Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see the separate instructions. DAA

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2023 calendar year, or tax year beginning 10/01/23, and ending 09/30/24

OMB No. 1545-0047 2023 Open to Public Inspection

Form **990** (2023)

В	Check if a	oplicable: C Name of organization	D Em	ployer identification number
\prod_{i}	Address c	hange AMERICAN CANOE ASSOCIATION, INC.		
Ē.	Name cha	Doing business as		-0619411
=		Number and street (or P.O. box if mail is not delivered to street address)		ephone number 0-907-4460
_	Initial retur Final retur		34	0-907-4460
	terminated		- 0	2 617 373
\prod_{i}	Amended		G Gro	ss receipts\$ 2,617,272
Ħ.	Application		H(a) Is this a group retu	rn for subordinates Yes X No
ш	тррпоцион	Decii Spiimaii	H(b) Are all subordinate	
		520 William Street, Suite D	1 ''	a list. See instructions
		Fredericksburg VA 22401	- 110, audon	a list. God morastions
		pt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	+	
	Website:		H(c) Group exemption	
			Year of formation: 1927	M State of legal domicile: VA
	art I	Summary		
ø	1 E	riefly describe the organization's mission or most significant activities:		
ŭ		We build inclusive paddling communities, support exce		
r		safety and stewardship through paddlesports education	n, competition	on, and
Governance		recreation.		
		Sheck this box $oxed{oxed}$ if the organization discontinued its operations or disposed of more than 2	25% of its net assets.	
∞		lumber of voting members of the governing body (Part VI, line 1a)		3 12
ies	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4 12
Activities	5 T	otal number of individuals employed in calendar year 2023 (Part V, line 2a)		5 19
Act		otal number of volunteers (estimate if necessary)		6 1000
	7a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12		7a <u> </u>
		let unrelated business taxable income from Form 990-T, Part I, line 11		7b 0
		-	Prior Year	Current Year
ē		Contributions and grants (Part VIII, line 1h)	742,00	
en		rogram service revenue (Part VIII, line 2g)	1,380,69	
Revenue	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	3,8	
ш.	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,58	
		otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,140,15	
	13 🤄	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	17,60	31,093
		enefits paid to or for members (Part IX, column (A), line 4)		0
S	15 8	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	648,63	39 775 , 326
Expenses	16a F	rofessional fundraising fees (Part IX, column (A), line 11e)		0
ф	b T	otal fundraising expenses (Part IX, column (D), line 25)		
ш	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,445,40	1,538,383
	18 T	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,111,65	2,344,802
	19 F	Levenue less expenses. Subtract line 18 from line 12	28,50	266,836
Net Assets or Fund Balances			Beginning of Current Ye	
Sset	20 T	otal assets (Part X, line 16)	3,195,13	
A As	21 T	otal liabilities (Part X, line 26)	217,14	
<u>≅</u> ∄	22 N	let assets or fund balances. Subtract line 21 from line 20	2,977,99	96 3,270,266
P	art II	Signature Block		
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and st		
tru	ue, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepared	parer has any knowledo	ge.
Sig	gn	Signature of officer		Date
He		Beth Spilman EXECUTIVE	DIRECTOR	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date C	Check if PTIN
Paid	d	Lane S.W. McMillen Lane S.W. McMillen		elf-employed P01426981
Pre	parer	Firm's name McMillen & Company, PLLC	Firm's EI	02 4556512
Use	Only	2812 W. Colorado Ave., Suite 200	7 11113 E1	
	-	Firm's address Colorado Springs, CO 80904	Phone no	719-922-0064
May	the IR	S discuss this return with the preparer shown above? See instructions	I Frione III	X Yes No

	E ASSOCIATION, INC.	84-0619411	Page 2
0	n Service Accomplishments		
Check it Schedule O c	ontains a response or note to any	line in this Part III	
1 Briefly describe the organization's mis	sion:		_
	ION PROMOTING ALL ASI	PECTS OF PADDLING S	SAFETY.
	ON, STEWARDSHIP, AND		
2 Did the organization undertake any sig	inificant program services during the year v	which were not listed on the	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services			
3 Did the organization cease conducting	, or make significant changes in how it cor	nducts, any program	
•			Yes X No
If "Yes," describe these changes on S			103 22 110
_			mad by
	ervice accomplishments for each of its three		
	c)(4) organizations are required to report the	ne amount of grants and allocations to	others,
the total expenses, and revenue, if an	y, for each program service reported.		
4a (Code:) (Expenses \$	639,303 including grants of\$	20,988) (Revenue 9	729,134
	We support our 15,000		
AFFILIATED TOTTOKI.	we support our is,out	THATVIAUAT MEMBET	did 500
	organizational member		
	ce, organizing events		
stewarding and publi	c policy efforts on :	issues that paddler	s care about.
•			
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •			
4b (Code:) (Expenses \$	469,819 including grants of\$) (Revenue \$	121,740
SAFFTY FOICATION AND	INSTRUCTION: ACA IS	PECOCNIZED APOIND	
	PADDLING EDUCATION A		
OF PADDLERS FROM REC	REATIONAL THROUGH MAS	STERY LEVEL. OUR P	JUNEDAME BELD
			ROGRAMS HELP
ADVANCE THE SKILLS N			CKING, CANOEING,
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		
_	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_		v
7	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		
8	complete Schodule 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	•		
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt pagetiation conjugacy If "Vec." complete Schodule D. Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	3		
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-10		
••	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schodule D. Part VI	11a	х	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			v
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	45		v
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		v
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	17		Х
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		
19	If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	~		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
	\sim			<u> </u>

	it iv Checklist of Required Schedules (Continued)			
22	Did the ergonization report more than \$5,000 of grants or other assistance to or for demostic individuals on		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22	_	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes" complete Schedule I	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	051-		v
26	If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		X
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			l
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		v
31	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
5 2	complete Schodule 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? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			l
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			3.5
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	38	x	
P	19? Note: All Form 990 filers are required to complete Schedule O. Art V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>	Λ	
	Check if Schedule O contains a response or note to any line in this Part V			
	in the second se		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	1

	990 (2023) AMERICAN CANOE ASSOCIATION, INC. 84-0619411			age 5
	rt 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			
L	Statements, filed for the calendar year ending with or within the year covered by this return 2a 19	26	X	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		v
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b 40	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Vee " enter the page of the foreign equation	4a		
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	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).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
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			
9	sponsoring organization have excess business holdings at any time during the year?	8		
a	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	35		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	44.		37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		X
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		x
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	10		Λ
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.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes" complete Form 6069			

Page	6
raut	: 0

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with anv other officer, director, trustee, or key employee? Х 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a 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? X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 Х 13 Did the organization have a written document retention and destruction policy? X 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed VA, NC, CA, CO, PA, NJ, NY, WA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records. The Organization 520 William Street, Suite D

540-907-4460

VA 22401

Fredericksburg

Form 990 (2	2023) AMERICAN CANOE ASSOCIATION, INC. 84-0619411	Page '
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	Employees, and
	Independent Contractors	_
	Check if Schedule O contains a response or note to any line in this Part VII	📙
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	_
-		

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the or	rganization nor	any i	relate	ed o	rgar	ization o	compensated any current	officer, director, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	k, unle	Pos heck ss pe	more rson i	than one s both an or/trustee) Former Highest compensated	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DAVID LUMIAN			Ф			Ited			
CHAIR	3.00 0.00	x		Х			0	0	0
(2) BEVERLY COSSLET									
VICE CHAIR	2.00 0.00	x		x			0	0	0
(3) SUZANNE BRITT	0.00	<u>^</u>					0	0	
	2.00								
TREASURER	0.00	X		X			0	0	0
(4) ROBERT KAUFFMAN									
SECRETARY	2.00 0.00	x		x			0	o	0
(5) RISA SHIMODA	0.00			Λ			-		
(3/11221 21121221	2.00								
DIRECTOR	0.00	X					0	0	0
(6) HUNTER BRANSTET									
	2.00								•
DIRECTOR (7) ANNA LEVESQUE	0.00	X					0	0	0
(/)ANNA LEVESQUE	2.00								
DIRECTOR	0.00	$ \mathbf{x} $					0	0	0
(8) ZACH LOKKEN									
	2.00							_	
DIRECTOR	0.00	X					0	0	0
(9) THOM CROCKETT	2.00								
DIRECTOR	0.00	x					0	0	0
(10) JACK WALLACE		T							
	2.00								
DIRECTOR	0.00	X					0	0	0
(11) KENNY KASPERBAU									
DIRECTOR	2.00 0.00	x					0	o	0
	0.00	41		<u> </u>	<u> </u>			<u> </u>	000

Pa	rt VII Section A. Officer	s, Directors, Tr	ust	ees,	Key	Em	ploy	ees/	s, and Highest Compens	ated Employees (continu	ıed)			
	(A) Name and title	(B) Average hours	box	x, unle	ss pe	ition more rson i	than o s both or/trust	an	(D) Reportable compensation	(E) Reportable compensation		(F) Estimated amount of other compensation		
	Publ	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	org	from the ganization ed organiz	and	
(12) (12)	2) ANDREA WHITE RECTOR	2.00 0.00	х						0	0			0	
(13) EXE	B) Beth Spilman ECUTIVE DIRECTOR	40.00			х				115,000	0			755	
(14)														
(15)														
(16)														
(17)														
(18)														
(19)														
1b	Subtotal								115,000				755	
d 	Total (add lines 1b and 1c) Total number of individuals (i	ncluding but not		ited					115,000 cove) who received more				755	
3	Did the organization list any temployee on line 1a? If "Yes	former officer, o	lirec edui	tor, t	for s	uch	indiv	ridua	al			3	res No	
4 5	For any individual listed on line organization and related organization and related organization	anizations greate	er th	nan S	\$150	,000)? If '	"Yes	s," complete Schedule J fo	or such		4	х	
	for services rendered to the	organization? If							,		<u></u>	5	X	
Sect 1	ion B. Independent Contrac Complete this table for your compensation from the organ	five highest com									tax year			
	Name and	(A) I business address							Descrip	(B) tion of services		Comp	(C) pensation	
2	Total number of independent received more than \$100,000								those listed above) who	0				

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D) Revenue excluded (B) Related or exempt function revenue Total revenue from tax under sections 512-514 business revenue , Gifts, Grants milar Amounts 1a Federated campaigns **b** Membership dues 1b **c** Fundraising events 1c **d** Related organizations 1d Government grants (contributions) Contributions, and Other Sim 358,537 1e All other contributions, gifts, grants, 1f 623,284 and similar amounts not included above g Noncash contributions included in 30,000 lines 1a-1f 981,821 h Total. Add lines 1a-1f Business Code 711300 850,874 850,874 Program Service Revenue 2a Membership Dues 711300 509,805 509,805 Other Fees 711300 53,199 53,199 Division Revenue 711300 11,480 11,480 Sanctioning f All other program service revenue 1,425,358 g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 2,346 2,346 Income from investment of tax-exempt bond proceeds 725 725 Royalties (i) Real (ii) Personal 6a Gross rents 6a 6h **b** Less: rental expenses c Rental inc. or (loss) d Net rental income or (loss) **7a** Gross amount from (i) Securities (ii) Other sales of assets 3,689 other than inventory Revenue **b** Less: cost or other 7b basis and sales exps. 3,689 c Gain or (loss) 7с Other d Net gain or (loss) 3,689 3,689 **8a** Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 15,811 10a 5,634 **b** Less: cost of goods sold 10b 10,177 10,177 c Net income or (loss) from sales of inventory Business Code scellaneous Revenue 713990 188,338 188,338 Gain on insurance claim 11a -816 -816 b Other Income **d** All other revenue **Total.** Add lines 11a–11d 187,522 2,611,638 Total revenue. See instructions 1,623,057 6,760 Part IX Statement of Functional Expenses

	ion 501(c)(2) and 501(c)(4) organizations must	•	other ergenizations must	complete column (A)	
Sect	ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp			complete column (A).	
Do r	not include amounts reported on lines 6b, 7		(B) Program service	(C)	(D) Fundraising
	b, and 10b of Part VIII.	Total expenses	expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	31,093	31,093		Py
2	Grants and other assistance to domestic	32,020	02/000		-
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	115 855	06.016	00 000	
_	trustees, and key employees	115,755	86,816	28,939	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	561,056	A5A 271	106 70E	
7 •	Other salaries and wages Pension plan accruals and contributions (include	301,030	454,271	106,785	
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	47,011	48,446	-1,435	
10	Payroll taxes	51,504	42,671	8,833	
11	Fees for services (nonemployees):	31,301	12,011	0,000	
	Management				
	Legal	385	385		
C	Accounting	13,283		13,283	
d	Lobbying			,	
е	Professional fundraising services. See Part IV, line	7			
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	214,971	200,189	14,782	
12	Advertising and promotion	196,433	196,433		
13	Office expenses	23,368	22,395	973	
14	Information technology	54,785	45,670	9,115	
15	Royalties	20 20	00.055	5 050	
16	Occupancy	29,027	23,075	5,952	
17	Travel	319,817	319,159	658	
18	Payments of travel or entertainment expense	S			
40	for any federal, state, or local public officials	4,749	4,228	521	
19	Conferences, conventions, and meetings	4,/43	4,220	521	
20 21	Payments to affiliates	+			
22	Depreciation, depletion, and amortization	2,019		2,019	
23	Insurance	119,635	119,600	35	
24	Other expenses. Itemize expenses not covered			33	
	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.)				
а	Events	262,799	262,799		
b	Camps and Competitions	92,341	92,341		
С	Equipment	48,088	47,421	667	
d	Credit Card Processing Fe		30,516	9,753	
е	All other expenses	116,414	103,374	13,040	
25	Total functional expenses. Add lines 1 through 24e	2,344,802	2,130,882	213,920	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check her				
	following SOP 98-2 (ASC 958-720)				
DAA					Form 990 (2023)

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing 1,221,571 1,519,264 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 Accounts receivable, net 2,822 37,657 4 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 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 Notes and loans receivable, net 7 Inventories for sale or use 7,456 3,641 8 51,762 9 49,977 **9** Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,728,880 **b** Less: accumulated depreciation 1,659,987 10b 15,618 1,713,262 10c Investments—publicly traded securities 11 Investments—other securities. See Part IV, line 11 157,763 189,072 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 97,592 15 66,745 15 3,195,138 3,583,433 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 <u>110,</u>289 Accounts payable and accrued expenses 55,160 17 17 18 Grants payable _____ 18 64,390 136,133 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 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 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 97,592 66,745 of Schedule D 25 217,142 26 313,167 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 2,666,542 2,971,540 27 298,726 311,454 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check her and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund

Form **990** (2023)

3,270,266

3,583,433

31

32

33

2,977,996

3,195,138

31

32

	n 990 (2023) AMERICAN CANOE ASSOCIATION, INC. 84-0619411		F	age 12
Pa	art XI Reconciliation of Net Assets			_
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)			,638
2	Total expenses (must equal Part IX, column (A), line 25)			,802
3	Revenue less expenses. Subtract line 2 from line 1		266	<u>,836</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2,	977	,996
5	Net unrealized gains (losses) on investments			,434
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B)) 10	3,	270	,266
Pa	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			🔲
			Ye	s 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 on			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	1	2b X	:
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both.			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2	2c X	:
	If the organization changed either its oversight process or selection process during the tax year, explain on			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3	3b	
			Form 9	90 (2023)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Open to Public Inspection

Attach to Form 990 or Form 990-EZ.

Name of the organization

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

Employer identification number

			AMERICAN							4-061				
Pa	art I	Reas	on for Public C	harity	Status.	(All organizat	ions mus	st comp	lete this part.) S	See inst	ructions.			
Γhe	orga	nization is no	t a private foundation	n because	e it is: (Fo	or lines 1 through	12, check	only one	box.)		-			
1	П	A church, co	onvention of churches	s, or asso	ociation of	f churches descri	bed in sec	tion 170	(b)(1)(A)(i).					
2	П	A school des	scribed in section 1	70(b)(1)(A)(ii). (Att	ach Schedule E	(Form 990)).)						
3	П	A hospital or	r a cooperative hosp	ital servic	ce organiz	zation described i	n section	170(b)(1)(A)(iii).					
4	П	-	search organization		_					(iii). Enter	the hospital's r	name,		
	_	city, and star	=		,	·			(// // /	` ,	·	•		
5		•	tion operated for the	benefit o	f a colleg	e or university ow	ned or op	erated by	a governmental ur	nit describe	ed in			
	Ш	=)(b)(1)(A)(iv). (Comp		_	,	•	,	J					
6			ate, or local governm			tal unit described	in sectio	n 170(b)	(1)(A)(v).					
7	П	An organization that normally receives a substantial part of its support from a governmental unit or from the general public												
	ш	described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9	П	An agricultur	ral research organiza	ation desc	cribed in	section 170(b)(1)(A)(ix) op	erated in	conjunction with a	land-grant	college			
	_		or a non-land-grant											
	_	university:												
10	X	Ū	tion that normally red	` ,							•			
		•	activities related to					-	` '					
			gross investment in					`	,	businesse	S			
44			the organization after			-		-						
11	Н	_	tion organized and o	-	-	-	-			ar out tho	nurnagae of			
12	Ш		ion organized and op publicly supported o											
			nes 12a through 12d											
	а		A supporting organiza						-		=			
	_		orted organization(s)				•		• , ,		, gg			
			ng organization. You		_		-							
	b		A supporting organiz		-			vith its su	pported organizatio	n(s), by h	aving			
			r management of the								-			
		organizat	tion(s). You must co	omplete	Part IV, S	Sections A and C) .							
	С		functionally integra							ılly integra	ted with,			
	_		orted organization(s)			_								
	d		non-functionally in											
			ot functionally integra ent (see instructions							d an atten	tiveness			
	•		is box if the organiza	•		•				II Type I	11			
	е		ally integrated, or Typ							ii, Type i	11			
	f		mber of supported of	-		,	11111	J						
	g		following information	-		ted organization(s	s).							
(i)	Name	e of supported	(ii) EIN		(iii) Typ	pe of organization	(iv) Is the	organization	(v) Amount of mor	netary	(vi) Amour	nt of		
.,	org	anization	.,		(describ	ped on lines 1-10		ur governing	support (see		other suppor	rt (see		
					above	(see instructions))		ment?	instructions)		instruction	ns)		
							Yes	No						
(A)														
(B)														
(C)														
(D)														
(E)														
T-4-											I			

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.) Part II

<u>Sec</u>	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1112	he	GUO			У
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc						
13	First 5 years. If the Form 990 is for the	•	second, third, for	ourth, or fifth tax y	ear as a section s	501(c)(3)	
800	organization, check this box and stop he		ntogo				
	tion C. Computation of Public S					144	
14	Public support percentage for 2023 (line			olumn (t))			<u>%</u>
15	Public support percentage from 2022 Sch 33 1/3% support test — 2023. If the org			line 12 and line			<u></u>
16a	box and stop here. The organization qua			nization			
b	33 1/3% support test — 2022. If the org					% or more check	Ц
D	this box and stop here. The organization						
17a	10%-facts-and-circumstances test — 2						Ц
	10% or more, and if the organization me	•					
	Part VI how the organization meets the f				-	-	
				-			
b	10%-facts-and-circumstances test — 2						Ц
	15 is 10% or more, and if the organization	=					
	in Part VI how the organization meets th					-	
	organization			-	-		
18	Private foundation. If the organization of	lid not check a box	 c on line 13, 16a	, 16b, 17a, or 17b	, check this box a	and see	·····
-	instructions						
							A (Form 990) 2023

Part III

Schedule A (Form 990) 2023

MERICAN CANOE ASSOCIATION, INC.
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	, ,		4		,	
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	951,840	684,405	584,491	742,004	981,821	3,944,561
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	744,578	1,287,804	1,488,791	1,402,356	1,628,691	6,552,220
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,696,418	1,972,209	2,073,282	2,144,360	2,610,512	10,496,781
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.)						10,496,781
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	1,696,418	1,972,209	2,073,282	2,144,360	2,610,512	10,496,781
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .	2,326	10,468	3,532	2,127	3,071	21,524
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	2,326	10,468	3,532	2,127	3,071	21,524
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,698,744	1,982,677	2,076,814	2,146,487	2,613,583	10,518,305
14	First 5 years. If the Form 990 is for the	organization's first	, second, third, fo	ourth, or fifth tax y	ear as a section 5	501(c)(3)	
	organization, check this box and stop he						
	tion C. Computation of Public					1 1	
15	Public support percentage for 2023 (line	8, column (f), divid	ded by line 13, co	olumn (f))		15	99.80 %
16	Public support percentage from 2022 Sc					16	99.78 %
	Investment income percentage for 2023			2 13 column (f\)		17	%
17 18 In	envestment income percentage from 2022	(IIIIe 100, Coluitiii Schedule A Part II	(1), aivided by iii ii II line 17	e 13, column (i))		18	
19a		rganization did not	check the box o	n line 14 and line	15 is more than		/0
b	17 is not more than 33 1/3%, check this 33 1/3% support tests — 2022. If the o	box and stop here	e. The organization	on qualifies as a p	publicly supported	organization	
-	line 18 is not more than 33 1/3%, check	-					1
20	Private foundation. If the organization of	-	=	-		_	
			·				A (Form 990) 2023

Schedule A (Form 990) 2023

Supporting Organizations Part IV

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b. Part I. complete Sections A and C. If you checked box 12c. Part I. complete Sections A, D, and E. If you checked box 12d, 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- 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.
- 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)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on 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 line 10b below.
- 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.)

	1 /	
		No
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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.*

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? If "Yes" or "No," provide details in Part VI.

Parent of Supported Organizations. Answer lines 3a and 3b below.

3a

3b

Sched	ule A (Form 990) 2023 AMERICAN CANOE ASSOCIATION	, I	NC. 84-0619	411 Page 6
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting C)rgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov.	20, 1970 (explain in Part	VI). See
	instructions. All other Type III non-functionally integrated supporting organizations	must o	complete Sections A throu	ugh E.
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1) () (/
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection			
	of gross income or for management, conservation, or maintenance of			
	property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
k	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
		2		
3	Acquisition indebtedness applicable to non-exempt-use assets	3		
	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,	4		
5	see instructions). Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	Ť		
•	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally integral		pe III supporting organiza	ation
=	(see instructions).	,	1	

AMERICAN CANOE ASSOCIATION, INC. 84-0619411 Schedule A (Form 990) 2023 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive R (provide details in Part VI). See instructions. 9 Distributable amount for 2022 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 10 (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions Underdistributions** Distributable Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required-explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 **a** From 2018 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

Schedule A (Form 990) 2023

Part VI	III, line 12; Part B, lines 1 and 2 3a, and 3b; Pa	t IV, Section A, li 2; Part IV, Sectio rt_V, line 1; Part `	nes 1, 2, 3b, 3c, n C, line 1; Part V, Section B, line	4b, 4c, 5a, 6, 9a IV, Section D, lin 1e; Part V, Sec	, 9b, 9c, 11a, 11b es 2 and 3; Part l	Part II, line 17a or o, and 11c; Part IV, V, Section E, lines and 8; and Part V, uctions	Section 1c, 2a, 2b,
	inics z, o, and	o. Also complete			Hation: (Occ instr	Journal	
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DAA Schedule A (Form 990) 2023

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

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

OMB No. 1545-0047

2023

Name of the organization

AMERICAN CANOE ASSOCIATION, INC.

Employer identification number

84-0619411

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

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

Schedule B (Form 990) (2023)

	ICAN CANCE ASSOCIATION, INC.	04	-0619411
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space i	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 358,537	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2		\$ 349,504	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
. 3		\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$ 5,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 5	Name, address, and ZIP + 4	Total contributions \$ 131,997	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

AMERICAN CANOE ASSOCIATION, INC.

Employer identification number 84-0619411

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space i	s needed.
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 20,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 10,700	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9		\$ 30,000	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

AMERICAN CANOE ASSOCIATION, INC.

Employer identification number 84-0619411

Part II	Noncash Property (see instructions). Use duplications	ate copies of Part II if addition	al space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
ο .	Travel and training apparel		
9		\$ 30,000	07/31/24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

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

Attach to Form 990.

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

OMB No. 1545-0047

2023
Open to Public Inspection

Employer identification number Name of the organization 84-0619411 AMERICAN CANOE ASSOCIATION, INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included on line 2a 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	edule D (Form 990) 2023 AMERICAN							Page 2
	art III Organizations Maintaini						ets (cc	ontinued)
3	Using the organization's acquisition, acce collection items (check all that apply).	ssion, and other reco	ords, check any of the	e following that m	ake significant us	se of its		
а	Public exhibition	■ d □	Loan or exchange p	rogram				
b	H		Other	-		010		y
С	Preservation for future generations) \ /	
4	Provide a description of the organization's	s collections and exp	lain how they further	the organization's	s exempt purpose	e in Part	, ,	
	XIII.			.				
5	During the year, did the organization solid	cit or receive donation	ns of art, historical tro	easures, or other	similar			
	assets to be sold to raise funds rather that						Yes	s No
Pa	art IV Escrow and Custodial							
	Complete if the organization 990, Part X, line 21.	ion answered "Ye	es" on Form 990	Part IV, line	9, or reported	an amou	ınt on	Form
1a	Is the organization an agent, trustee, cus	todian or other intern	nediary for contribution	ns or other asset	s not			
	included on Forms 000 Dort VO		-				Yes	s \square No
b	If "Yes," explain the arrangement in Part	XIII and complete the						, L
-		and complete and	renerning table.			$\overline{}$	Amount	
С	Beginning balance				10	;		
	Additions during the year							
е	Distributions during the year				16			
f	Ending balance				1f			
2a	Did the organization include an amount o	n Form 990, Part X,	line 21, for escrow o	r custodial accour		_	Yes	s No
	If "Yes," explain the arrangement in Part							—
	art V Endowment Funds		•	•				
	Complete if the organizat	ion answered "Ye	es" on Form 990	Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years ba	ck (d) Three ye	ars back	(e) Four	years back
1a	Beginning of year balance							
	Contributions							
	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
	End of year balance							
2	Provide the estimated percentage of the	current year end bala	nce (line 1g, column	(a)) held as:				
а	Board designated or quasi-endowment	%						
b	Permanent endowment %	ı						
С	Term endowment %							
	The percentages on lines 2a, 2b, and 2c	should equal 100%.						
3a	Are there endowment funds not in the po	ssession of the organ	nization that are held	and administered	I for the		_	
	organization by:							Yes No
	(i) Unrelated organizations?						3a(i)	
	(ii) Related organizations?						3a(ii)	
	If "Yes" on line 3a(ii), are the related orga			₹?			3b	
	Describe in Part XIII the intended uses of		ndowment funds.					
Pa	art VI Land, Buildings, and Ed							
	Complete if the organization							
	Description of property	(a) Cost or other	''		(c) Accumulated		(d) Book v	alue
		(investment)	(oth	·	depreciation			
	Land		1,6	59,221			L,65	9,221
	Buildings							
	Leasehold improvements	I		20 626	4			
	Equipment			32,639	15,61	78 T	1	7,021
	Other		D () (10	(D))			1 (5	- 242
ı ota	I. Add lines 1a through 1e. (Column (d) mu	ıst equal Form 990. I	∽aπ x, iine 10c, colu	rin (B))			T * O / (6,242

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

(8)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))

66,745

	D (Form 990) 2023 AMERICAN CANOE ASSOCIATION,			<u>-061941</u>		Page 4
Part X	·			•	r Retu	rn
	Complete if the organization answered "Yes" on Form 990					0 600 117
	al revenue, gains, and other support per audited financial statements				1	2,698,117
	ounts included on line 1 but not on Form 990, Part VIII, line 12:	الممال		25 424		
a Net	unrealized gains (losses) on investments	2a 2b	n	25,434 61,045		
b Don	ated services and use of facilities	20 2c	/ 	01,045		$\mathcal{O}_{\mathcal{A}}$
C Rec	coveries of prior year grants				-	
a Oth	er (Describe in Part XIII.)	2d			2e	96 470
3 Sub	I lines 2a through 2d				3	86,479 2,611,638
4 Amo	tract line 2e from line 1				3	2,011,030
	estment expenses not included on Form 990, Part VIII, line 7b	4a				
	er (Describe in Part XIII.)				-	
	L Borner Americal Alle				4c	
	al revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	2,611,638
	II Reconciliation of Expenses per Audited Financial State				er Re	
	Complete if the organization answered "Yes" on Form 990					
1 Tota	al expenses and losses per audited financial statements				1	2,405,847
	bunts included on line 1 but not on Form 990, Part IX, line 25:					<u> </u>
a Don	nated services and use of facilities	2a		61,045		
	r year adjustments					
c Oth	er losses	2c				
d Oth	er (Describe in Part XIII.)	2d				
e Add	l lines 2a through 2d				2e	61,045
	tract line 2e from line 1				3	2,344,802
4 Amo	ounts included on Form 990, Part IX, line 25, but not on line 1:					
	estment expenses not included on Form 990, Part VIII, line 7b					
h Oth						
D Cui	er (Describe in Part XIII.)	4b				
c Add	l lines 4a and 4b				4c	
c Add 5 Tota	l lines 4a and 4b al expenses. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 18.</i>)				4c 5	2,344,802
c Add 5 Tota Part X	lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) (III Supplemental Information				5	
c Add 5 Tota Part X Provide the	I lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information be descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV, line	es 1b and	2b; Part V, line	5	
c Add 5 Tota Part X Provide th ; Part XI	I lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information ne descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prove	t IV, line	es 1b and	2b; Part V, line	5	
c Add 5 Tota Part X Provide th ; Part XI	I lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information be descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV, line	es 1b and	2b; Part V, line	5	
c Add 5 Tota Part X Provide th ; Part XI Part	I lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) (III Supplemental Information ne descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par , lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prove C. X - FIN 48 FOOTNOTE	t IV, line	es 1b and additional	2b; Part V, line information.	5 e 4; Par	t X, line
c Add 5 Tota Part X Provide th ; Part XI Part	I lines 4a and 4b al expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Supplemental Information ne descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prove	t IV, line	es 1b and additional	2b; Part V, line information.	5 e 4; Par	t X, line
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Schedule D (Form 990) 202	3 AMER	<u>ICAN</u> C	ANOE	ASSOCIA	ATION,	INC.	84-06194	11	Page 5
Part XIII	Suppleme	ntal Info	rmation (continue	ed)			84-06194		
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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

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

OMB No. 1545-0047

2023

Open To Public Inspection

Name of the organization Employer identification number 84-0619411 AMERICAN CANOE ASSOCIATION, Part I Types of Property (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art 1 Art — Historical treasures 2 Art — Fractional interests 3 Books and publications 4 Clothing and household 5 goods Cars and other vehicles 6 7 Boats and planes Intellectual property 8 Securities — Publicly traded 9 Securities — Closely held stock 10 Securities — Partnership, LLC, 11 or trust interests Securities — Miscellaneous 12 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution — Other Real estate — Residential 15 Real estate — Commercial 16 Real estate — Other 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 Other (**Apparel**) 30,000 X 1 25 26 Other (27 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Х 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

Schedule M (Fo	orm 990) 2023 AME	RICAN CANC	E ASSOCIATION	N, INC.	84-0619411	Page 2
Part II	Supplemental the organization	Information. Pon is reporting in	rovide the information Part I, column (b), the	n required by ne number of	Part I, lines 30b, 32b, contributions, the num	
	or a combinati	on of both. Also	complete this part for	or any addition	al information.	
			Information represents nu		contributors.	opy
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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2023

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public

Name of the organization

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

Inspection Employer identification number

AMERICAN CANOE ASSOCIATION INC. 84-0619411 Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE ACA MEMBERS VOTE FOR THE ELECTION OF BOARD OF DIRECTORS. Form 990, Part VI, Line 7a - Election of Members and Their Rights THE ACA MEMBERS VOTE FOR THE ELECTION OF BOARD OF DIRECTORS. Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Changes to bylaws and some other governance-related documents, sales of ACA-owned property and changes to membership dues structure must be approved by membership. Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 THE 990 WILL BE PROVIDED TO THE BOARD OF DIRECTORS' TREASURER AND FINANCE COMMITTEE AS WELL AS THE ENTIRE BOARD OF DIRECTORS. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy THE ACA HAS AN ANNUAL DISCLOSURE MEETING TO DISCUSS POSSIBLE CONFLICTS INTEREST AND EACH INDIVIDUAL MUST SIGN A DISCLOSURE FORM. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation GOVERING DOCUMENTS ARE POSTED ON OUR PUBLIC WEDISTE AND CAN BE ACCESSED BY ANYONE.