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

OMB No. 1545-0047

2018

Department of the Treasury

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

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

Inspection Internal Revenue Service A For the 2018 calendar year, or tax year beginning Jul 1 . 2018, and ending Jun 30 2019 C Name of organization American Association of Kidney Patients, D Employer identification number Check if applicable: Inc. 11-2306416 Doing business as Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 14440 Bruce B. Downs Blvd (813) 636-8100 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Tampa, FL 33613 G Gross receipts \$ 1,494,253. Amended return Application pending F Name and address of principal officer: H(a) Is this a group return for subordinates? Yes No Diana Clynes, 14440 Bruce B. Downs Blvd, Tampa, FL 33613 H(b) Are all subordinates included? Tyes No If "No," attach a list. (see instructions) × 501(c)(3)) ◀ (insert no.) 4947(a)(1) or 527 Tax-exempt status: 501(c) (Website: ▶ www.aakp.org H(c) Group exemption number ▶ Form of organization: X Corporation Trust Association 1973 M State of legal domicile: FL L Year of formation: Briefly describe the organization's mission or most significant activities: AAKP is dedicated to improving the lives and long-term 1 outcome of kidney patients through education, advocacy, patient Activities & Governance engagement and the fostering of patient communities. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 18 18 Number of independent voting members of the governing body (Part VI, line 1b) 5 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 6 200 Total unrelated business revenue from Part VIII, column (C), line 12 7a 82,732. Net unrelated business taxable income from Form 990-T, line 38 0. **Current Year Prior Year** 1,151,107. 8 Contributions and grants (Part VIII, line 1h) 573,211. Revenue Program service revenue (Part VIII, line 2g) 9 308,067. 337,425. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 48,858. -19,209.12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 930,136 1,469,323. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 338,719. 401,539. Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 593,543. 834,916. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 932,262. 1,236,455. 19 Revenue less expenses. Subtract line 18 from line 12 -2,126. 232,868. Beginning of Current Year End of Year 801,009. 20 Total assets (Part X, line 16) 464,195. 21 Total liabilities (Part X, line 26) 474,406. 578,352. 22 Net assets or fund balances. Subtract line 21 from line 20 -10,211.222,657. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 1.31.20 Sign Signature of officer Here Diana Clynes, Executive Director Type or print name and title Check if Print/Type preparer's name Date reparer's signatur Paid Ellen Fontana self-employed P01327163 Preparer Firm's name ▶ Ellen Fontana CPA LLC Firm's EIN ▶ 45-3841539

X Yes No

33759 Phone no. (727) 431-0354

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address ▶ 2451 Mcmullen Booth Road #309, Clearwater,

Use Only

Part		
	Check if Schedule O contains a response or note to any line in this Part III	🗵
1	Briefly describe the organization's mission:	
	AAKP is dedicated to improving the lives and long-term	
	outcome of kidney patients through education, advocacy, patient	
	engagement and the fostering of patient communities.	
2	Did the organization undertake any significant program services during the year which were not listed	
	prior Form 990 or 990-EZ?	· · · ☐ Yes 🗵 No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any	nroarom
3	services?	. •
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 334,767. including grants of \$ 0.) (Revenue \$	0.)
Tu	Fabry - See schedule O	
	rabiy bee schedule o	
41.	(Code: \Compared Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code Code: \Code Code: \Code Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code: \Code Code: \Code Code: \Code Code: \Code Code: \Code Code: \Code: \Code Code: \Code: \Code Cod	
4b		
	Center for Patient Engagement and Advocacy - See schedule O	
4c	(Code:) (Expenses \$ 123,146. including grants of \$ 0.) (Revenue \$	0.)
	Patient Information and Education - See schedule O	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 235, 965. including grants of \$ 0.) (Revenue \$ 337, 425.)	
4e	Total program service expenses ► 1,024,329.	

Part I	V Checklist of Required Schedules			
			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	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	×	
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		×
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		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
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</i> "Yes," <i>complete Schedule D, Part II</i>	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
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		×
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		×
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		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f	×	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		×
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			
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		×
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		×
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	×	
	If "Yes," complete Schedule G, Part III	19		×
		20a		×
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
	domestic government on Part IX, column (A), line 1? I&:"//@so;"/complete Schedule I, Parts I and II	21		;

Part	Cnecklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		×
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		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	×	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	×	
	REV 05/20/19 PRO	Forr	n 990	(2018)

Part '	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					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment t	ax returr	าร? .	2b	×	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see insti	ructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year			За	×	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in So		o	3b	×	
	At any time during the calendar year, did the organization have an interest in, or a signature or oth		1			
	a financial account in a foreign country (such as a bank account, securities account, or other finan			4a		×
b	If "Yes," enter the name of the foreign country:		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts	: (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax		` '	5a		×
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	-		5b		×
	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 \$100,00		did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		×
	If "Yes," did the organization include with every solicitation an express statement that such					
	gifts were not tax deductible?			6b		
	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and	partly fo	r goods			
-	and services provided to the payor?			7a	×	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	×	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property f					
•	required to file Form 8282?			7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit co	ontract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene			7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization fil			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund m	aintainec	d by the			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related pers	son? .		9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
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.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	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	e O.				
	Enter the amount of reserves the organization is required to maintain by the states in which	140:				
	the organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		4.4		
14a	Did the organization receive any payments for indoor tanning services during the tax year? .			14a		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in S		1	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in					.,
	excess parachute payment(s) during the year?			15		×
	If "Yes," see instructions and file Form 4720, Schedule N.	otoc sest 1		40		
	Is the organization an educational institution subject to the section 4968 excise tax on net inve	stment Ir	ricome?	16		×
	If "Yes," complete Form 4720, Schedule O.					

Part		•			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
Cooti	Check if Schedule O contains a response or note to any line in this Part VI on A. Governing Body and Management			-	<u> </u>
Secu	on A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 18		res	NO
Ia	If there are material differences in voting rights among members of the governing body, or	10 10			
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent .	1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business				
	any other officer, director, trustee, or key employee?		2		×
3	Did the organization delegate control over management duties customarily performed by or	under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets? .	5		×
6	Did the organization have members or stockholders?		6	×	
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		
h	Are any governance decisions of the organization reserved to (or subject to approva		1 a		×
b	stockholders, or persons other than the governing body?		7b		×
8	Did the organization contemporaneously document the meetings held or written actions ur				
	the year by the following:	g			
а	The governing body?		8a	×	
b	Each committee with authority to act on behalf of the governing body?		8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		×
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue Co		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		×
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemple.		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef	-	11a	×	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	×	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the		100	.	
40	describe in Schedule O how this was done		12C	×	
13 14	Did the organization have a written whistleblower policy?		13 14	×	
15	Did the process for determining compensation of the following persons include a review a		14		×
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation	on and decision?			
а	The organization's CEO, Executive Director, or top management official		15a	×	
b	Other officers or key employees of the organization		15b		×
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or sim with a taxable entity during the year?		16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organizatio	n to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps				
	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ► See Part VI				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all the Own website Another's website Donner of the Company of the	at apply.	(Sec	tion 5	501(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.	•	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization	on's books and re	cords	•	
	Diana Clynes, 14440 Bruce B. Downs Blvd, Tampa, FL 33613 (813)				

Form 990 (2018) Page **7**

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

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

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

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

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

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

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

Shook the box in notiner the organization no					C)	<u>'</u>		T ,	,	,
(A)	(B)	,,		Pos				(D)	(E)	(F)
Name and Title	Average	١,٠				than on the second the		Reportable	Reportable	Estimated
	hours per week (list any					or/trust	tee)	compensation from	compensation from related	amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Teri Browne, PhD, MSW, NSW-C	1.00									
Board member	ļ	×						0.	0.	0.
(2) Lisa Garner Board member	1.00	×						0.	0.	0.
(3) Patrick Gee, PhD	1.00									
Board member		×						0.	0.	0.
(4) Suzanne Ruff Board member	1.00	×						0.	0.	0.
(5) Lana Schmidt, MBA Board member	1.00	×						0.	0.	0.
(6) Scott Toner Board member	1.00	×						0.	0.	0.
(7) Brian Hess Board member	1.00	×						0.	0.	0.
(8) Kevin J. Fowler Board member	1.00	×						0.	0.	0.
(9) Douglas S. Johnson, M.D.	1.00									
Board member		×						0.	0.	0.
(10) David "Dave" M. White Board member	1.00	×						0.	0.	0.
(11) Kent Bressler Board member	1.00	×						0.	0.	0.
(12) Paul Conway Board member	1.00	×						0.	0.	0.
(13) Janice Lea, MD, MSC, FASN Board member	1.00	×						0.	0.	0.
(14) James W. Myers III Board member	1.00	×						0.	0.	0.

Part VII Section A. Of	ficers, Directors, Trus	tees, Key E	mplo	yees	s, ar	nd F	lighe	st C	ompensated E	mployees (conti	nued)	
(A) Name an	d title	(B) Average hours per	werage box, unless person is to officer and a director/t						(D) Reportable compensation	(E) Reportable compensation from	Esti amo	(F) imated ount of
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comp fro orga and	other vensation m the nization related nizations
(15) David Rodrique:	Z	1.00	×						0	0		
Board member (16) Richard Knight		2.00							0.	0.		0
President			×		×				0.	0.		0
(17) Daniel L. Abel Vice President		2.00	×		×				0.	0.		0
(18) Edward V. Hicke	∋γ	2.00										
Secretary (19) Jenny Kitsen		2.00	×		×				0.	0.		0
Treasurer		2.00	×		×				0.	0.		0
(20) Diana Clynes Executive Direct		40.00			×				93,795.	0.		0
(21)									33,733.	0.		
(22)												
(23)												
(24)												
(25)												
								•	93,795.	0.		0
c Total from contin d Total (add lines 1	uation sheets to Part b and 1c)	VII, Sectio						>	93,795.	0.		0
2 Total number of in-	dividuals (including bu	t not limited		ose				e) w	· · · · · · · · · · · · · · · · · · ·		00 of	
reportable comper	nsation from the organ	ization ►					0					Yes No
	on list any former of a? If "Yes," complete								-	nest compensat		×
4 For any individual organization and	listed on line 1a, is the related organizations	sum of regreater th	portal an \$	ole (150,	com	nper 1? /i	nsatic	s, "	complete Sch	nedule J for su	ch	
5 Did any person list	ed on line 1a receive or ed to the organization	or accrue co	ompe	nsat	tion	fro	n any	/ un	related organiz	zation or individ		×
Section B. Independent		: 11 163, 0	σπρι	CIC	001	ieut	110 0 1	01 3	sucii persori	<u></u>	3	X
	e for your five highest n the organization. Rep											
	(A) Name and business add	Iress							(B) Description of s	services	(C) Compens	sation
2 Total number of	independent contracto	ors (includir	ng bu	ıt n	ot I	imit	ed to	th	ose listed ab	ove) who		

received more than \$100,000 of compensation from the organization ▶

0

orm 9	90 (2018	3)						Page 9
Part	VIII	Statement of Revenue						
		Check if Schedule O contains a	resp	onse or note to				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
nts nts	1a	Federated campaigns	1a	8,008.				
irai Our	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	5	1c	45,000.				
ia i	d	<u> </u>	1d					
ns,	е	J (,	1e					
er 3	f	All other contributions, gifts, grants,		1 000 000				
ᅙ				1,098,099.				
<u> </u>	g	Noncash contributions included in lines 1a–1f Total. Add lines 1a–1f			1,151,107.			
	h	Total. Add illies 1a-11	· · ·	Business Code	1,131,107.			
eun	2a	Brochures, magazines & ac	ds	511120	104,528.	21,796.	82,732.	0.
Rev	b	Membership dues		900099	232,897.	232,897.	02,732.	0.
Program Service Revenue	c		F		202,007.	202,057	•	
)erv	d							
ogram (е							
	f	All other program service revenue	. [
፵	g	Total. Add lines 2a-2f			337,425.			
	3	Investment income (including d						
		and other similar amounts)		+				
	4	Income from investment of tax-exemp	•					
	5	Royalties	· ·	(ii) Personal				
	6a	Gross rents		(ii) i diddiidii				
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	N		▶				
	7a	Gross amount from sales of (i) Securities	s	(ii) Other				
	_	assets other than inventory						
	b	Less: cost or other basis and sales expenses .						
	С	Gain or (loss) .						
	d	Net gain or (loss)		▶				
Other Revenue	8a	Gross income from fundraising						
eve		events (not including \$ 45,000. of contributions reported on line 1c).						
<u>ت</u> π		See Part IV, line 18		4 050				
the	b	Less: direct expenses		4,250. 24,930.				
0		Net income or (loss) from fundrais			-20,680.		0.	-20,680.
		Gross income from gaming activities	~ ~		20,000.		<u></u>	20,000.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and general expenses **(D)** Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 2 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 92,755. 46,373. 32,828. 13,554. Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 7 245,153. 200,019. 45,134. 0. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 38,963. 28,411. 8,989. 1,563. 10 Payroll taxes 24,668. 18,402. 5,257. 1,009. 11 Fees for services (non-employees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 33,782. 0. 61,517. 27,735. 12 Advertising and promotion 6,822. 397. 6,425. 13 Office expenses 0. 14 Information technology 15 8,149. Occupancy 35,320. 25,754. 16 1,417. 43,794. 35,280. 8,514. 17 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,459. 1,459. 0. 20 0. 21 Payments to affiliates 5,353. 3,903. 1,235. 215. 22 Depreciation, depletion, and amortization . 23 2,340. 705. 1,635. 0. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 526,899. 526,478. 32. 389. Annual Meeting & program expenses 50,722. 723. 523. Printing & publications 49,476. Postage & shipping 25,923. 15,484. 9,206. 1,233. Equip rental & maintenance 22,133. 16,139. 5,106. 888. All other expenses 52,634. 29,773. 12,437. 10,424. 1,236,455. Total functional expenses. Add lines 1 through 24e 25 1,024,329. 180,911. 31,215. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and 0. 0. 0. 0.

Form 990 (2018) Page **11**

Part X Balance Sheet

	art X		r noto	to any line in this Day	+ V		
		Check if Schedule O contains a response of	note	to any line in this Par	(A) Beginning of year		
	1	Cash-non-interest-bearing			421,992.	1	740,181.
	2	Savings and temporary cash investments		·	2	100.	
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	4,050.
	5	Loans and other receivables from current and					
		trustees, key employees, and highest co					
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified pers	s defined under section				
	•	4958(f)(1)), persons described in section 4958(c)(3)(B), ar					
		sponsoring organizations of section 501(c)(9) volur					
ts		organizations (see instructions). Complete Part II of Sche	edule L			6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			21,293.	8	25,125.
	9	Prepaid expenses and deferred charges			4,895.	9	9,998.
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	54,873.			
	b	Less: accumulated depreciation	10b	33,318.	13,015.	10c	21,555.
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line	11 .			12	
	13	Investments-program-related. See Part IV, line		-		13	
	14	Intangible assets	-		14		
	15	Other assets. See Part IV, line 11	-	3,000.	15		
	16	Total assets. Add lines 1 through 15 (must equa			464,195.	16	801,009.
	17	Accounts payable and accrued expenses		91,248.	17	50,626.	
	18	Grants payable	_		18	·	
	19	Deferred revenue			360,396.	19	504,222.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete		-		21	
ရွ	22	Loans and other payables to current and for		_			
ı≝∣		trustees, key employees, highest comper					
Liabilities		disqualified persons. Complete Part II of Schedu	ıle L			22	
֓֞֞֞֞֞֞֞֞֜֞֞֞֞֞֞֞֞֞֞֞֞֞	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelated		· -		24	
	25	Other liabilities (including federal income tax,	payab	les to related third			
		parties, and other liabilities not included on lines	s 17–2	4). Complete Part X			
		of Schedule D			22,762.	25	23,504.
	26	Total liabilities. Add lines 17 through 25			474,406.	26	578 , 352.
Fund Balances		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an), che				
anc	27	Unrestricted net assets			-161,724.	27	56,886.
3al	28	Temporarily restricted net assets			151,513.	28	165,771.
J D	29	Permanently restricted net assets			·	29	·
ا <u>تا</u>		Organizations that do not follow SFAS 117 (ASC 9		<u> </u>			
J I		complete lines 30 through 34.	-	_			
ts (30	Capital stock or trust principal, or current funds				30	
sse	31	Paid-in or capital surplus, or land, building, or ed		_		31	
As	32	Retained earnings, endowment, accumulated in		_		32	
Net Assets or	33	Total net assets or fund balances			-10,211.	33	222,657.
_	34	Total liabilities and net assets/fund balances .		_	464,195.	34	801,009.

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1,4	69 , 3	23.		
2	Total expenses (must equal Part IX, column (A), line 25)	1,2	36,4	55.		
3	Revenue less expenses. Subtract line 2 from line 1	2	32,8	68.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	-:	10,2	11.		
5	Net unrealized gains (losses) on investments					
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain in Schedule O)					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	2:	22,6	57 <u>.</u>		
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			\sqcup		
			Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		×		
	If "Yes," check a box below to indicate whether the financial statements for the year were 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?	2b	×			
	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:					
	▼ 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?	2c	×			
	If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?	3a		×		
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 in Schedule O and describe any steps taken to undergo such audits.	3b				

Form **990** (2018)

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

Form 990: Return of Organization Exempt from Income Tax Part VI, Line 17 (continued)

Continuation Statement

(
	States Where Copy of Return is Required	
FL		
NY		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) 8 ☐ An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

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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 Calendar year (or fiscal year beginning in) ▶ (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 **(e)** 2018 (f) Total grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 573,211. 1,151,107. 3,267,602. 545,589. 543,502. 454,193. levied 2 revenues organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 545,589. 543,502. 454,193. 573,211. 1,151,107. 3,267,602. 4 The portion of total contributions by 5 each person (other than governmental unit publicly or supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 3,267,602. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 545,589. 543,502. 7 454,193. 573,211. 1,151,107. 3,267,602. Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 59. 59. Net income from unrelated business 9 activities, whether or not the business is regularly carried on 63,760. 82,732. 50,591. 58,432. 255,515. 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 2,615. 4,799. 3,677. 1,471. 12,562. **Total support.** Add lines 7 through 10 11 3,535,738. Gross receipts from related activities, etc. (see instructions) 12 12 1,444,859. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f) 14 14 92.42% 15 Public support percentage from 2017 Schedule A, Part II, line 14 15 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

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 falls to qualify	under the te	SIS IISIEU DEN	ow, piease co	implete i ait	11. <i>)</i>	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")						
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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
<i>i</i> u	received from disqualified persons .						
	· · · · · · · · · · · · · · · · · · ·						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	· •						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
	on B. Total Support		T	1	T	Γ	
	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	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 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.)						
14	First five years. If the Form 990 is for th	e organizatio	n's first, secon	d, third, fourth	, or fifth tax ve	ear as a sectic	n 501(c)(3)
	organization, check this box and stop her	•					` ' : '
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2018 (line 8			13. column (f))		15	%
16	Public support percentage from 2017 Sch		-			16	%
	on D. Computation of Investment Inc					1.0	,,,
17	Investment income percentage for 2018 (I			oy line 13. colu	mn (f)) .	17	%
18	Investment income percentage from 2017			-		18	<u>%</u>
19a	331/3% support tests—2018. If the organi						
·Ja	17 is not more than 33 ¹ / ₃ %, check this box						
b	331/3% support tests—2017. If the organiz		=	-		=	
b	line 18 is not more than 331/3%, check this b						
20	Private foundation If the organization di		_				_

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.)

Se

secu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	103	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	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).	5a		
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?	5b		
с 6	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	5c		
Ū	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			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b		- 50		

10b

determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)		-	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	organizations and what conditions of restrictions, if any, applied to sacin powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
	,, ,	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			
•		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.			
Sooti	on E. Type III Functionally Integrated Supporting Organizations	3		
		notru	otion	-)
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i The organization satisfied the Activities Test. Complete line 2 below.	เเอเเน	CHOIR	5).
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions)
2	Activities Test. <i>Answer (a) and (b) below.</i>	000 111	Yes	
– a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			110
u	the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify</i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? <i>If</i> "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	За		
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.	3b		

instructions).

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

Schedule A (Form 990 or 990-EZ) 2018

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

Schedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Pt II Ln 10: Other Income Part II, Line 10 Description: Copier refund Description:
Other 2015: 99. 2017: 1705. 2018: 1471. Description: Refunds/repayments 2014:
2615. 2015: 2250. 2017: 1200. Description: Escheated funds 2015: 2450. Description:
CC rewards 2017: 772.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

11-2306416

American Association of Kidney Patients, Inc. Organization type (check one): Filers of: Section: Form 990 or 990-EZ × 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, 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 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
American Association of Kidney Patients, Inc.

Employer identification number

11-2306416

Part I	Contributors	(see instructions).	Use duplicate co	pies of Part I	if additional space is needed.
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(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	Amgen One Amgen Center Drive Newbury Park CA 91320	\$ 87 , 500.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	Amicus Therapeutics, Inc. 1 Cedar Brook Drive Cranbury NJ 08512	\$ 426,995.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	Care DX 3260 Bayshore Blvd Brisbane CA 94005	\$ 94,375.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4	Mallinckrodt 3 Lotus Park , The Causeway , Staines-Upon-Thames Surrey, UK	s \$40,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	Relypsa 100 Cardinal Way Redwood City CA 94063	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6	Otsuka America 508 Carnegie Center Dr Princeton NJ 08540	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

American Association of Kidney Patients, Inc.

Employer identification number
11-2306416

Part I	Contributors (see instructions).	Use duplicate copies of Part I if additional space is needed.	

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	AstraZeneca 1800 Concord Pike Wilmington DE 19850	\$ 28,000.	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	Horizon Pharma 150 S. Saunders Rd Lake Forest IL 60045	\$50,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person

Name of organization
American Association of Kidney Patients, Inc.

Employer identification number

11-2306416

Part II	Noncash Property (see instructions).	Use duplicate copies of	Part II if additional space is needed
rartii	Horicasii i Toperty (See ilistractions).	Ose duplicate copies of	i ait ii ii additioriai space is rieeded.

(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Employer identification number

Name of organization

	n Association of Kidney Pati	ents, Inc.		11-2306416				
Part III	Exclusively religious, charitable, etc (10) that total more than \$1,000 for	c., contributions to orga the year from any one co ons completing Part III, e	contributor. Center the total	omplete columns (a) through (e) and of exclusively religious, charitable, etc.,				
			mon once. ce					
(a) No. from	Use duplicate copies of Part III if addi (b) Purpose of gift	tional space is needed. (c) Use of gift		(d) Description of how gift is held				
Part I	(b) I dipose oi giit	(c) Ose or gire		(a) Description of now girt is field				
		(e) Transfer of	aift					
	Transferee's name, address, and			ship of transferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No.								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
-								
	(e) Transfer of gift							
	Transferee's name, address, and	Transferee's name, address, and ZIP + 4 Relation						
(a) No.	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
Part I	(b) Fulpose of gift	(c) Ose of gift		(u) Description of now girt is neith				
-	(e) Transfer of gift							
	Transferee's name, address, and			ship of transferor to transferee				

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Inspec

American Association of Kidney Patients, Inc. 11-2306416 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I 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 1 2 Aggregate value of contributions to (during year) 3 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 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose 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 (e.g., recreation or education) ☐ Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 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 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ 4 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 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (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. If the organization elected, as permitted under SFAS 116 (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: 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 SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

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

Part	III Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Ot	her Similar Ass	ets (co	ontinu	ıed)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and otl	her recoi	ds, chec	k any of the	e follov	ving that are a sig	gnifican	t use	of its
а	☐ Public exhibition		d	Loan	or exchange	e progi	ams			
b	☐ Scholarly research		е	Other						
С	☐ Preservation for future generations	3								
4	Provide a description of the organizat XIII.	ion's collections a	and expla	in how t	hey further t	the org	anization's exem	pt purp	ose in	Part
5	During the year, did the organization assets to be sold to raise funds rather								es 🗆] No
Part		•								
	Complete if the organization 990, Part X, line 21.						·		1 Forr	m
1a	Is the organization an agent, trustee, included on Form 990, Part X?								es 🗆] No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:		Am	nount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amour									No
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the ex	kplanatio	n has been _l	orovide	ed on Part XIII .			
Par			_							
	Complete if the organization									
		(a) Current year	(b) Pri	or year	(c) Two years	s back	(d) Three years back	(e) Four	years b	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t			e (line 1g	, column (a)) held a	as:			
а	Board designated or quasi-endowmer	nt ▶	%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and									
3a	Are there endowment funds not in the organization by:	e possession of th	e organi	zation tha	at are held a	and ad	ministered for the	;	Yes	Na
	(i) unrelated organizations							20/i)	165	INO
	(ii) related organizations							3a(i)		
b	If "Yes" on line 3a(ii), are the related or							3a(ii) 3b		
4	Describe in Part XIII the intended uses							30		
Part			ii 3 criac	WITICITE IC	arius.					
rait	Complete if the organization		' on For	m 990 F	Part IV line	11a :	See Form 990 F	Part X	line 1	Ω
	Description of property	(a) Cost or oth			or other basis		Accumulated	(d) Boo		
	Besonption of property	(investme			ther)		epreciation	(d) Boo	m value	,
1a	Land		0.							0.
b	Buildings									
С	Leasehold improvements									
d	Equipment				54,873.		33,318.		21 , 5	55.
e	Other	.								
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	90, Part)	K, column	(B), line 10	c.)	•		21 , 5	55.

Schedule D (Form 990) 2018	D 2
	Page -1

Part VII	Investments - Other Securiti				0 =	
	Complete if the organization a					
	(a) Description of security or cate (including name of security)	gory	(b)	Book value	` '	hod of valuation: -of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests					
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments – Program Rela Complete if the organization a		000	Dort IV line	a 11a Caa Farm	000 Dort V line 12
	(a) Description of investmen		(a)	Book value		hod of valuation: -of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
_(7)						
(8)						
(9)	15 000 B 11/ 1/B) (1 40)					
	p) must equal Form 990, Part X, col. (B) line 13.)	<u> </u>				
Part IX	Other Assets.	nowayad "Vaa" on Far	··· 000	Dort IV line	a 11d Coo Form	OOO Dort V line 15
	Complete if the organization a		m 990	, Part IV, IIne	e 11a. See Form	(b) Book value
		(a) Description				(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7) (8)						
(9)						
	mn (b) must equal Form 990, Part X	(, col. (B) line 15.)				
Part X	Other Liabilities.	, , , ,				
	Complete if the organization a	nswered "Yes" on For	m 990	, Part IV, line	e 11e or 11f. See	e Form 990, Part X.
	line 25.			,		, ,
1.	(a) Description of liability	(b) Book value				
(1) Federal in	come taxes					
(2)Capita	l lease obligation	23,5	04.			
	ed lease incentive		0.			
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	o) must equal Form 990, Part X, col. (B) line 25.)	-,-				
	uncertain tax positions. In Part XIII, p					
organization's	s liability for uncertain tax positions un	der FIN 48 (ASC 740). Che	ck here	if the text of the	ne footnote has bee	n provided in Part XIII

Schedule D (Form 990) 2018 Page **4**

	(
Part		Retur	n.
	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	1,486,231.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		1.6.000
е	Add lines 2a through 2d	2e	16,908.
3	Subtract line 2e from line 1	3	1,469,323.
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		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	1 160 000
5 Dort		5 Dot	1,469,323.
Part		Reu	urn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	4	1 050 060
1	Total expenses and losses per audited financial statements	1	1,253,363.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities		
a			
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)	20	16,908.
e	Subtract line 2e from line 1	2e 3	
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	1,236,455.
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,236,455.
Part			1,200,100.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b;	Part \	/, line 4; Part X, line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional info		
D+ V	Time 2. The Americanian against for the effect of any uncontain t		
PL X	, Line 2: The Organization accounts for the effect of any uncertain t	.ax	
posi	tions based on a "more likely than not" threshold to the recognition	of ·	the
+ 2 22	positions being sustained based on the technical merits of the positi	on i	ındor
scru	tiny by the applicable taxing authority. If a tax position or position	ons a	are
al a a		1.	
	ed to result in uncertainties of those positions, the unrecognized ta		
is e	stimated based on a "cumulative probability assessment" that aggregat	es	the
esti	mated tax liability for all uncertain tax positions. The Organization	n ha:	S
iden	tified its tax status as a tax-exempt entity as its only significant	tax	
posi	tion; however, the Organization has determined that such tax position	n do	es
1			
not	result in an uncertainty requiring recognition. The Organization is r	not (currently
unde	r examination by any taxing jurisdiction. The Organization's federal	ret	urns

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

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name	Name of the organization Employer identification number						
Ame	American Association of Kidney Patients, Inc.					11-2306416	
Par	Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.						
1	Indicate whether the organization raised funds through any of the following activities. Check all that apply.						
а	☐ Mail solicitations		e [ion of non-govern		
b	Internet and email solicitation	าร	f		ion of government	-	
С	Phone solicitations		g		fundraising events	-	
d	☐ In-person solicitations		3 –				
2a	Did the organization have a writ	ten or oral agre	amont with	any individ	lual (including offi	care diractore truet	.006
24	or key employees listed in Form						
b	If "Yes," list the 10 highest paid	•			•		
	compensated at least \$5,000 by			araiocro, po	arodant to agreen	ionto andor willon tr	ie ranaraiser is to be
		I					
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody c	draiser have or control of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)
	or critity (turidraisor)		Yes	outions?	nom activity	col. (i)	organization
4			162	No	-		
1							
2							
3							
4							
6							
7							
8							
9							
10							
Total 3	List all states in which the orga	nization is regis	etered or lic	ensed to s	olicit contribution	e or has been notifi	ed it is exempt from
3	registration or licensing.	ilization is regis	stered or no	ensed to s	olicit contribution	s of flas been flottiff	ed it is exempt from

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.

			(a) Event #1 Medal of Excellance	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through		
Revenue			(event type)	(event type)	(total number)	col. (c))		
			, ,,,	, ,,,	,			
	1	Gross receipts	49,250.			49,250.		
Re		·	,			,		
	2	Less: Contributions	45,000.			45 , 000.		
	3	Gross income (line 1 minus						
		line 2)	4,250.			4,250.		
	4	Cash prizes						
	5	Noncash prizes						
	Ü	Nonedan prizes						
ses	6	Rent/facility costs						
en		•						
EXF	7	Food and beverages	16,389.			16,389.		
Direct Expenses								
Ę	8	Entertainment						
	•	011	0 544			0 544		
	9	Other direct expenses .	8,541.			8,541.		
	10	Direct expense summary. Ad	ld lines 1 through 9 in c	olumn (d)		24 930		
	11	Net income summary. Subtra				24,930. -20,680.		
Pa	rt II	Gaming. Complete if th	e organization answe	ered "Yes" on Form	990, Part IV, line 19,	or reported more than		
		\$15,000 on Form 990-E2	Z, line 6a.		, , ,	·		
<u>e</u>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add		
Revenue			(a) Dirigo	bingo/progressive bingo	(b) Striot garring	col. (a) through col. (c)		
Rev								
_	1	Gross revenue						
S	2	Cash prizes						
Jse	_	Od311 p11203						
Direct Expenses	3	Noncash prizes						
ñ		·						
rec	4	Rent/facility costs						
⊡								
	5	Other direct expenses .						
	_	Mahanta an lah an	Yes %	Yes %				
	6	Volunteer labor	□ No	│	│			
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)	•			
	•	Bildet expense carrinary. Ne	ia iiioo z aiioagii o iii o	Oldi (a)				
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)				
9		Enter the state(s) in which the or						
		s the organization licensed to co	onduct gaming activities	s in each of these state	s?	∐ Yes ∐ No		
	b l	"No," explain:						
	-							
10	a Ī	Were any of the organization's g	aming licenses revoked	l suspended or termin	ated during the tax year	? . Yes No		
		f (()/ !! -!	-	•				
	-							

REV 10/17/18 PRO

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		
40	formed to administer charitable gaming?	☐ Yes	∐ No
13 a	Indicate the percentage of gaming activity conducted in: The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and		70
•	records:		
	Name ►		
	Address ►		
45-			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	□ No
b	the same of the sa	☐ 162	
D	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	, ,		
	Name ►		
	Address ►		
40			
16	Gaming manager information:		
	Name •		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatan, diatributiona		
17	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to		
а	retain the state gaming license?	☐ Yes	□No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
	spent in the organization's own exempt activities during the tax year ▶ \$		
Part			
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	nal infori	mation.
	See instructions.		
			

Page 3

Schedule G (Form 990 or 990-EZ) 2018

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990 or 990-EZ.

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

American Association of Kidney Patients, Inc.	11-2306416
Pt VI, Line 6: The Organization has one class of membership which	n is
Pt VI, Line 6: free. Members receive a one year electronic subscr	ription
Pt VI, Line 6: to the Organization's bimonthly magazine and disco	ounted
Pt VI, Line 6: pricing to the annual convention.	
Pt VI, Line 6: Members can nominate individuals	
Pt VI, Line 6: for inclusion on the Board of Directors; however,	only
Pt VI, Line 6: the Board of Directors' vote on new Board members.	·
Pt VI, Line 11b: The Form 990 is reviewed in detail by the Finance	ce Committee.
The Finance Committee approves the return. Copies of the Form 99	00 are provided
to all Board members prior to the return being filed.	
Pt VI, Line 12c: All members of the Board of Directors and employ	vees of the
organization receive a copy of the conflict of interest policy. T	The Executive
Director and all Board members are required to complete and sign	a written statement
that they have been and are in compliance with this policy.	
Pt VI, Line 15a: The Executive Committee conducts an annual review	ew of the Executive
Director's performance and recommends any adjustment to salary to	the Board of
Directors. The Board of Directors approves raises for the Executi	ve Director
and approves the overall salary levels for all employees.	
Pt VI, Line 15a: and approves the overall salary levels for all e	employees.
Pt VI, Line 15b: No other key employees or compensated officers.	
Pt VI, Line 19: The Organization makes its governing documents ar	nd 990
Pt VI, Line 19: available upon request.	
Pt V, Line 3b: Form 990 T being completed currently & to be filed	l ASAP.
Other: Additional information for Part III Program service accomp	plishments:AAKP
Fabry Disease Testing and Education Program: While a variety of f	actors may cause

Name of the organization **Employer identification number** American Association of Kidney Patients, Inc. 11-2306416 an individual to be diagnosed with kidney disease, genetic causes are especially difficult, due to the fact that an individual may not be aware they have a gene mutation predisposing them to a disease, they may not understand how early detection can help identify interventions and treatment options and they may not understand if or how other family members may be at risk for the same diagnosis. Recognizing the need to support individuals who have kidney disease caused by a genetic condition, AAKP developed, under its Center for Patient Research and Education, the Fabry Disease Testing and Education Program. Since 2007, AAKP has provided free genetic tests to more than 2,500 individuals. Over the years the program has expanded from familial testing to testing individuals with no known family history of Fabry Disease, but presenting signs, symptoms and markers for the condition. This has increased the population this testing and education program reaches, successfully helping those get diagnosed earlier in the disease state so interventions can take place to help reduce or stop the disease effects. Data collected from this program is also helping researchers identify markers for earlier diagnosis and improving treatment options. AAKP Center for Patient Engagement and Advocacy The AAKP has been a national leader in patient advocacy and education for over 50 years - and is the largest fully independent and patient-governed organization in the kidney ecosystem. AAKP is highly regarded across the Federal government among both career and appointed policy-makers and our influence in the Executive Branch and the U.S. Congress transfers across transitions and elections cycles due to our massive network of relationships and long-held reputation as an independent voice for patients. AAKP believes that patients and industry must be at the table together and engaged at all levels of decision-making whenever the Federal government seeks to implement wide-ranging initiatives that impact innovation and shape future access to care options for individuals affected by kidney diseases. AAKP fundamentally understands that kidney disease and the health and treatment of

Name of the organization

American Association of Kidney Patients, Inc. 11-2306416 kidney patients pose a significant impact on the American taxpayer and the national economy. The cost of kidney disease alone invites constant and intense interest and concern within the Federal government and the U.S. Congress. The costs associated with the disease have spurred multiple Federal initiatives in the past several years designed to increase positive patient outcomes, reduce spending and increase efficiencies. The move by the Federal government to examine and re-examine many of the cost-drivers within healthcare spending, and specifically within the ESRD program, represents a key reason why AAKP is working aggressively to build our capacities to raise the independent patient voice throughout the Federal policy-making process. In order for AAKP to maintain our leadership in protecting patient interests, and the overlapping interests among allies throughout the broader kidney community including the pharmaceutical industry and providers, we intend to grow our membership numbers, advance our National AAKP Ambassador Initiative, expand our reach internationally and equip kidney patients across the globe with proven and cost-effective training and technologies that make an impact on the policy process. The Center for Patient Engagement and Advocacy was created to leverage AAKP's increased profile and influence in the national public policy process and to expedite implementation of our national strategy to vastly expand patient involvement in the decisions impacting their health outcomes. The Center for Patient Engagement and Advocacy brings, under one focused area, all AAKP efforts to build patient and care partner membership in AAKP as well as their participation in existing and emerging AAKP patient health engagement and advocacy programs. Major programs within this Center include the Global Summit, the Policy Summit and Ambassador Initiative. As part of the AAKP national strategy, the Center for Patient Engagement and Advocacy works to engage, train, certify and deploy kidney patients, living donors and care partners in ways that are the most effective at elevating the patient voice within Federal policy-making circles.

Name of the organization

American Association of Kidney Patients, Inc. 11-2306416 This includes critical times when national legislation, health program implementation, regulations or potential delays in the pharmaceutical approval process pose a concern to patient access to quality care or their future healthcare outcomes. AAKP operates via key distinctives and principles: 1. Elevate patient voice in national issues and across drug, diagnostic and device development 2. Protect the unique relationship between patients and their doctors 3. Educate patients and preserve their access to choices as informed consumers of healthcare 4. Maintain full independence in all national policy and decisions - never surrender your letterhead 5. Honor the principle of "no surprises" among trusted allies and Federal government officials AAKP has a history of advocating on important issues affecting patients' care, treatment, options, medications and such. The Advocacy Program helps support initiatives such as: Capitol Hill Day visits, participation in meetings/seminars/conventions, public policy, Communication, research issues affecting patients and practical tools that explain how to be more effective advocates. Patient Information and Education: AAKP is dedicated to improving the lives and long-term outcome of kidney patients through education, advocacy, patient engagement and the fostering of patient communities. AAKP fights for early detection; increased kidney transplantation and pre-emptive transplantation; full patient choice of either in-center or home dialysis; protection of the patient/physician relationship; promotion of research and innovation; the elimination of barriers for patient access to available treatment options. We 1,) Educate: patients & caregivers on CKD, ESRD, nutrition, kidney therapies including dialysis - peritoneal and hemodialysis both at home and in-center and transplantation (including pre-emptive) 2.) Advocate: for policies that improve treatment and extend life for kidney disease patients - always defending patient choice 3.) Define: "patient engagement" as a substantive tool to impact policy and health outcomes The AAKP fulfills our educational mission through an extensive patient education program to inform

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 and educate kidney patients, their families, and the general public on kidney diseases. To meet the needs of all individuals, AAKP offers its programs in a variety of mediums: print, web-based and live (in-person). AAKP services more than one million individuals annually via its various educational programs and communication platforms. AAKP's bimonthly magazine, aakpRENALIFE, averages more than 400,000 readers/views annually and includes information about the latest news, education, policy/legislative issues, innovations/research occurring in the kidney community and patient/caregiver/living donor profiles. The magazine is also distributed to over 7,000 dialysis centers nationwide and has a substantial afterlife as it remains in dialysis centers for quite some time after mailing. aakpRENALIFE is available via print/digital medium and is archived on www.aakp.org for a term of one year. AAKP's monthly e-newsletters, collectively, were delivered more than 250,000 times during this year - including aakpRENALFLASH (designed for individuals on dialysis); Kidney Transplant Today (designed for individuals with or interested in a kidney transplant); Kidney Beginnings (designed for and new patients learning more about their disease; At Home with AAKP (designed for individuals on or interested in home dialysis therapies) and AAKP Pediatric Kidney Patients (designed for peds, adolescents and their families). AAKP hosts its monthly HealthLine webinar series for patients and the public on timely and relevant topics such as managing risk factors for kidney disease (diabetes/hypertension); understanding dialysis options; kidney transplantation; how to choose/change treatment options; diet/nutrition; importance of exercise; coping with a chronic illness, advocacy and social media; and more. These webinars are recorded and made available OnDemand to accommodate all schedules and needs and reach thousands annually. Real-time attendance for AAKP's HealthLine webinars has increased by 235% (a combined 455% increase since 2017) and OnDemand views of recorded webinars has increased by 139%. AAKP utilizes a variety of communication platforms to

Name of the organization **Employer identification number** American Association of Kidney Patients, Inc. 11-2306416 reach approximately one million individuals annually. Included in that reach is AAKP's social medial platforms: Facebook, Twitter, LinkedIn, Instagram, Pinterest, and YouTube Channel. AAKP's website (www.aakp.org) has over 420,000-page views annually. The website features the AAKP Center for Patient Research and Education and Center for Patient Engagement and Advocacy - including: " education (CKD, dialysis, transplant, co-related health conditions; rare disease; nutrition); clinical trials/market research opportunities; Action Center (advocacy initiatives; policy issues; voter registration); patient engagement (Ambassador Initiative; Speakers Bureau; Veterans Health initiative; KidneyWorks; Support Groups), programs/events (National Patient Meeting; Cystinosis Scholarship Program, Medal of Excellence; Policy Summit; Global Summit; Patient Safety Program), and online store to download/purchase materials. National Awards Program: AAKP's awards encompass two major categories. The first category includes Legacy Awards - awards that AAKP has extended to organizations and professionals for several decades. The second category encompasses Patient Engagement and Advocacy Awards - awards created over the course of the past several years through AAKP's new Center for Patient Engagement and Advocacy as a means of recognizing the increased influence patients have on national policy-makers and healthcare deliberations. Legacy Awards: President's Award Presented to an individual who made a long-term commitment toward advancement and evolvement of AAKP's national strategy. Samuel J. Orenstein Award Presented to an individual who consistently renders extraordinary service toward the achievement of AAKP's goals, objectives and national strategy. Peter Lundin, MD Award Presented to a renal physician who has made contributions to the care, welfare and well-being of patients over a lifetime of devoted service. Dominick Gentile, MD Memorial Award Presented to an ESRD Network that has developed and maintained a program which has significantly benefited patients and demonstrated sustainability. Kidney Patient Support Group of the Year Presented to a kidney patient support group

Name of the organization

American Association of Kidney Patients, Inc. 11-2306416 that has been active within their local community. This support group should have hosted community educational programs and activities to support its local patients and raise awareness of kidney disease. New Patient Engagement and Advocacy Awards: National Social Media Education and Advocacy Award Presented to an individual and organization each who has demonstrated a national level of excellence through social media to either educate or advocate on behalf of kidney patients and their loved ones in the areas of disease awareness, policy advocacy or the creation of online communities. This highly competitive award will recognize excellence on a variety of social media platforms and will include video, bloggers and social media content and sites that have grown large audiences through creative and effective use of social media. National Patient Engagement and Advocacy Award Presented to an individual, organization and public servant each who are recognized leaders in the field of kidney patient education and advocacy and whose body of professional work and commitment to advance the interests of kidney patients through policy, education or activism. National Journalism Award Presented to a reporter or journalist whose work in either print, online, television or web arena(s) has brought the needs and interests of the kidney patient community to the national forefront through journalistic excellence. Presented either for a single compelling story with local, regional or national significance, or body of work, which over time has informed Americans of the critical needs and concerns of the kidney patient community. National Public Service Award Presented to a public servant whose body of professional work and commitment to advance the interests and well-being of the Nation's kidney patient population through policy, education and activism. Past awardees include Dr. Carolyn Neuland, the U.S. Food and Drug Administration; Dr. Priti Patel, Centers for Disease Control and Prevention; Dr. Robert Star, National Institute of Health; and Elena Balovlenkov, MS, RN, CHH, Centers for Medicare and Medicaid Services; and Dr. Paul Kimmel, National Institute of Health. Medal

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 of Excellence: The AAKP Medal of Excellence honors health care professionals who have made significant contributions to the advancement and evolution of direct patient care; encouraged the expansion of the patient engagement model within the renal community; and enhanced the quality of life for kidney patients and their families. The 2019 Medal of Excellence recipients are recognized throughout the calendar year. The 2019 Medal of Excellence Award recipients: Stephen Z. Fadem, MD, FACP, FASN, Kidney Associates LLC (Houston, TX) - Physician Category Sherilyn Gordon, MD, FACS, Methodist Hospital (Houston, TX) - Transplant Surgeon Category presented posthumously Ronald Gill, PhD, Colorado Center for Transplantation Care (Aurora, CO) - Transplant Professional Category Barbara Casazza, FNP, The Rogosin Institute (Woodside, NY) - Nursing Category Renee Bova-Collis, MSW, LCSW, Quality Insights Mid-Atlantic Renal Coalition (Richmond, VA) - Social Work Category Stacey Phillips, RD, Mercy Health (Grand Rapids, MI) - Dietetic Category Dwelyn Williams, CCHT, DaVita Kidney Care (Orlando, FL) - Dialysis Technician Category Additional information for Part III line 4d AAKP Center for Patient Education and Research. The Center for Patient Research and Education brings, under one focused area, all AAKP efforts to build existing and emerging AAKP patient education programs and research activities. AAKP firmly believes, as research has also shown, that patient and care partner education is an integral part of treatment and enhancing quality of life. Not educating a patient and their care partner about their condition and treatment options leaves the patient at risk for complications as well as the possibility of not selecting a course of treatment best suited for them. As part of AAKP's National Strategy, we have expanded our capacities to involve a far larger, and more representative, number of patients in research opportunities and clinical trials. The results of these opportunities will help create a clearer understanding of the patient experience and can help shape the future of kidney disease treatment and care. AAKP is fully committed to changing the status quo

Name of the organization **Employer identification number** American Association of Kidney Patients, Inc. 11-2306416 of kidney care and to better aligning treatment to personal aspirations. To achieve this goal, the AAKP Center for Patient Research and Education is working with top researchers and partners to ensure that the patient voice, patient preferences and patient perceptions are heard. AAKP constituents represent all ages, modalities, ethnicities, disease states, and a variety of demographic indicators. AAKP's research, recruitment and outreach capabilities have grown rapidly as the Association has created a sophisticated database and expansive social media channels which allow AAKP to better connect and learn from its constituents - even those patients in underserved areas/populations. Additionally, AAKP provides education to patients and care partners on what it means to be involved in research initiatives as well as opportunities to get involved. From online surveys, interviews, focus groups, and clinical trial awareness campaigns - AAKP is focused on inserting important patient insight and preferences into research to help inform innovation, advance care and make a meaningful impact to improve lives - this means AAKP members are helping shape the future policies and discoveries that characterize kidney care! AAKP is also well-known within the renal community as a leader in quality education; taking time to produce programs and materials that are current, relevant and address the most pressing issues patients and their families face. AAKP is deliberate in its development of educational programs, working closely with its Medical Advisory Board, health educators and fellow patients to create unbiased, reliable resources that are easily understood and beneficial to patients. AAKP routinely uses matrices to measure program outcomes to assess effectiveness and success as well as opportunities for enhancement. AAKP offers its programs in a variety of mediums to ensure we reach as many patients as possible (print, online/web-based, smart devices, live/in-person) and is positioned, via its robust communication changes, to implement educational awareness campaigns and national education/awareness efforts. Patient Pocket Guides (NEW*): This new brochure

Name of the organization

American Association of Kidney Patients, Inc. 11-2306416 series offers a template for AAKP to develop a number of convenient, pocket sized guides that focus on a variety of important healthcare topics that patients can keep with that list top questions to ask their healthcare team to better understand/manage conditions. " AAKP Pocket Guide to Managing Kidney Disease: This Pocket Guide is a tool to help patients and caregivers have more effective dialogue with their healthcare teams. It includes 5 Key Questions to Ask your Doctor/Medical Specialist, as well as additional questions for each stage of Chronic Kidney Disease. " 2020 Pocket Guides (in development): Anemia and High Potassium Cystinosis Patient Education and Activity Scholarship Program (NEW*): While a variety of factors may cause an individual to be diagnosed with kidney disease, genetic and rare causes can be especially difficult for patients and family members to manage. Understanding the need to support individuals who have kidney diseases caused by a genetic or rare condition, AAKP has expanded its education, advocacy efforts and services to those affected. In support of AAKP's Pediatric and Rare Disease Initiatives, AAKP launched its Cystinosis Patient Education and Activity Scholarship Program for those affected with cystinosis in 2019. The objective of the scholarship program is to provide an exclusive opportunity for people living with cystinosis to provide inspiration, further their education and purse opportunities toward long-term career goals and life aspirations. This scholarship program is open to individuals diagnosed with cystinosis. Scholarship funds are available to age groups 5-17 years of age and 18+. KidneyWorks: The KidneyWorks Initiative research and policy collaboration aims to help Americans with chronic kidney disease who are not on dialysis maintain their jobs and slow their disease. KidneyWorks seeks to reduce disability and dependency and help people with ND-CKD remain active, productive, taxpaying citizens by taking proactive steps to educate patients, families, clinicians, and lawmakers and enact work-friendly practices and policies. " Phase One (Completed) Phase One included a national stakeholder meeting,

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 preparing and releasing a policy White Paper and Executive Summary, conducting national media rollout, and developing www.kidneyworks.org. The National Roundtable held in Washington, D.C. in June 2016 include sectors of the kidney community - patients, non-profits, professionals, members of industry and representatives from Federal government. The comprehensive KidneyWorks White Paper and Executive Summary was formally and publicly released in July 2017. The report identified barriers to patients' desire and ability to keep working and outlined a comprehensive strategy to remove them. The National Media rollout included more than 800 media websites and channels featuring KidneyWorks and the White Paper, including Fox Business News and Nephrology News & Issues. " Phase Two (Underway) Phase Two will use strategies identified in Phase One to develop interventions to help people with ND-CKD slow their disease progression and keep their jobs, including targeted messaging, tools and resources, telephone helpline support, and a robust database to track contacts and outcomes. " Phase Three (2021+) Phase Three will include evaluation of the impact of KidneyWorks by using the database and conducting outcomes research. Fabry Disease Diagnostic and Education Project: AAKP and Emory University have partnered to conduct an educational research project aimed at providing free genetic testing to individuals affected and at-risk for Fabry Disease. The research findings will help identify markers to Fabry that in turn will allow patients affected be diagnosed earlier in the disease state and begin intervention and treatment immediately. AAKP continues to develop many educational resources such as medical articles, brochures and webinars highlighting the advancements in Fabry Disease, best practices and the project's research findings. AAKP National Patient Meeting: The AAKP National Patient Meeting is the largest gathering of kidney patients and their care-partners in the U.S. Over the course of the three-day program, attendees have the opportunity to learn the latest scientific research regarding kidney disease and treatment options;

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innovations in devices and medication; diet/nutrition; patient safety; public	
policy issues affecting their care; and opportunities to engage with government	
agencies to increase the patient voice. The program includes interactive sessions	
(recorded and live streamed for enduring education); an extensive exhibit hall	
featuring companies that provide products and services for individuals with kidney	
disease, along with fellow non-profit organizations; and a variety of social	
events to allow attendees to interact with government officials, healthcare professionals	
and fellow patients going through similar circumstances. Patient Engagement	
& Awareness Program: As a leading voice in the patient community, AAKP is uniquely	
positioned to assist companies interested in understanding the patient experience	
by connecting them directly to the thousands of patients, family members and	
caregivers in our database. AAKP's propriety database and engaged community of	
patients, creates a valuable resource to companies targeting the kidney patient	
population for market research and/or raising awareness on clinical	trial opportunities.
Medal of Excellence Award: The Medal of Excellence Award is the Association's	
highest honor for kidney healthcare professionals and is designed to elevate	
national and international figures who have been at the forefront of advancements	
in kidney care and patient empowerment. The award recognizes profess	sionals who
are committed to improving and extending the lives of all kidney patients through	
advocacy, research, technology and quality-driven treatments that pro-	rotect patient
dignity and fully align with patient aspirations. This prestigious a	award program
recognizes a variety of professionals within the health care team including:	
nephrologists, transplant surgeons, transplant professionals, nurses, social	
workers, dietitians and dialysis technicians. Jenny Kitsen Patient S	afety Award: Established
in 2013 by the Network of New England Board of Directors to continue the patient	
safety work of the nonprofit organization led by Jenny Kitsen. That organization	
held the CMS contract for ESRD Network 1 for 35 years, from 1977-201	12. The Network

Name of the organization **Employer identification number** American Association of Kidney Patients, Inc. 11-2306416 staff, patients and professional volunteers who supported Network activities made a number of innovative contributions to the ESRD Network Program. Under Ms. Kitsen's direction, with the Board guidance, the New England Network organization became known for its leadership in patient safety. The AAKP has accepted an endowment from the Network of New England Board of Directors to honor Ms. Kitsen through an annual lecture or program that will advance patient safety by exploring innovation in health systems management, education and best practices. Grant recipients have included: the Centers for Disease Control and Prevention; National Kidney Foundation; National Renal Administrators Association; A.T. Still University of Oral Health; All Kidney Patients Support Group; Renal Physicians Association; American Nephrology Nurses Association; and the Forum of ESRD Networks. AAKP Healthline Online Webinars: AAKP HealthLine is a one-hour FREE webinar program educating patients and caregivers on a variety of important topics all from the comfort of their home or office. A teleconference option is available for each program should the registrant not have computer access. All HealthLine programs are recorded and archived at www.aakp.org/aakp-healthline. To date, HealthLine has serviced and reached more than 2,500 patients through our live, real-time webinars. Webinars are hosted monthly, recorded and archived on the AAKP website for enduring education. The archived webinars continue to be in the top five visited pages of the website. One recorded webinar can achieve an additional 300+ views monthly, making the number of patients ultimately reached by this by this program increase exponentially. AAKP Nutrition Program: " The AAKP Delicious! Series features a variety of kidney-friendly recipes for patients at all stages of kidney disease. All recipes have been carefully reviewed by renal dietitians and provide indications on what type of patient these recipes are most suited for. This recipe program has been favorably reviewed by the renal practice group of the Academy of Nutrition and Dietetics. Five editions of AAKP

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American Association of Kidney Patients, Inc. 11-2306416 Delicious! are available featuring more than 100 kidney-friendly recipes. " AAKP Nutrition Counter is a pocket-sized guide that lists the nutrient values for standard portions of more than 300 commonly used foods. Nutrient values listed include: carbohydrates, fat, saturated fat, protein, calorie, sodium, potassium, and phosphorus levels - dietary values that must be closely monitored in kidney patients. Pocket Guides: This new brochure series offers a template for AAKP to develop a number of convenient, pocket sized guides that focus on a variety of important healthcare topics that patients can keep with that list top questions to ask their healthcare team to better understand/manage conditions. " AAKP Pocket Guide to Managing Kidney Disease: This Pocket Guide is a tool to help patients and caregivers have more effective dialogue with their healthcare teams. It includes 5 Key Questions to Ask your Doctor/Medical Specialist, as well as additional questions for each stage of Chronic Kidney Disease. " 2020 Pocket Guides (in development): Anemia and High Potassium "Understanding" Series: This workbook series covers a variety of important topics such as: Hemodialysis Options, Access Options, PD Options, Home Hemodialysis, Anemia, Iron, Depression, Fabry Disease, Hepatitis C, Kidney Transplantation, Gout and Proteinuria. All brochures are available in print and online pdf. Kidney Beginnings: This workbook provides an introduction to chronic kidney disease and is designed for individuals recently diagnosed or with risk factors such as diabetes and hypertension. The various chapters address common topics for individuals with or at-risk for kidney disease such as: diabetes, hypertension, common medical test, common medications, emotional issues, diet/nutrition, exercise, employment and much more. Patient Plan Series: These four phased workbook series are designed to provide individuals with the information they need as they progress through kidney disease. The information is divided among the four books to allow a patient to advance when they are ready and learn information in a manageable way that allows for the greatest impact on behavioral

Name of the organization **Employer identification number** American Association of Kidney Patients, Inc. 11-2306416 changes. aakpRENALIFE: aakpRENALIFE is the official flagship magazine of the Association. Produced bi-monthly, the articles and information are educational in nature and designed to be relevant for patients regardless of stage of kidney disease or modality option. Content is made available online as well so that patients and caregivers have access to specialty articles at any time post-production. E-newsletters: are distributed monthly and cover current news and issues for individuals with chronic kidney disease, regardless of stage or modality. AAKP Center for Patient Engagement and Advocacy: The AAKP has been a national leader in patient advocacy and education for over 50 years - and is the largest fully independent and patient-governed organization in the kidney ecosystem. AAKP is highly regarded across the Federal government among both career and appointed policy-makers and our influence in the Executive Branch and the U.S. Congress transfers across transitions and elections cycles due to our massive network of relationships and long-held reputation as an independent voice for patients. AAKP believes that patients and industry must be at the table together and engaged at all levels of decision-making whenever the Federal government seeks to implement wide-ranging initiatives that impact innovation and shape future access to care options for individuals affected by kidney diseases. AAKP fundamentally understands that kidney disease and the health and treatment of kidney patients pose a significant impact on the American taxpayer and the national economy. The cost of kidney disease alone invites constant and intense interest and concern within the Federal government and the U.S. Congress. The costs associated with the disease have spurred multiple Federal initiatives in the past several years designed to increase positive patient outcomes, reduce spending and increase efficiencies. The move by the Federal government to examine and re-examine many of the cost-drivers within healthcare spending, and specifically within the ESRD program, represents a key reason why AAKP is working aggressively to build our capacities to raise the independent patient voice throughout the

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American Association of Kidney Patients, Inc. 11-2306416 Federal policy-making process. In order for AAKP to maintain our leadership in protecting patient interests, and the overlapping interests among allies throughout the broader kidney community including the pharmaceutical industry and providers, we intend to grow our membership numbers, advance our National AAKP Ambassador Initiative, expand our reach internationally and equip kidney patients across the globe with proven and cost-effective training and technologies that make an impact on the policy process. The Center for Patient Engagement and Advocacy was created to leverage AAKP's increased profile and influence in the national public policy process and to expedite implementation of our national strategy to vastly expand patient involvement in the decisions impacting their health outcomes. The Center for Patient Engagement and Advocacy brings, under one focused area, all AAKP efforts to build patient and care partner membership in AAKP as well as their participation in existing and emerging AAKP patient health engagement and advocacy programs. Additionally, as part of the AAKP national strategy, the Center for Patient Engagement and Advocacy works to engage, train, certify and deploy kidney patients, living donors and care partners in ways that are the most effective at elevating the patient voice within Federal policy-making circles. This includes critical times when national legislation, health program implementation, regulations or potential delays in the pharmaceutical approval process pose a concern to patient access to quality care or their future healthcare outcomes. AAKP operates via key distinctives and principles: 6. Elevate patient voice in national issues and across drug, diagnostic and device development 7. Protect the unique relationship between patients and their doctors 8. Educate patients and preserve their access to choices as informed consumers of healthcare 9. Maintain full independence in all national policy and decisions - never surrender your letterhead 10. Honor the principle of "no surprises" among trusted allies and Federal government officials AAKP has a history of advocating on important

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 issues affecting patients' care, treatment, options, medications and such. The Advocacy Program helps support initiatives such as: Capitol Hill Day visits, participation in meetings/seminars/conventions, public policy, Communication, research issues affecting patients and practical tools that explain how to be more effective advocates. The Decade of the Kidney (NEW*) The Decade of the Kidney is a transformative announcement AAKP made in June of 2019 at its 2nd Annual National Policy Summit in Washington, D.C. designed to unite the community around a central thought - or a "big idea." From 2020-2030, during the Decade of the Kidney, we will see even greater contributions from every sector of our society and every discipline. These include medicine, science, academia, electedofficials, industry, media, entertainment, government, the military and insights from our veteran populations. These sweeping changes will not be limited to our shores as Americans - they will incorporate the vibrant contributions of scientists, researchers and clinicians around the world whose achievements are moving us closer to addressing the toughest kidney diseases. As patients we know that kidney disease affects people everywhere - it does not discriminate, it knows no political affiliation and it recognizes no border. To accelerate change, AAKP believes that a far larger strategic context and message is needed to unite a broader base of Americans and far more communities behind ongoing efforts to fight kidney disease and give hope to the 40 million Americans who suffer from kidney diseases. We believe that the Decade of the Kidney will do precisely that - help explain to the general public and national policy leaders that each of our singular efforts and innovations underway in kidney disease are in fact part of a far larger national effort to save and improve lives for those who suffer from kidney disease - and those yet to be diagnosed. AAKP recommitted itself to this original formula and strategy to gain new national relevance; exponentially greater engagement and growth among kidney patients and their families; and far greater influence to

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 push for greater patient choice and more innovative care options for patients. Working together, AAKP and its members and allies have achieved profound impacts in the past several years - including legislation that allows HIV to HIV organ transplants, lower prescription drug costs and, most recently, AAKP contributed to the White House Executive Order on Advancing American Kidney Health and the Department of Health and Human Services (HHS) initiatives to fight kidney disease. AAKP also believes that by uniting all sectors of the kidney community under one strategic theme - it will be far easier to secure additional media and grassroots support, national research funding and public understanding for kidney disease. Inaugural Global Summit (NEW*) The Global Summit is a two-day event in Washington, D.C. designed to engage the top international experts in the field of kidney care including healthcare professionals, academics, government leaders and regulators, industry experts, entrepreneurs and patient advocates. This event is a partnership of the George Washington University School of Medicine, one of the top medical schools in the nation with an internationally recognized kidney care program, and the American Association of Kidney Patients (AAKP), the oldest and largest fully independent kidney patient organization in the United States. 2019 Global Summit highlights include: Over 200 registrants, 35 presentations, 5 countries represented by speakers, and thousands of individuals across the globe, in 52 countries, watched the Summit live streamed. Panel presentations and discussions were recorded and archived on the AAKP website for enduring education. Speakers Bureau (NEW*) The AAKP Speakers Bureau, under the AAKP Center for Patient Engagement and Advocacy, provides the public, private sector companies and non-profit organizations with highly knowledgeable experts committed to advancing the AAKP mission through personal experiences and expertise. Speakers include AAKP National Board Members and National Ambassadors. Each speaker is well-prepared to talk before large and small audiences. Together, our speakers share a wide range of disease and

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American Association of Kidney Patients, Inc. 11-2306416 treatment experiences and their combined professional portfolios include published articles and books, participation in key government initiatives, industry focus groups and clinical trials, and testimony before Federal agencies. The AAKP Speakers Bureau is AAKP's contribution to the growing movement to generate greater public understanding of kidney disease nationwide, from local towns to the corridors of government in our nation's capital. AAKP Veterans Health Initiative (NEW*) The AAKP Veterans Health Initiative (VHI), based within the AAKP Center for Patient Engagement and Advocacy, is designed to advance research, innovation and policies aimed at safeguarding the highest standards in kidney care and treatment for veterans managing kidney disease both inside and outside the VA medical system. AAKP utilizes sophisticated social media and grassroots technologies to engage patients, medical professionals, and the public and to voice their concerns among policymakers. Veterans and their families face many unique challenges related to managing their healthcare and this is especially true for veterans who suffer from kidney and other complex, chronic diseases. AAKP is committed to making its fellow veterans have their voice heard, retain access to the care they have earned and are legally entitled to at the VA and elsewhere and gain the benefit of new research and innovations in the realms of biologics, diagnostics and devices. Capitol Hill Day Visits: These educational visits engage patients, care partners and healthcare professionals with their legislative representatives and staff to discuss current policy issues that affect patient care and quality of life. Participants are provided training on how to conduct respectful and substantive meetings before ever visiting Capitol Hill. AAKP also partners with medical professional organizations when policy issues related to patient services overlap with our strategic issue agenda. These organizations include, but are not limited to the following: " Alliance for Home Dialysis " Alport Syndrome Foundation " American Kidney Fund " American Society of Nephrology " American Society of Pediatric

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 Nephrology " American Society of Transplantation " American Society of Transplant Surgeons " Kidney Community Hill Day (a collaborative effort of over twelve national organizations) " Kidney Health Initiative " Medical Education Institute " National Kidney Foundation " National Renal Administrators Association " PKD Foundation " Renal Physicians Association " TransplantFirst Academy, and more. Contact AAKP for a full list of partners. AAKP's Ambassador Initiative: The AAKP Ambassador Initiative is part of our Center for Patient Engagement and Advocacy. Ambassadors are our most engaged volunteers - seasoned experts on kidney disease, dialysis, transplant, and living kidney donation. Ambassadors utilize their personal experiences and professional skills to contribute to both the AAKP mission and the larger kidney community based on their desire to serve a cause larger than themselves. AAKP helps provide Federal officials with the patient input they seek, through our Ambassadors' engagement. Ambassadors maintain relationships and communications with their elected leaders to be sure kidney disease is on their radar. They participate in focus groups, roundtables, Technical Evaluation Panels (TEPs), surveys, clinical trials, public testimony before Federal agencies, and more. AAKP Policy Summit: AAKP is a nationally recognized leader in patient education and advocacy and our independent insights are highly regarded and relied upon by government agencies, elected and appointed national policy-makers and policy influencers. With 50 years of effective patient engagement experience, AAKP knows that patients, government, researchers, professionals and industry working collaboratively together is the fastest way to transplant new innovations in kidney care into care solutions that impact patient health outcomes. The Policy Summit brings together key influencers from across all sectors of the policy spectrum for a two-day Summit that addresses the current state of kidney care at the crossroads of innovation, regulation and payment. Strategic Partnerships and Alliances: AAKP has maintained our national reputation as a trusted and independent voice for

Employer identification number Name of the organization American Association of Kidney Patients, Inc. 11-2306416 patients by both maintain our independence and through a select and targeted series of collaborative relationships with other non-profit professional and patient organizations. Before AAKP collaborates with any organization, we pose several questions to assess their credibility in our order to protect our organization and the patient interests we represent. These questions include: 1. Will our association with this organization discredit the AAKP mission and legacy? 2. Will our association with this organization confuse or contradict the AAKP message? 3. Will our association with this organization turn away potential long-term allies? 4. Will our association with this organization discourage elected/career policy-maker interest or support of policy goal? 5. Will our association with this organization fulfill a negative narrative already underway about your issue/community? Our current strategic partnerships and alliances include: " Academy of Nutrition and Dietetics " Alliance for Home Dialysis " Alport Syndrome Foundation " Alliance for Gout Awareness " Alliance for a Stronger FDA " American Kidney Fund " American Nephrology Nurses Association " American Society of Nephrology " American Society of Pediatric Nephrology " American Society of Transplant Surgeons " American Society of Transplantation "Dialysis Clinic, In. "Emory University "ESRD Rockstars " For Kidney's Sake, Inc. " Forum of ESRD Networks " Friends of NIDDK " Friends of HRSA " Home Dialyzers United " IGA Nephropathy Foundation of America " Kaiser Permanente GA " Kidney Health Initiative " Making Dialysis Safer Coalition " Medical Education Institute " National Association of Nephrology Technicians " National Kidney Foundation " National Renal Administrators Association " NephCure Kidney International "Oxalosis and Hyperoxaluria Foundation "Patient Access to Pain Relief (PAPR) " Patient Alliance for Drug Safety Protections " Polycystic Kidney Disease Foundation " ReMend " Renal Physicians Association " Renal Support Network " Rogosin Institute " Society of Transplant Social Workers " Southeastern Kidney Transplant Coalition " TRIO - Transplant Recipients International Organization " Veterans

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American Association of Kidney Patients, Inc. 11-2306416 Transplant Association, and more. Contact AAKP for a full list of partners. Federal Agency Engagement: Over the course of the past year, and again as a result of our national engagement strategy, AAKP has been heavily involved with multiple Federal agencies. AAKP has traditionally worked very closely with Federal agencies since our organization leads national efforts to establish the End Stage Renal Disease Program (ESRD), administered since 1973 by Department of Health and Human Services under the Centers for Medicare and Medicaid Services (CMS). AAKP values the civil service of the United States and has maintained strong relationships with programs, agencies and personnel under every Presidential Administration since 1973 and is non-partisan in our engagements with the U.S. civil service. Below are just a few of the agencies AAKP engaged with: " Center for Disease Control and Prevention (CDC) " White House Office of Science and Technology Policy (OSTP) " White House, National Economic Council (NEC) " U.S. Department of Health and Human Services (HHS) " U.S. Department of Labor (DOL) " U.S. Department of Defense (DoD) " DOL/Office of Disability Employment Programs (ODEP) " HHS/Centers for Medicare and Medicaid Assistance (CMS) " HHS/Center for Medicare and Medicaid Innovation (CMMI) " HHS/Food and Drug Administration (FDA) " HHS/National Institutes of Health (NIH) " HHS/National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) " HHS/Health Resources and Services Administration (HRSA) " Veteran's Administration (VA) In addition to these agency engagements, AAKP has served as the Chair of the CMS Technical Evaluation Panel (TEP) for the CMS Dialysis Facility Compare 5 Star Rating Program as well as multiple other TEP's. AAKP also holds multiple seats on the Board and subcommittees of the Kidney Health Initiative - an FDA/ASN breakthrough collaborative and is actively involved as well in the Clinical Trials Transformation Initiative, another breakthrough collaborative between the FDA and Duke University. AAKP leadership holds positions within the NIH Kidney Precision Medicine Program, the FDA Patient Engagement Advisory Panel,

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and the CDC Healthcare Infection Control and Advisory Council. Po	art VI 12c: All
members of the Board of Directors and employees of the organization	receive a
copy of the conflict of interest policy. The Executive Director and	all Board
members are required to complete and sign a written statement that	they have
been and are in compliance with this policy. 15a: The Executive Co	ommittee conducts
an annual review of the Executive Director's performance and recomm	ends any adjustment
to salary to the Board of Directors. The Board of Directors approve	s raises for
the Executive Director and approves the overall	
Pt III, Line 4d:	
Expenses: \$235,965 including grants of: \$0 Revenue: \$337,425	
Description: See Schedule O	
Pt VI, Section C, Line 17:	
State: NY	
Pt IX, Line 24e:	
Description: Fees, dues & subscript.	
Total: \$7,974	
Program services: \$815	
Management and general: \$2,244	
Fundraising: \$4,915	
Description: Telephone	
Total: \$5,658	
Program services: \$4,126	
Management and general: \$1,305	
Fundraising: \$227	
Description: Other	
Total: \$39,002	
Program services: \$24,832	