contractors (including to \$100,000 of comparential from the graphication		ited to	thos	e liste	ed abo	ve)	who received more	than			
	\$100,000 of compensation from the organization	- 0										

#### Form 990

### Continuation Sheet for Form 990

OMB No. 1545-0047

2019

Employler Identification number

13-1889074

Department of the Treasury Internal Revenue Service

Name of the Organization

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

American Council on Germany, Inc. Part VII Continuation: Officers, Directors, Trustees, Key Employees, and **Highest Compensated Employees** (B) (C) (D) (F) (A) (E) Position (check all that apply) Reportable compensation from Reportable compensation from Estimated amount of other Name and title Average Individual t or director Officer hours per week (list any employee Highest compensated Former Institutional trustee compensation from the organization Ì the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) y employee hours for related organiza-tions and related organizations l trustee below dotted line) Dr. Henry A. Kissinger 1 0 Director Х 0. 0 0. Dr. Charles A. Kupchan 1 Director 0 Х 0. 0 0. Dr. John Lipsky 1 0 Х 0. Director 0. 0. Dr. Alan S. MacDonald 1 Director 0 Х 0. 0 0. Edward S. McFadden 1 Director 0 Х 0. 0 0. Joseph McLaughlin 1 Х Director 0 0. 0. 0. Cassidy Morgan 1 Director 0 Х 0. 0. 0. Tammy S. Murphy 1 Director 0 Х 0. 0. 0. Courtney Diesel O'Donnell 1 Director 0 Х 0. 0. 0. Markus Reinisch 1 0 Х 0 Director 0. 0. Christopher M. Schroeder 1 0 Х Director 0. 0 0. Dr. Nina Smidt 1 Director 0 Х 0. 0 0. Wayne T. Smith 1 Director 0 Х 0. 0 0. Julie Linn Teigland 1 0 Director Х 0. 0. 0. 1 Brian K. Klein 0 Х 0. 0 Director 0.

Form 990 Cont 2019

# Form 990 (2019) American Council on Germany, Inc.

Page 9

			<b>(A)</b> Total revenue	(B)	(C)	_ (D)
			lotal revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded fror under section 512-514
1	a Federated campaigns 1a					
1	b Membership dues 1b	171,582.				
	c Fundraising events 1c	546,532.				
	d Related organizations 1d					
	e Government grants (contributions) 1 e f All other contributions, gifts, grants, and					
	similar amounts not included above <b>1 f</b>	838,188.				
1	g Noncash contributions included in lines 1a-1f. 1g					
	lines 1a-1f 1g h Total. Add lines 1a-1f		1,556,302.			
		Business Code	1,330,302.			
2	a <u>Discussion_programs/lunch_</u>	900099	124,328.	124,328.		
	b		i	í.		
	c					
1	d					
	e					
	f All other program service revenue g Total. Add lines 2a-2f		124 220			
			124,328.			
3	other similar amounts)	nnerest, dHu ►	299,361.			299,3
4	Income from investment of tax-exemp	t bond proceeds 🖻				
5	5					
-	(i) Real	(ii) Personal				
	a Gross rents					
	b Less: rental expenses 6b c Rental income or (loss) 6c					
	d Net rental income or (loss)	 ▶				
	a Gross amount from (i) Securities	(ii) Other				
'	sales of assets					
1	other than inventory b Less: cost or other basis	· -				
	and sales expenses <b>7b</b> 2, 460, 682					
	c Gain or (loss) 7c 72,568					
	d Net gain or (loss)	▶	72,568.			72,5
8	a Gross income from fundraising events (not including \$ 546,532.					
1	of contributions reported on line 1c).					
1		a 102,963.				
1	<b>b</b> Less: direct expenses 8	<b>b</b> 102,963.				
1	c Net income or (loss) from fundraising					
9	a Gross income from gaming activities.					
1		a				
	<b>b</b> Less: direct expenses 9 <b>c</b> Net income or (loss) from gaming acti	~				
	· · · · · ·	vilic3				
10	a Gross sales of inventory, less returns and allowances	)a				
1	<b>b</b> Less: cost of goods sold	)b				
	c Net income or (loss) from sales of inv	entory ►				
		Business Code				
11						
11	b					
i l	d All other revenue					
						1

# Form 990 (2019) American Council on Germany, Inc. Part IX Statement of Functional Expenses

13-1889074

	Check if Schedule O contains a re				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> 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	0.6.000	0.0.000		
~	individuals. See Part IV, line 22	26,000.	26,000.		
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16	42,295.	42,295.		
4	Benefits paid to or for members	,	,		
5	Compensation of current officers, directors, trustees, and key employees	529,637.	405,112.	71,561.	52,96
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	
7	Other salaries and wages	389,786.	359,906.	17,870.	12,01
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	14,536.	13,293.	755.	488
9	Other employee benefits	55,211.	47,882.	4,368.	2,96
9 10	Payroll taxes	53,610.	47,882. 44,777.	4,368.	3,70
11	Fees for services (nonemployees):	55,010.	44,777.	5,125.	
	a Management	2 012		2 012	
	b Legal	3,813.		3,813.	
	d Lobbying.	60,476.		60,476.	
	e Professional fundraising services. See Part IV, line 17				
	f Investment management fees	25,266.		25,266.	
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule 0.)	33,742.	3,586.	30,156.	
	Advertising and promotion	01 660	15 101	F F00	1 00
3  4	Office expenses	21,663.	15,101.	5,500.	1,06
4 5	Royalties	34,608.	7,183.	26,830.	59
6	Occupancy.	190,231.	158,888.	18,184.	13,15
17	Travel	215,203.	208,117.	6,621.	46
8		213,203.	200,117.	0,021.	<u> </u>
19	Conferences, conventions, and meetings	168,420.	168,420.		
20	Interest	·	·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,461.	12,914.	1,478.	1,06
23		8,609.	7,191.	823.	59
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
i	<sup>a</sup> <u>Public policy program</u>	127,950.	104,437.	23,513.	
	b Indirect fundraising expenses	22,700.			22,70
0	<sup>C</sup> <u>Miscellaneous</u>	9,694.	1,417.	8,277.	
	d <u>Postage and Shipping</u>	2,067.	1,554.	409.	10
	e All other expenses.	1,708.	893.	506.	30
25	Total functional expenses. Add lines 1 through 24e	2,052,686.	1,628,966.	311,531.	112,18
26	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following				
	SOP 98-2 (ASC 958-720)				

# Form 990 (2019) American Council on Germany, Inc. Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing	521,818.	1	773,669.
	2	Savings and temporary cash investments.	· / · · ·	2	-,
	3	Pledges and grants receivable, net.	245,172.	3	191,903
	4	Accounts receivable, net	•	4	,
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net.		7	
ŝ	8	Inventories for sale or use.		8	
Assets	9	Prepaid expenses and deferred charges.	31,337.	9	19,935
As		Land, buildings, and equipment: cost or other basis.	51,557.	J	19,935
			21 546	10.0	16 005
			31,546.	10 c	16,085
		Investments – publicly traded securities.	10,711,431.	11	11,809,526
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11	35,974.	15	35,974
	16	Total assets. Add lines 1 through 15 (must equal line 33)	11,577,278.	16	12,847,092
	17	Accounts payable and accrued expenses	113,123.	17	121,973
	18	Grants payable	60,000.	18	23,000
	19	Deferred revenue	4,625.	19	103,384
	20	Tax-exempt bond liabilities		20	•
5	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
		Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25	177,748.	26	248,357.
ces		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
an	27	Net assets without donor restrictions	11,319,415.	27	12,553,136.
Ba	28	Net assets with donor restrictions	80,115.	28	45,599
Fund		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.	0071101		10/033
5	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
2					
ssets	31	Retained earnings, endowment, accumulated income, or other funds		51	
Net Assets or Fund Balances	31 32	Retained earnings, endowment, accumulated income, or other funds	11,399,530.	31 32	12,598,735.

BAA

Form 990 (2019)

Forn	n 990 (2019) American Council on Germany, Inc. 13-	18890 <sup>.</sup>	74	Pa	age <b>12</b>
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,0	52,5	559.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,0	52,6	586.
3	Revenue less expenses. Subtract line 2 from line 1	3		-1	L27.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,3	99,5	530.
5	Net unrealized gains (losses) on investments	5	1,2	01,4	431.
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 on Schedule O). See Schedule O	9		-2,0	)99.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
		10	12,5	98,	735.
Pai	rt 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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
22	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	-	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe				
	separate basis, consolidated basis, or both:	u on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
ł	<b>b</b> Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa	ite	-		
	basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain				
	on Schedule O.				
38	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Х
ł	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud	it			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
BAA	TEEA0112L 01/21/20		Form	990	(2019)

SCHEDULE A
(Form 990 or 990-EZ

# Public Charity Status and Public Support

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

OMB No. 1545-0047
<b>20</b> 19

Departn Internal	nent of the Treasury Revenue Service	► (	Go to www.irs.gov/Fo	orm990 for instructions	and the	latest i	nformation.	Inspection
Name o	f the organization	•					Employer identifica	ation number
	rican Counc						13-188907	
Part				rganizations must o			1 /	tions.
The o	<u> </u>	•		For lines 1 through 12,		2	,	
1				hurches described in sect			i).	
2				Schedule E (Form 990 or		•		
3		•		ization described in sec				
4			tion operated in conju	unction with a hospital of	describe	d in sec	:tion 1 <b>70(b)(1)(A)(iii)</b> . E	nter the hospital's
_	name, city, a							
5	An organizat	ion operated for b)(1)(A)(iv). (Co	r the benefit of a colle omplete Part II.)	ege or university owned	or oper	ated by	a governmental unit de	escribed in
6	A federal, sta	ate, or local gov	ernment or governme	ental unit described in <b>s</b>	ection 1	<b>70(b)(</b> 1)	(A)(v).	
7	X An organization in section 17	on that normally ( ' <b>0(b)(1)(A)(vi).</b> (	receives a substantial p (Complete Part II.)	part of its support from a	governm	ental un	t or from the general pul	olic described
8	A community	trust described	l in section 170(b)(1)(	A)(vi). (Complete Part I	l.)			
9	An agricultura	I research organ	ization described in sec	ction 170(b)(1)(A)(ix) oper	ated in c	onjunctio	on with a land-grant colle	ege
	or university or university:	or a non-land-gra	nt college of agriculture	e (see instructions). Enter	r the nam	ne, city,	and state of the college of	Dr.
10	from activitie investment ir	s related to its on the second s	exempt functions-sul	33-1/3% of its support fr bject to certain exceptic e income (less section Part III )	ons, and	(2) no I	more than 33-1/3% of i	ts support from gross
11				ely to test for public safe	ety. See	sectior	n 509(a)(4).	
12	H -	-		ely for the benefit of, to	-			ut the purposes of one
	or more publ	icly supported c	organizations describe	ed in <b>section 509(a)(1)</b> c	or sectio	n 509(a	)(2). See section 509(a	(3). Check the box in
а		-		upporting organization d, or controlled by its sup		•	-	the supported
ŭ	organization(s	b) the power to re rt IV, Sections A	equiarly appoint or elect	t a majority of the director	rs or trus	tees of t	the supporting organization	on. You must
b	management	pporting organiz of the supporting ete Part IV, Sect	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). <b>You</b>
С	Type III function	onally integrated (s) (see instruct	. A supporting organizations). You must com	tion operated in connection plete Part IV, Sections A	n with, ar <b>A, D, an</b>	nd functio d E.	onally integrated with, its	supported
d	Type III non-fu	unctionally integ	rated. A supporting orgonization generally	panization operated in cor must satisfy a distribu ms A and D, and Part V.	nnection	with its s	supported organization(s)	) that is not
е			•	en determination from 1	the IRS	that it is	a Type I Type II Type	e III functionally
	integrated, or	r Type III non-fu	inctionally integrated	supporting organization	۱.			
		-	n about the supported		1			
(1	i) Name of supported of	organization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
Total								

Schedule	A (Form 990	or 990-EZ) 20	19	American	Council	on	Germany,	Inc.	

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

#### Section A. Public Support

	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,240,391.	1,860,170.	1,226,130.	1,388,417.	1,556,302.	7,271,410.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,240,391.	1,860,170.	1,226,130.	1,388,417.	1,556,302.	7,271,410.
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)						100,183.
6	Public support. Subtract line 5 from line 4						7,171,227.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	<b>(e)</b> 2019	<b>(f)</b> Total
7	Amounts from line 4	1,240,391.	1,860,170.	1,226,130.	1,388,417.	1,556,302.	7,271,410.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	200,330.	134,786.	295,095.	295,952.	299,361.	1,225,524.
	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. Add lines 7 through 10						8,496,934.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	656,423.
	First five years. If the Form 990 is organization, check this box and	stop here					►
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						84.40 %
	Public support percentage from						81.94 %
	<b>33-1/3% support test—2019.</b> If t and <b>stop here.</b> The organization	qualifies as a put	olicly supported o	rganization			·····► <u>X</u>
b	33-1/3% support test-2018. If the and stop here. The organization	e organization die qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box ·····►
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test. check this	box and stop her	re. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ation qualifies as	box and <b>stop he</b> a publicly support	re. Explain in Parl ed organization.	t VI how the
18	Private foundation. If the organize	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions 🕨

Schedule A (Form 990 or 990-EZ) 2019

13-1889074

13-1889074

Page 3

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.)

Sec	tion A. Public Support						
Calend 1	lar year (or fiscal year beginning in) ► Gifts, grants, contributions,	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	<b>(f)</b> Total
•	and membership fees received. (Do not include						
	any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or						
	facilities furnished by a governmental unit to the						
	organization without charge						
	Total. Add lines 1 through 5			<u></u>			
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						
с	Add lines 7a and 7b						
8	Public support. (Subtract line						
	7c from line 6.)						
	tion B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
TUa	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
10	regularly carried on						
12	Other income. Do not include gain or loss from the sale of						
	capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.).						
14	First five years. If the Form 990 organization, check this box and						
Sec	tion C. Computation of Pu						
15	Public support percentage for 20	)19 (line 8, colum	n (f), divided by li	ne 13, column (f)	))	15	0/0
16	Public support percentage from	2018 Schedule A	Part III, line 15.			16	010
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	e			
17	Investment income percentage f	or 2019 (line 10c,	column (f), divid	ed by line 13, col	umn (f))	17	0/0
18	Investment income percentage f	rom <b>2018</b> Schedu	lle A, Part III, line	17		18	0\0
19a	33-1/3% support tests-2019. If						
	is not more than 33-1/3%, check		• •	•		-	
b	<b>33-1/3% support tests—2018.</b> If f line 18 is not more than 33-1/3%	the organization of the check this how	iid not check a bo and <b>stop here</b> . Th	ox on line 14 or line or an	ne 19a, and line 1 valifies as a public	b is more than 33-	i/3%, and hization ► □
20	<b>Private foundation.</b> If the organi		-				
				,, 5. 150, 0			

Page 4

No

Yes

1

2

3a

3b

3c

4a

Δh

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

Schedule A (Form 990 or 990-EZ) 2019 American (	Council	on	Germany	, Inc.
---	---------	----	---------	--------

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
<b>b</b> A family member of a person described in (a) above?	11b		
c 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 B. Type I Supporting Organizations

- 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 organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

#### Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	I		

#### Section 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
	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 <b>Part VI</b> the role the organization's supported organizations played			
	in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
  - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
  - c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

#### 2 Activities Test. Answer (a) and (b) below.

- 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? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **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.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

13-1889074

Page 5

Yes

1

2

No

No

Yes

2a

2b

3a

3h

1 Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizati	ist on No	v. 20, 1970 (explain in	n Part VI). <b>See</b>
ection 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		
ection 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):	t		
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
<b>c</b> 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		
ection 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		
<b>6 Distributable Amount.</b> 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-functionally integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2019

13-1889074 Page 7

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Sec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	
3	Administrative expenses paid to accomplish exempt purposes of su			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizati in $\ensuremath{\text{Part VI}}\xspace$ ). See instructions.	on is responsive (provide	details	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required – explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
-	From 2014			
b	From 2015			
	From 2016			
d	From 2017			
e	From 2018			
1	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

BAA

Schedule A (Form 990 or 990-EZ) 2019

SC	SCHEDULE D Supplemental Financial Statements				OMB No. 1545-0047	
	rm 990)	► Complet	e if the organization answered 'Yes' on Form 990, 5, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			2019
Depa	tment of the Treasury al Revenue Service	► Go to www.irs	<ul> <li>Attach to Form 990.</li> <li>gov/Form990 for instructions and the latest information</li> </ul>	ation.		Open to Public Inspection
	of the organization		-		Employer i	dentification number
		Council on German	y, Inc. or Advised Funds or Other Similar Funds o		13-188	9074
Pa	Complete	if the organization ans	wered 'Yes' on Form 990, Part IV, line 6.	or Acc	ounts.	
			(a) Donor advised funds	<b>(b)</b> F	unds and	other accounts
1	Total number at e	end of year				
2		ntributions to (during year)				
3		ants from (during year)				
4	00 0	2			<i>c</i> .	
5	are the organizat	ion's property, subject to the	nor advisors in writing that the assets held in donor a organization's exclusive legal control?		· · · · · · · L	Yes No
6	for charitable pur impermissible pri	poses and not for the benefit vate benefit?	rs, and donor advisors in writing that grant funds car of the donor or donor advisor, or for any other purp	n be us ose cor	ed only nferring	Yes No
Pa		ition Easements.	wered 'Yes' on Form 990, Part IV, line 7.			
1			y the organization (check all that apply).			
	Preservation of	of land for public use (for exam	ole, recreation or education) Preservation of	a histo	rically imp	ortant land area
	Protection of	natural habitat	Preservation of	a certif	ied histori	c structure
		of open space				
2	Complete lines 2a last day of the ta:	through 2d if the organization I x vear.	neld a qualified conservation contribution in the form of a	conser	vation ease	ment on the
				H	leld at the	End of the Tax Year
				2a		
				2 b		
				2 c		
	structure listed in	the National Register	n (c) acquired after 7/25/06, and not on a historic	2 d		
3	Number of conserv tax year ►	vation easements modified, trar	nsferred, released, extinguished, or terminated by the org	janizatio	n during th	e
4		where property subject to conse				
5	Does the organize	ation have a written policy re	garding the periodic monitoring, inspection, handling	g of viol	ations,	Yes No
6	Staff and volunteer	r hours devoted to monitoring,	inspecting, handling of violations, and enforcing conserva	ation ea	sements du	
7	Amount of expense ►\$	es incurred in monitoring, inspe	ecting, handling of violations, and enforcing conservation	easeme	ents during	the year
8	Does each conse and section 170(h	rvation easement reported on (4)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of section	170(h)(	4)(B)(i)	Yes No
9	In Part XIII, desc include, if applica conservation eas	able, the text of the footnote	oorts conservation easements in its revenue and exp to the organization's financial statements that descri	ense st bes the	atement a organizati	nd balance sheet, and on's accounting for
Pa	t III Organizat Complete	tions Maintaining Colle if the organization ans	ctions of Art, Historical Treasures, or Oth wered 'Yes' on Form 990, Part IV, line 8.	er Sin	nilar Ass	ets.
1:	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its revenue stateme Id for public exhibition, education, or research in furt I statements that describes these items.	ent and herance	balance s e of public	heet works of art, service, provide in
l	following amount	s relating to these items:	r FASB ASC 958, to report in its revenue statement a public exhibition, education, or research in furtherance			t works of art, provide the
	••		line 1			
n	· ·		sisteriael traccurse, er ether similer essets for finansial a			lowing
2			historical treasures, or other similar assets for financial g ASC 958 relating to these items: 1			iowing
			·····			

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

Schedule D (Form 990) 2019

TEEA3301L 8/22/19

Schedule D (Form 990) 2019 Amer:	ican Coun	cil on Germany	, Inc.	13-188	9074 Page 2
Part III Organizations Mainta	ining Colleo	ctions of Art, Hist	orical Treasures, or	Other Similar Ass	ets (continued)
<b>3</b> Using the organization's acquisition items (check all that apply):	i, accession, an	d other records, check a	any of the following that m	ake significant use of its	collection
a Public exhibition		d Loan	or exchange program		
<b>b</b> Scholarly research		e Other	ſ		
c Preservation for future gener	ations				
4 Provide a description of the organiz Part XIII.	ation's collection	ons and explain how the	y further the organization's	s exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather the solution of the solut	tion solicit or i	receive donations of a	rt, historical treasures, o	r other similar assets	
Part IV Escrow and Custodia line 9, or reported an				swered fes offro	111 990, Part IV,
<b>1 a</b> Is the organization an agent, trus on Form 990, Part X?	stee, custodiar	n or other intermediary	for contributions or othe	er assets not included	Yes No
<b>b</b> If 'Yes,' explain the arrangement				I	
					Amount
<b>c</b> Beginning balance				1c	
<b>d</b> Additions during the year				1d	
e Distributions during the year				1e	
f Ending balance				1f	
2 a Did the organization include an a	amount on Fori	m 990, Part X, line 21	, for escrow or custodial	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. C	heck here if the expla	nation has been provide	d on Part XIII	
Part V Endowment Funds. C	omplete if t	he organization a	<u>nswered 'Yes' on Fo</u>	orm 990, Part IV, lir	ne 10.
	(a) Current y	vear (b) Prior yea	ar (c) Two years back	(d) Three years back	(e) Four years back
<b>1 a</b> Beginning of year balance					
<b>b</b> Contributions					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
<b>g</b> End of year balance					
2 Provide the estimated percentag	e of the currer	it year end balance (li	ne 1g, column (a)) held	as:	
a Board designated or quasi-endowm	ient 🕨	00			
<b>b</b> Permanent endowment	olo				
c Term endowment ►	olo				
The percentages on lines 2a, 2b, a	nd 2c should ec	jual 100%.			
<b>3 a</b> Are there endowment funds not in t	he nossession	of the organization that	are held and administered	for the	
organization by:	the possession				Yes No
(i) Unrelated organizations					3a(i)
(ii) Related organizations					3a(ii)
<b>b</b> If 'Yes' on line 3a(ii), are the rela	ated organizati	ons listed as required	on Schedule R?		. 3b
4 Describe in Part XIII the intended	d uses of the c	rganization's endowm	ent funds.		<u> </u>
Part VI Land, Buildings, and	Equipment.				
Complete if the organ	ization ansv	vered 'Yes' on For	m 990, Part IV, line	11a. See Form 99	0, Part X, line 10.
Description of property		<b>a)</b> Cost or other basis (investment)		(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land		. /	, <i>,</i> ,		
<b>b</b> Buildings			1		
<b>c</b> Leasehold improvements			140,725.	140,725.	0.
<b>d</b> Equipment			119,458.	103,373.	16,085.
<b>e</b> Other			110,100,	100,0,0,0	
Total. Add lines 1a through 1e. (Colum		ual Form 990, Part X.	column (B), line 10c.)		16,085.
BAA					ule D (Form 990) 2019

	D (Form 990) 2019 American Council Investments – Other Securities.		N/A	13-1889074 Pag
	Complete if the organization answere	<u>d 'Yes' on Form 990</u>		See Form 990, Part X, line
	scription of security or category (including name of security)	(b) Book value	(c) Method of valuati	on: Cost or end-of-year market value
	cial derivatives			
	ly held equity interests			
(3) Other				
<u>(A)</u> (B)		_		
(C)				
(D)				
(E)				
(F)		_		
$\frac{(G)}{(G)}$ — — —		_		
(H) 		-		
(l) Total (Colu	umn (b) must equal Form 990, Part X, column (B) line 12.)	►		
	II Investments – Program Related.		N/A	
	Complete if the organization answere		, Part IV, line 11c. S	See Form 990, Part X, line
	(a) Description of investment	(b) Book value	(c) Method of valuation	: Cost or end-of-year market valu
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10) Total (Coli	umn (b) must equal Form 990, Part X, column (B) line 13.)	>		
Part IX	Other Assets.	N/A		
	- Complete if the examination ensurers	d 'Vac' on Earm 000		
	Complete if the organization answere		, Part IV, line 11d. S	
(1)		escription	, Part IV, line 11d. S	(b) Book value
(1) (2)			, Part IV, line 11d. S	
(2) (3)			, Part IV, line 11d. S	
(2) (3) (4)			, Part IV, line 11d. S	
(2) (3) (4) (5)			, Part IV, line 11d. S	
(2) (3) (4) (5) (6)			, Part IV, line 11d. S	
(2) (3) (4) (5) (6) (7) (8)			, Part IV, line 11d. S	
(2) (3) (4) (5) (6) (7) (8) (9)			, Part IV, line 11d. S	
(2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) D	escription		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C	(a) D	escription		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) D	( <i>B</i> ) line 15.)		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1.	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	( <i>B</i> ) line 15.)		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1. (1) Fed	(a) D (a) D Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed (2)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1. (1) Fed	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1. (1) Fed (2) (3) (4) (5)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X (1) Fed (2) (3) (4) (5) (6)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X (1) Fed (2) (3) (4) (5) (6) (7)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X (1) Fed (2) (3) (4) (5) (6) (7) (8)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X (1) Fed (2) (3) (4) (5) (6) (7)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X (1) Fed (2) (3) (4) (5) (6) (7) (8) (9)	Column (b) must equal Form 990, Part X, column Other Liabilities. Complete if the organization answered 'Yes' on (a) Desc	escription ( <i>B</i> ) line 15.) Form 990, Part IV, line 11		(b) Book value

Schedule D (Form 990) 2019 American Council on Germany, Inc.	13-	-1889074	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With		turn.	
Complete if the organization answered 'Yes' on Form 990, Part IV,	line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1 3	,274,502.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments 2a	1,201,431.		
b Donated services and use of facilities 2b	47,877.		
c Recoveries of prior year grants 2c			
c Recoveries of prior year grants       2c         d Other (Describe in Part XIII.)       See Part XIII         2d	-2,099.		
e Add lines <b>2a</b> through <b>2d</b>		<b>2e</b> 1	,247,209.
3 Subtract line 2e from line 1			,027,293.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			· · ·
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	25,266.		
b Other (Describe in Part XIII.)			
<b>c</b> Add lines <b>4a</b> and <b>4b</b>		4 c	25,266.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5 2	,052,559.
Part XII Reconciliation of Expenses per Audited Financial Statements Wit	h Expenses per F	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV,	line 12a.		
1 Total expenses and losses per audited financial statements		1 2	,075,297.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			, ,
a Donated services and use of facilities 2a	47,877.		
b Prior year adjustments			
c Other losses. 2c			
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d.		2 e	47.877
3 Subtract line 2e from line 1		3 2	47,877.
<b>4</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:			/01//1201
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	25,266.		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b.		4 c	25,266.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5 2	,052,686.
Part XIII Supplemental Information.			

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

### Part X - FASB ASC 740 Footnote

ACG does not believe its financial statements include any material, uncertain tax

positions. Tax filings for periods ending December 31, 2016 and later are subject to

examination by applicable taxing authorities.

#### Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990

Loss on currency	exchange	\$ -2,099.
_	Total	\$ -2,099.

BAA

Schedule D (Form 990) 2019

SCHEDULE	F
(Form 990)	

(10)

(11)

(12)

(13)

(14)

(15)

(16)

c Totals (add lines 3a and 3b).

SCHEDULE F			es Outside the Unite		OMB No. 1545-0047
(Form 990)	e 14b, 15, or 16.	2019			
Department of the Treasury Internal Revenue Service	► Go to www.i	rs.gov/Form990	for instructions and the latest	information.	Open to Public Inspection
Name of the organization				Employer identif	
American Council or Part I General Informa	<u>Germany</u> , Ir	<u>nc.</u> es Outside th	e United States. Comple	13-18890	74 n answered 'Yes'
on Form 990, Pa	art IV, line 14b.		e onned States. comple		
1 For grantmakers. Does t the grantees' eligibility fo	he organization ma or the grants or assi	intain records to stance, and the s	substantiate the amount of its selection criteria used to award	grants and other assista I the grants or assistanc	nce, e?XYes No
2 For grantmakers. Describe United States. Part		zation's procedure	s for monitoring the use of its gra	ants and other assistance	outside the
3 Activities per Region. (Th	ne following Part I, I	line 3 table can b	e duplicated if additional space	e is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region Pt V
(1) Europe			Grantmaking	Fellowships	42,295.
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17) 3 a Subtotal					42,295.
<b>b</b> Total from continuation sheets to Part I					42,293.

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

0

0

13-1889074

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Er	nter total number of recipient organizati e grantee or counsel has provided a	ons listed above that a section 501(c)(3) equ	re recognized as cha uivalency letter	rities by the forei	gn country, recognize	ed as tax-exempt b	y the IRS, or for whi	ch	0
	nter total number of other organization							►	0 (Form 990) 2019

(18) BAA

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1) Fellowships	Europe	9	42,295.	Check/WT			
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
<u>(10)</u>							
(11)							
(12)							
<u>(13)</u>							
<u>(14)</u>							
(15)							
<u>(16)</u>							
<u>(17)</u>							

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2019

13-1889074

		American Council	on German	ny, Inc.	1	3-1889074	Page <b>4</b>
Part IV	Foreign Forms	5					
		S. transferor of property to a tuined to file Form 926, Retu					

Corporation (see Instructions for Form 926)	Yes	X No
Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471).	Yes	X No
Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	Yes	X No
Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	Yes	X No
Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

TEEA3505L 06/28/19

Schedule F (Form 990) 2019

#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

#### Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

The ACG awards fellowships and organizes leadership missions which are designed to enable German and American professionals to travel across the Atlantic to meet with their counterparts. In addition to travel expenses, a stipend in the form of per diem (\$200) is provided in advance of each participant's trip to cover meals and lodging. Payment of the stipend is not made until the itinerary has been approved. A portion of the per diem is withheld until the participant submits a substantive report upon the completion of the trip. Occasionally additional payments may be made upon the participant's return for unanticipated domestic travel. Documentation and rationale for these additional expenses is required.

#### Part I, Line 3f - Investments & Expenditures Per Region

Roughly 10 to 15 Germans travel to the United States each year under the auspices of the ACG's fellowship programs and leadership missions. They meet with professional counterparts, conduct research, and observe best practices, gaining a deeper understanding about how common issues are addressed on the other side of the Atlantic and forging lasting connections with their counterparts and alumni.

13-1889074

SCHEDULE G				, ,	undraising or Gami			OMB No. 1545-0047
(Form 990 or 990-EZ)	Comple	te if the organizati organization	n entered m	ore than \$15	orm 990, Part IV, line 17, 18 ,000 on Form 990-EZ, line 6a	, or 19, or a.	if the	2019
Department of the Treasury Internal Revenue Service	► G	o to <i>www.irs.g</i> e			or Form 990-EZ. ructions and the latest	informa		Open to Public Inspection
Name of the organization American Counci	il on Germa	anv. Inc.					Employer identifica 13-188907	
Fundraising A		te if the organiza	ation answ	ered 'Yes' o	on Form 990, Part IV, line			
					owing activities. Check	all that	apply.	
a Mail solicitatio				e		-	-	
<b>b</b> Internet and en	mail solicitations tions	5		f	Solicitation of gove		grants	
d In-person solic				9		,		
2 a Did the organization	n have a written or n Form 990 Par	r oral agreement	with any i	individual (i	including officers, directo rofessional fundraising	rs, truste	es, or key 2	Yes X No
	highest paid ind	lividuals or enti	ties (fund		ursuant to agreements i			
(i) Name and address or entity (fundra		(ii) Activity	have custo	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or r fundra	nount paid to etained by) hiser listed in blumn <b>(i)</b>	<b>(vi)</b> Amount paid to (or retained by) organization
			Yes	No				
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total		1	•	•				
Total           3         List all states in whi or licensing.					ontributions or has been	notified i	t is exempt from	registration
	·							

13-1889074 Page 2

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		List events with gross receipts gro				
R			(a) Event #1 Awards Dinner (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add column (a) through column (c))
Ë			(event type)	(event type)	(total humber)	
REVENUE	1	Gross receipts	649,495.			649,495.
E	2	Less: Contributions	546,532.			546,532.
	3	Gross income (line 1 minus line 2)	102,963.			102,963.
	4	Cash prizes.				
	5	Noncash prizes				
D I R	6	Rent/facility costs	102,963.			102,963.
R E C T	7	Food and beverages				
E X P	8	Entertainment				
EXPENSES	9	Other direct expenses				
5	10 11	Direct expense summary. Add lines 4 thr Net income summary. Subtract line 10 fr				
Par		<b>Gaming.</b> Complete if the organiza				
	• •••	\$15,000 on Form 990-EZ, line 6a.				
REVENUE			<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
N U E	1	Gross revenue				
F	2	Cash prizes				
EXPENSES	3	Noncash prizes				
CS TE S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes <sup>%</sup> No	Yes <sup>%</sup> No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)			
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d)		
	ls th	er the state(s) in which the organization co ne organization licensed to conduct gaming lo,' explain:	g activities in each of th			
		e any of the organization's gaming license 'es,' explain:		or terminated during th		

Schedule G (Form 990 or 990-EZ) 2019

Schedule G (Form 990 or 990-EZ) 2019 American Council on Germany, Inc.	3-1889074	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:	1 1	
a The organization's facility.		010
<b>b</b> An outside facility.		80
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	:	
Name ►		
Address ►		
<ul> <li>15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue b If 'Yes,' enter the amount of gaming revenue received by the organization </li> <li>\$ and the of gaming revenue retained by the third party </li> <li>\$ c If 'Yes,' enter name and address of the third party:</li> </ul>	e? <b>Yes</b> le amount	No
Name ►		
Address ►		   
16 Gaming manager information:		
Name ►		
Gaming manager compensation ► \$		
Description of services provided ►		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	the	—
organization's own exempt activities during the tax year ► \$		<u> </u>
<b>Part IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, col and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any information. See instructions.	umns (III) and ( y additional	v);

SCHEDULE I (Form 990)		Grants and Ot	her Assistance	to Organization	ıs,	ŀ	OMB No. 1545-0047					
(Form 550)			nd Individuals i			2019						
Department of the Treasury Internal Revenue Service	Com		ion answered 'Yes' on F ► Attach to Form 99 irs.gov/Form990 for the	90.	21 or 22.		Open to Public Inspection					
Name of the organization						Employer identified	cation number					
American Council on Ge		-				13-188907	74					
Part I General Information					· · · · ·							
1 Does the organization maintain the selection criteria used to	award the grants or assist	ance?			or assistance, and		X Yes No					
2 Describe in Part IV the organiza												
Part II Grants and Other A Form 990, Part IV, I	ine 21, for any recipie											
<b>1</b> (a) Name and address of organizat or government	tion (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
(1)												
(2)												
(3)												
<u>(4)</u>												
(5)												
(6)												
(7)												
(8)												
2 Enter total number of section						·····	0					
3 Enter total number of other o	8			TEEA3901L	07/10/19	Schedu	0 le I (Form 990) (2019)					

13-1889074

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Fellowships	6	26,000.			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. F	Provide the information	n required in Part I	, line 2; Part III, co	lumn (b); and any othe	er additional information.

#### Part IV - Additional Supplemental Information

The ACG awards fellowships and organizes leadership missions which are designed to enable German and American professionals to travel across the Atlantic to meet with their counterparts. In addition to travel expenses, a stipend in the form of per diem (\$200) is provided in advance of each participant's trip to cover meals and lodging. Payment of the stipend is not made until the itinerary has been approved. A portion of the per diem is withheld until the participant submits a substantive report upon the completion of the trip. Occasionally additional payments may be made upon the participant's return for unanticipated domestic travel. Documentation and rationale for these additional expenses is required.

SCH	IEDULE J	

Т

# ompensation Information

OMB No. 1545-0047

L

No

Х Х

Х Х

Х

Х

Х

Х

SCHEDULE J	Compo					
(Form 990)	For certain Officers, Directors, Trustee	es, Key Employees, and Highest Compensate		20	19	
		ion answered 'Yes' on Form 990, Part IV, line 2 <sup>-</sup> Attach to Form 990.	3.	Open to	Dubl	
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.					
Name of the organization			Employer identificati	on number		
American Cound	cil on Germany, Inc.		13-1889074			
Part I Question	s Regarding Compensation					
					Yes	
<b>1 a</b> Check the approp VII, Section A, li	riate box(es) if the organization provided an ine 1a. Complete Part III to provide any r	ny of the following to or for a person listed on F relevant information regarding these items.	Form 990, Part			
First-class o	r charter travel	Housing allowance or residence for	or personal use			
Travel for co	ompanions	Payments for business use of pers	sonal residence			
Tax indemni	fication and gross-up payments	Health or social club dues or initia	tion fees			
Discretionar	y spending account	Personal services (such as maid,	chauffeur, chef)			
<b>b</b> If any of the boxe	s on line 1a are checked, did the organization	on follow a written policy regarding payment o	ſ			
		bed above? If 'No,' complete Part III to exp		1b		
<b>0</b> D'14						
		ursing or allowing expenses incurred by all tor, regarding the items checked on line 1a		2		
3 Indicate which, if Executive Direct	-	to establish the compensation of the organizat				
X Compensati	on committee	X Written employment contract				
	compensation consultant	X Compensation survey or study				
X Form 990 of	other organizations	X Approval by the board or compens	sation committee			
organization or a	a related organization:	VII, Section A, line 1a, with respect to the				
		nent?				
		nonqualified retirement plan?				
		the applicable amounts for each item in Pa		···· 4c		
Only section 50	1(c)(3), 501(c)(4), and 501(c)(29) organiza	ations must complete lines 5-9.				
contingent on th	e revenues of:	did the organization pay or accrue any compe				
-						
				5b		
	or 5b, describe in Part III.					
6 For persons listed	on Form 990, Part VII, Section A, line 1a,	did the organization pay or accrue any compet	nsation			

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III..... 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)? 8 If 'Yes,' describe in Part II. If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 9

a The organization?.....

**b** Any related organization?

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

contingent on the net earnings of:

If 'Yes' on line 6a or 6b, describe in Part III.

9 Schedule J (Form 990) 2019

6 a

6 b

7

8

#### 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.

(A) Name and Title		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Retirement	(D) Nontavahla	(E) Total of	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i)	<u>138,733.</u>	0.	0.	<u>5,600</u> .	12,090.	156,423.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	<u>294,244.</u>	45,000.	0.	<u>    11,200.</u>	<u>    15,747.</u>	<u> </u>	<u> </u>
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	<u>133,333.</u>	2,500.	0.	<u>5,500</u> .	<u>    12,039.</u>	<u>   153,372.</u>	<u> </u>
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)						+	
	(ii)							
	(i)						+	
	(ii)							
	(i)						+	
	(ii)							
	(i)						+	
	(ii)							
	(i)						+	
	(ii)							
	(i)						+	
	(ii) (i)							
	(i)						+	·
	(i)							
	(ii) – –						+	·
	(i)							
	(ii)		+				+	
	(i)							
	(ii) – -						+	
	(i)							
	(ii)		+		+		+	·
	(i)				<u> </u>			
	(ii) – –		+		+		+	<b> </b>
	(i)							
	(ii)		+		+		+	
BAA			TEEA4102L 8/2/1	9	1	1	Schedule	J (Form 990) 2019

13-1889074

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

#### American Council on Germany, Inc.

Employer identification number

#### Form 990, Part III, Line 1 - Organization Mission

The American Council on Germany (ACG) is an independent, nonpartisan nonprofit organization that was founded in 1952 to strengthen German-American relations. Today, the ACG works across generations to provide a deeper, more nuanced understanding about Germany, Europe, and the importance of the transatlantic partnership. Through a range of programs and activities, the ACG addresses the most pressing economic, political, and social challenges of the day to ensure better mutual understanding.

#### Form 990, Part III, Line 4a - Program Service Accomplishments

#### CONFERENCES AND OTHER OUTREACH

The ACG regularly organizes policy conferences to bring together policymakers, business leaders, journalists, academics, and analysts to share their expertise and exchange perspectives on issues of contemporary concern. These conferences promote transatlantic understanding and strive to facilitate more effective policy coordination. The conferences have both taken a wide view of transatlantic relations and have focused on specific issues ranging from smart cities or health care to NATO's role and Russia or the global financial crisis. Following the conferences, participants often look to create practical policy solutions to complex problems.

In addition to events and activities, the ACG engages in outreach to its members and the community at large through traditional and new media to keep them informed about the myriad of issues affecting the German-American relationship and transatlantic affairs. In addition to a series of publications, the ACG produces a weekly compilation of opinion pieces and analysis as well as a monthly newsletter. Name of the organization

American Council on Germany, Inc.

Employer identification number 13-1889074

#### Form 990, Part III, Line 4b - Program Service Accomplishments

#### YOUNG LEADERS CONFERENCES

The American Council on Germany reaches out to the next generation of decision-makers and opinion leaders from academia, business, government, media, and the non-profit sector by organizing conferences to familiarize them with key transatlantic issues. These conferences also enable these representatives from the "successor generation" to establish a network of contacts at home and on the other side of the Atlantic. The main goals of the ACG's Young Leaders programs are to provide a forum for bright, informed, and sophisticated young professionals to discuss major issues in an informal setting; to encourage participants to deal frankly with the issues on their own terms; to explore and debate their differences and common interests; and to create an enduring community of leaders who are engaged and committed to strengthening the transatlantic partnership.

The annual week-long American-German Young Leaders Conferences bring together up to 50 Germans and Americans. The relationships formed during the Young Leaders' brief time together serve as a valuable investment in the transatlantic relationship. Alumni have gone on to become high-ranking members of the U.S. and German governments; Congress and the Bundestag; the European Parliament; local city governments; military leaders; and editorial writers.

The ACG continues to remain in touch with the alumni from its Young Leaders programs by offering substantive events and networking opportunities.

#### Form 990, Part III, Line 4c - Program Service Accomplishments

#### POLICY DISCUSSIONS

The American Council on Germany (ACG) is the leading U.S.-based forum for strengthening German-American relations. It delivers a deep and nuanced understanding of why Germany matters to the United States, because the only way to

#### Form 990, Part III, Line 4c - Program Service Accomplishments

understand contemporary Europe is to understand Germany's role within Europe and around the world. And, the only way to understand contemporary Germany is to put it in a European context.

The ACG examines German-American relations on three levels: the bilateral relationship, the ties between Europe and the United States, and how the transatlantic partnership can meet global challenges. In addition to German and U.S. domestic politics and U.S. and European foreign policy, the ACG covers a wide swath of economic, political, and social issues of common concern on both sides of the Atlantic. By examining the issues facing Europe and the United States, the ACG is able to provide insights and analysis of policy choices on both sides of the Atlantic.

Through a range of events and activities in New York City and at its Eric M. Warburg Chapters across the country, the ACG provides businesspeople, policymakers, journalists, academics, and tomorrow's leaders with insights into German and European affairs. The ACG hosts between 40 and 50 events in New York each year featuring prominent government officials, analysts, and other influential figures in larger, lecture-style events as well as smaller, high-level briefings. The ACG co-sponsors a regular series on the Transatlantic Global Agenda and offers a Political Salon series of events tailored to the interests of younger and mid-career professionals. In addition, the Council hosts special lectures as part of its McCloy Lecture Series, Arthur F. Burns Memorial Lecture, and the Garrick Utley Lecture Series on Global Media Issues.

In 1992, the ACG launched its national outreach through a network of Eric M. Warburg

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization	Employer identification number
American Council on Germany, Inc.	13-1889074

#### Form 990, Part III, Line 4c - Program Service Accomplishments

Chapters. There are Chapters in 21 cities: Atlanta, Boca Raton, Boston, Charlotte, Chicago, Dallas, Denver, Indianapolis, Madison, Minneapolis/St. Paul, Nashville, Philadelphia, Phoenix, Pittsburgh, St. Louis, San Diego, San Francisco, Seattle, and greater Washington DC. Through its Chapters the ACG encourages discussion and the exchange of ideas concerning Germany and European affairs in communities across the country. The ACG has made a concerted effort to engage students and faculty at local high schools and universities in many Chapter cities. Government officials, politicians, business leaders, journalists, academics, and policy analysts have been among those to speak at Chapter events.

#### Form 990, Part III, Line 4d - Other Program Services Description

#### FELLOWSHIPS AND LEADERSHIP MISSIONS

Since 1976, the ACG has given more than 1,100 American and German journalists, scholars, and other mid-career professionals in a variety of fields the opportunity to travel across the Atlantic and broaden their personal and professional horizons under the auspices of its fellowship programs. Today, the ACG offers both fellowships and leadership missions to enable professionals to conduct independent research, explore best practices, and build their professional networks. Participants in these hands-on and experiential programs gain a deeper understanding of how issues are approached on the other side of the Atlantic and forge lasting connections with their transatlantic counterparts and fellowship alumni.

The ACG offers McCloy Fellowship on Global Trends to help practitioners on both sides of the Atlantic come to terms with common challenges. McCloy Fellowships are available to individuals from nonprofits, think tanks, law, journalism, the public sector, and cultural organizations in relatively early stages of their careers. The Anna-Maria and Stephen M. Kellen Fellowships allow Berlin-based journalists to

#### Form 990, Part III, Line 4d - Other Program Services Description

conduct research in the United States. The ACG also supports the work of promising American scholars who are studying important elements of the transatlantic relationship from both historical and contemporary standpoints through the Dr. Guido Goldman Fellowship for the Study of German and European Economic and International Affairs and the Dr. Richard M. Hunt Fellowship for the Study of German Politics, Society, and Culture. The fellowships also represent a long-lasting investment in the future of the transatlantic relationship.

For more than 30 years, the American Council on Germany has arranged in-depth fact-finding trips for practitioners and experts to travel across the Atlantic to meet with their professional counterparts and exchange best practices. Through Study Tours and Leadership Missions, the ACG has given groups of professionals the opportunity to engage in dialogue with officials, business leaders, journalists, and other experts to gain a better understanding of the political, economic, social, and environmental landscape on either side of the Atlantic. Launched in 2016, the ACG's current Leadership Missions focus on urban affairs and sustainability as well as agriculture and food security.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

Management reviewed a draft of the form 990 with the audit/finance committee and provided edits to the tax preparer. After this process was performed, the form 990 was sent to the full board of directors prior to being filed with the IRS.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The organization has a board-approved conflicts of interest policy. Board members must fill out annual declarations stating they had no conflicts or identifying the nature of their interested party transactions.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Board Chair and the Vice Chair and Treasurer conduct an annual review and evaluation of the President's performance. This assessment is discussed with the Executive Committee. The Vice Chair and Treasurer conducts an assessment of comparative salaries. The Executive Committee and the full Board approve the annual budget - which includes raises and/or bonuses. In the process, the Board reviews all officer salaries on an annual basis.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The ACG conducts an annual review with all employees and the President makes recommendations to the Executive Committee for raises and bonuses. The Executive Committee and the full Board approve the annual budget - which includes raises and/or bonuses. In this process, the Board reviews all salaries on an annual basis.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Organizations governing documents are available upon request.

#### Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Loss on currency	exchange	\$ -2,099.
_	Total	\$ -2,099.