OMB No. 1545-0047 2017

Department of the Treasury Internal Revenue Service

Re n of Organization Exempt Fromcome Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u>A</u>	For the 2017 c	alendar year, or tax year beginning , and ending			
B	Check if applicable:	C Name of organization The Economic Science		D Employe	er identification number
X	Address change	Association, Inc.			
	Name change	Doing business as Number and street (or P.O. box if mail is not delivered to street address)			471312
	Initial return	6329 Lake Vista Circle	Room/suite	479-	466-5536
	Final return/	City or town, state or province, country, and ZIP or foreign postal code			100 0000
H	terminated	Tuscaloosa AL 35401	J.	G Gross rec	eipts\$ 283,008
H	Amended return	F Name and address of principal officer:			
	Application pending	Catherine Eckel	H(a) Is this a grou	p return for s	ubordinates? Yes X No
		Texas A & M, 400 Bizzell Street	H(b) Are all subo	rdinates incl	uded? Yes No
_		College Station TX 77843	If "No," a	attach a list	(see instructions)
1_	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527			
J		conomicscience.org	H(c) Group exem	ption numbe	or 🕨
_	Form of organization:	L Iba	r of formation: 19	986	M State of legal domicile: AZ
		mmary			
	1 Briefly de	scribe the organization's mission or most significant activities:			**************************************
Activities & Governance	See	Schedule O	*************		
nar	P 4 4 4 4 4 4 4 4 4 4			*******	
Ver	12///	р. — р. — — — — — — — — — — — — — — — —		0.000000	
တိ	2 Check this	s box ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its net asse	ts.	
රේ	3 Number o	f voting members of the governing body (Part VI, line 1a)	Y	3	21
tie	4 Number o	findependent voting members of the governing body (Part VI, line 1b)		4	21
ξį	a rotal num	per of individuals employed in calendar year 2017 (Part V, line 2a)	hat have been a second or only	5	0
Ā	j 6 lotainum	per of volunteers (estimate if necessary)		6	35
	/a lotal unre	lated business revenue from Part VIII, column (C), line 12		7a	0
Revenue	b Net unreia	ted business taxable income from Form 990-T, line 34	-	7b	0
	8 Contribution	ons and grants (Part VIII, line 1h)	Prior Year	,713	Current Year 12,134
	9 Program s	ervice revenue (Part VIII, line 2g)		, 930	270,738
eve	10 Investmen	I Income (Part VIII, column (A), lines 3, 4, and 7d)	230	127	136
æ		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	,248	130
		nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,018	283,008
	13 Grants and	d similar amounts paid (Part IX, column (A), lines 1–3)	233	,010	203,000
	14 Benefits pa	aid to or for members (Part IX, column (A), line 4)			0
S)	15 Salaries, o	ther compensation, employee benefits (Part IX, column (A), lines 5–10)			0
Expenses	16a Profession	al fundraising fees (Part IX, column (A), line 11e)			0
e d	b Total fundr	aising expenses (Part IX, column (D), line 25) ▶ 0			
ற	17 Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)	275	,286	301,303
	18 Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	275	286	301,303
	19 Revenue le	ess expenses. Subtract line 18 from line 12		732	-18,295
Net Assets or Fund Balances		Be	eginning of Currer		End of Year
Sset	20 Total asset	s (Part X, line 16)	270,	352	252,057
Ind	21 Total liabili	ties (Part X, line 26)		0	0
		or fund balances. Subtract line 21 from line 20	270,	352	252,057
		nature Block			
Un	der penalties of pe	rjury, I declare that I have examined this return, including accompanying schedules and statements, plete. Declaration of preparer (other than officer) is based on all information of which preparer has a	, and to the best	of my kno	wledge and belief, it is
	o, correct, and con	plete. Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge.	_	
Sig	Sign	ature of officer			
ler	1 2	3a B 1		Date	
ıçı		e or print name and title	er		
		reparer's name Preparer's signature	Date	1.	D. DTIN
aid				Check	if PTIN
rep	arer Firm's name		05/03/10	-	
	Only	P.O. Box 2412	Firm's	s EIN >	20-8111157
	Firm's addre		100 C		205-245-5200
lav		his return with the preparer shown above? (see instructions)	Phon	e no.	205-345-5300
	0.00000	(acc mornor)			X Yes No

_	orm 990 (2017) The Economic Science	74-2471312	Page 2
Р	Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to	any line in this Part III	П
1	1 Briefly describe the organization's mission:	any mic in this r art in	
	The ESA publishes two journals, sponso	rs and maintains online o	discussion
Ç	groups for its members and hosts confe	rences.	
	2.52.55.57.55.55.55.55.56.56.50.55.50.50.50.50.50.50.50.50.50.50.50.	(AUCE)CE/COCE (COCE (COCE (COCE (COCE + + + + + + + + + + + + + + + + + + +	
2	2 Did the organization undertake any significant program services during the	year which were not listed on the	
	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
3	3 Did the organization cease conducting, or make significant changes in how	it conducts, any program	
	services?	**************************************	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	and a second program of the grammer for each of the		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to rep	ort the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.		
	4a (Code:) (Expenses \$ 276,523 including grant	W 0	055 506
I	4a (Code:) (Expenses \$ 276,523 including grants The ESA was involved in 5 conferences Austria; SanDiego, CA; Taipei, Taiwan totals include a few expenses from con	this year; Richmond, VA; and the ASSA in Chicago,	Vienna, IL. These
		CHEST COUNTY CONTROL OF THE BUILDING CONTROL C	55555
	7 MATERIA (1971) VIII PROGRAMA (1971) VIII VIII VIII VIII VIII VIII VIII VI		

	WWW.11.W.11.W.11.		37.000.31.51.51.51.51.51.51.51.51.51.51
	4		*******************
	***************************************		181815181818181818181818181
	4b (Code:) (Expenses \$ 15,202 including grants		
P W	The ESA was involved in publishing two payments to the publisher for producing well as a prize for the best paper publiconsists of the journal royalties and necessary to cover the costs of the journal produced in the posts of	g and circulating the jou lished during the year. T the portion of membership	rnals as he revenue
T a m c n	4c (Code:)(Expenses \$ 9,578 including grants The ESA maintains a website to provide activities and its conferences. There a miscellaneous back office expenses. Exp credit card gateway. Revenues from the not required to pay for journal publica expenses.	information about the As are expenses to run that penses also include fees portion of the membership	as well as from the p dues
	* ************************************		
	2 ->		**********************
4 -	Ad Other and the Control of the Cont	7 3.7 - 1. 2 00 3.13 - 4500	
	Id Other program services (Describe in Schedule O.)) (D:	280
	(Expenses \$ including grants of \$ Ite Total program service expenses ▶ 301,303) (Revenue \$	
46	Le Lordi brodiain service exhenses > 20T. 202		

Part IV 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,"		103	NO
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
•	Part III	5		X
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			17
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	- 1	x
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1,12		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	**		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		-1	
	"Vos " and if the organization anguared "No" to line 42e then completing Schodule D. Both VI and VII is actional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	1 4 4 1	х	
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	1 1	- 1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_
	If "Yes," complete Schedule G, Part III	19		X

Part IV Checklist of Required Schedules (continued)

20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	Yes No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		١.
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		
2	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X
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	00	x
42	employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	
4 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		
	through 24d and complete Schedule K. If "No," go to line 25a	24a	x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b	- 23
C	Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240	
Ü	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	
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u	_
Ja	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	234	
-	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	x
6	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	230	
•	current or former officers, directors, trustees, key employees, highest compensated employees, or		
	disqualified persons? If "Yes," complete Schedule L, Part II	26	x
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1 1	
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	x
3	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	(4.4.4.4.8.8)	
	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	X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	204	
_	Schedule L, Part IV	28b	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	nananas T	
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х
)	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	(4004)0400	
	conservation contributions? If "Yes," complete Schedule M	30	X
ı	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		
	Part I	31	х
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	*******	
	complete Schodule N. Port II	32	Х
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	3151313	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	x
1	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	+11111111	
	or IV, and Part V, line 1	34	X
ā	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		Х
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	
i	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		
	and the description of the College Harmonia to College to the Coll	36	X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	11-11-1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		
	Port VI	37	x
}	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	Incested 5	
	19? Note . All Form 990 filers are required to complete Schedule O.	38	x

	1990 (2017)				_											74-2	411	312	2				F	age 5
Pa			ents Re																					
	(Check i	if Sched	ule O c	COI	onta	ains	a re	espo	onse	e or	<u>note</u>	to a	any I	ine in	this Pa	art V				1-			
4.0	Catas the a			Day 2 -4	4 -	-	40				r						8	200	1 -				Yes	No
1a	Enter the n													0.000	*****			1a	1					
b	Enter the n Did the org											•	•		proro	artere. go	22.15 8 nd	_1b		,				
·	reportable of							-	-		repo	Jrtabi	e pay	ymen	is to ve	endors a	na					10		
2a	Enter the n										smitt:	al of I	Mage	e and	Tay			V:4-0 1-0 1	Ī			1c		-
	Statements												_			urn		2a	C):				
b	If at least o						-				-			-		0.000000000	retur		1 -					
	Note. If the						_					•							100000		111111111111111111111111111111111111111			
3a	Did the orga				_						•	,	,		•			,				3a		x
b	If "Yes," has						_								-		dule (0	******			3b		
4a	At any time																		ity	Children a facilitation	***********			
	over, a final																							
	account)?			1.6.6252	310		Tan In															4a		X
b	If "Yes," ent	ter the na	ame of the	foreign	co	oun	itry: I			(2,5,5)				estette.		1001 0000								_
	See instruct	tions for	filing requ	irements	s fo	for F	FinCl	EN F	orm	114,	Rep	ort of	f Fore	eign E	Bank a	nd Finan	cial A	ccour	nts					
	(FBAR).																							
5a	Was the org																					5a		X
b	Did any taxa											y to a	a prof	hibite	d tax s	helter tra	ınsacı	tion?				5b		X
С	If "Yes" to li			_								17m.7	and a		14 19450		4.74					5c		
6a	Does the or	ganizatio	on have a	nnual gro	oss	ss re	eceip	ots th	at ar	e no	rmall	y gre	ater t	than \$	3100,0	00, and o	did the	Э						
	organization															10.0		111000				6a		X
þ	If "Yes," did			nclude w	vith	h ev	very s	solici	itatio	n an	expr	ess s	tater	ment	that su	ch contri	butio	ns or						
_	gifts were no									e e e	10000	00.0000000	COL 1000		. 00000	0.000 + 0.000000	91000	· · · · · ·	100		000000000000000000000000000000000000000	6b		
7	Organizatio													•	•									
а	Did the orga				nt ir	in e	xces	ss of	\$75	made	e par	tly as	a co	ontrib	ution a	nd partly	for g	oods						
	and services				33.1	35	000 000			Th		1000					a					7a		
	If "Yes," did																924.9	2				7b		
С	Did the orga			ange, or	r ot	othe	:rwise	e disp	pose	of ta	angib	le pe	rsona	al pro	perty f	or which	it was	3				1		
لہ	required to f							E E			01110		100000				· · · · · · · · · · · · · · · · · · ·					7c	_	
	If "Yes," indi																. L	7d				- ,		
e f	Did the orga Did the orga						-			-		•							E 200	ERCERCIO		7e 7f		
	If the organi		-							-				•				+ 0	20.00	roquiros				_
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	Did the spor					-									0.000	person?			2000	52 55 FF 195		9b		
0	Section 501										·			•		•	15005	1000 F300	100000	eger eger fær				
а	Initiation fee						ıded	on P	art V	/111, li	ne 12	2						10a						
	Gross receip												f clul	b faci	ities			10b						
1	Section 501	I(c)(12)	organizat	ions. En	nter	er:												:-				7		
а	Gross incom	ne from r	members	or sharel	hol	olde	ers										Į	11a						
b	Gross incom	ne from d	other sour	ces (Do i	not	ot ne	et an	noun	ıts dı	ne or	paid	to ot	her s	ource	s		· ·							
	against amo	unts due	e or receiv	ed from	the	nem.	i.)	The second second	Caraciana a							nersene senerarien	L	11b						
2a	Section 494	17(a)(1) r	non-exem	pt chari	ital	able	trus	sts. I	s the	e orga	aniza	ation f	filing	Form	990 ir	lieu of F	orm	1041?	?		10100011010	12a		
b	if "Yes," ente	er the an	nount of ta	ıx-exemp	pt i	inte	erest	rece	ived	or a	ccrue	ed du	ring t	the ye	ar		L	12b						
3	Section 501	(c)(29) c	qualified ı	nonprofi	fit h	hea	alth i	insur	ranc	e iss	uers	i.												
а	ls the organi	ization lic	censed to	issue qu	uali	lifie	d hea	alth p	plans	in m	nore f	than d	one s	state?	122012							13a		
	Note. See th									-														
b	Enter the am	nount of	reserves t	he organ	niza	zatio	on is	requ	ıired	to m	ainta	iin by	the s	states	in wh	ch	.00	10						
	the organiza				Jalii	lified	d hea	alth p	olans	0500	100000	05/00/00	0.60004	10000000	X4100000	-3-1000-11	(0.2)	13b				4 1		
	Enter the am				100	010001	1650	-0000	4 (6 4 4 4				00000		- FIX-0 - (E-088100		13c						-
	Did the orga															0.100,000,000	24000		201290		200000000000	14a	_	X
b	If "Yes," has	it filed a	Form 720	to repo	ort t	the	se p	ayme	ents?	? If "I	Vo, " /	provid	de an	expl	anation	in Sche	dule	0				14b		

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Sec	tion A. Governing Body and Management					
		n . 1	0.1	_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	21	_		
	If there are material differences in voting rights among members of the governing body, or					
	if the governing body delegated broad authority to an executive committee or similar					
	committee, explain in Schedule O.		0.1			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					1990
	any other officer, director, trustee, or key employee?	*******	1949944400000	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	2-22-41		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed'			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?	******	*****	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?	. (3		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		100000000000000000000000000000000000000	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	nal R	evenue C	ode.)		
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	79 X		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the for	m?	11a		X
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		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cor	nflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"					
	describe in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1 1		
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?	or. res	201011025000	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its					
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ AZ					200000
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50	1(c)(3)s	only)		.arcd68	1-41 DC(2)
	available for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	st polic	y, and			
	financial statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's books and record	ds: 🕨				

Cary Deck Tuscaloosa 6329 Lake Vista Circle

AL 35406-2981 479-466-5536

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.

X Check this box if neither the org	anization nor an	y rela	ated	orga	niza	tion com	pensated any current office	er, director, or trustee.	
(A) Name and Title				Pos check ess pe nd a c	rson lirecto	than one is both an r/trustee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1033-WISC)		and related organizations
(1) Catherine Eckel									
President	3.00			x			0	0	0
(2) Yan Chen									
A SOURCE POLICY AND A STREET WAS IN A STREET AND A STREET	3.00			.,			0		o
Past President (3) Dan Friedman	0.00	\vdash	_	X			0	0	0
(3) Dail FITECHMAII	3.00								
President Elect	0.00			x			0	0	0
(4) Gary Bolton									
N American Vice Pres	3.00 0.00			x			О	o	0
(5) Jordi Brandts									
European Vice Pres	3.00			x			0	o	0
(6) Lata Gangadhara				A					
(0) Za ca cangaana a	3.00								
Asia-Pacific V. Pres	0.00			x			0	0	0
(7) Ted Turocy									
18 PER PREPARATION PROPERTY AND PROPERTY OF STREET	3.00			,,				o	0
Information V. Pres (8) Cary Deck	0.00	\vdash		X			0	0	0
(a) Cary Deck	3.00								
Treasurer	0.00			x			0	0	0
(9)									
(- 184, (() + 184, (+ 184, (+ 184, () +									
(10)									
							1		
(11)									
T. C.	**************								

0

Form 990 (2017)

Total number of independent contractors (including but not limited to those listed above) who

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

DAA

For	m 99	90 (2017) The Economic Science		74-24,1312		Page 9
	art \	VIII Statement of Revenue				
		Check if Schedule O contains a response of	or note to any line in	this Part VIII	1-11-11-11-11-1	
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
tts.	1a	a Federated campaigns 1a				
Contributions, Gifts, Grants	ь	b Membership dues 1b 12,134				
S, C	c	Fundraising events 1c				
Sift	d	d Related organizations 1d				
15,	е	Government grants (contributions) 1e				
tion	f	f All other contributions, gifts, grants,				
Dq.		and similar amounts not included above				
Ties of	9	Noncash contributions included in lines 1a-1f: \$				
	h	n Total. Add lines 1a-1f	12,134			
Program Service Revenue		Busn. Code				
evel	2a		255,536	255,536		
ě	b	Prof. Journal Royalties	15,202	15,202		
ξ	C	1 *************************************				
Se	ď					
ran	e	4 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -				
50.	l	f All other program service revenue	070 720			
_	_ g		270,738			
	3	Investment income (including dividends, interest, and other similar amounts)	136			136
	4	Income from investment of tax-exempt bond proceeds	150			#30
	5	Royalties			-	
	ľ	(i) Real (ii) Personal				
	6a	Gross rents				
		Less: rental exps.				
	c					
	d					
	7a	Gross amount from sales of assets (ii) Securities (iii) Other				
		other than inventory				
	b	Less: cost or other				
		basis & sales exps.				
	С	Gain or (loss)				
	d					
e	8a	Gross income from fundraising events				
ent		(not including \$				
Rev		of contributions reported on line 1c).				
Other Revenue		See Part IV, line 18				
Ö		Less: direct expenses b				
		Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities. See Part IV. line 19				
	h	See Part IV, line 19 a Less: direct expenses b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less				
		returns and allowances a				
	b	Less: cost of goods sold b				
		Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Busn. Code				
	11a					
	b					
	C	7				
	d	All other revenue				
- 0	0	Total Add lines 11a-11d				

283,008

270,738

136

0

Total revenue. See instructions.

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 resp not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		охрынова	gorioral experises	baparises
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
_	3				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	7 000	7 000		
	(A) amount, list line 11g expenses on Schedule O.)	7,800	7,800		
	Advertising and promotion				
13 14	Office expenses				
15	Information technology				
16	Royalties				
17	Occupancy Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	276,523	276,523		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	771	771		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column		1		_
	(A) amount, list line 24e expenses on Schedule O.)				
а	Fees to Journal Publisher	15,202	15,202		
b	Misc Expenses	1,007	1,007		
С	Вудатальнатальнать принца в доположение в вести				
d	TICHTER BENEROUS PROPERTY OF A DESCRIPTION OF A DESCRIPTI				
е	All other expenses				
	Total functional expenses. Add lines 1 through 24e	301,303	301,303	0	0
6	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

		(A)		(B)
-		Beginning of year		End of year
1	The second of th	270,352		252,05
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
1	Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
3 _	organizations (see instructions). Complete Part II of Schedule L		6	
7			7	
٠ ۱	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
108	Land, buildings, and equipment: cost or			
1.	other basis. Complete Part VI of Schedule D			
1	Less: accumulated depreciation 10b		10c	
11			11	
12			12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	000 000	15	050 051
16	Total assets. Add lines 1 through 15 (must equal line 34)	270,352	16	252,05
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors,			
	trustees, key employees, highest compensated employees, and			
22	disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
20	of Schedule D	0	25	C
20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	0	26	
	· " — —			
27	complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets	270,352	07	252 055
28	* * * * * * * * * * * * * * * * * * *	210,332	27	252,057
29	Temporarily restricted net assets		28	
23	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and		29	
	complete lines 30 through 34.			
27 28 29 30 31 32	Combal stands as the stands of		20	
24			30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Retained earnings, endowment, accumulated income, or other funds	270,352	32	252,057
33	Total lightilities and not see to found helphones	270,352	33	252,057
34	Total liabilities and net assets/fund balances	210,332	34	Form 990 (2017

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orm 990 (2	017) The	Economic	Science

-orn	1990 (2017) The Economic Science 74-2471312			Pa	ge IZ
Pa	rt 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		83,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		01,	
3	Revenue less expenses. Subtract line 2 from line 1	3			295
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	70,	352
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	2!	52,	057
Pa	rt XII Financial Statements and Reporting			54	-
	Check if Schedule O contains a response or note to any line in this Part XII		CHARLES AND A		Ш
			-	Yes	No
1	Accounting method used to prepare the Form 990: X 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		<u>X</u>
	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		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	.00.0000	7.53		
	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		- 1 1		
	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		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	50-150-055			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
				000	

Form **990** (2017)

SCHEDULE A (Form 990 or 990-EZ)

Pulic Charity Status and Publicupport

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

QUII
Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization The Economic Science
Association, Inc.

Employer Identification number 74-2471312

Part I 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.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% 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.) 11 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 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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. 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) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (I) Name of supported (II) EIN (III) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 support (see other support (see document? instructions) above (see instructions)) instructions) Yes No (A) (B) (C) (D) (E) Total

74-2471312

Page 2

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.)

Sec	ction A. Public Support	ialis to quality	didei the test	s listed below,	picase comple	te i ait iii.)	
	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support				1		195
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's firs	st, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2017 (line 6,			nn (f))			%_
15	Public support percentage from 2016 Sche		E	5-10-1-00-1-00-1-00-1-0			%
16a	33 1/3% support test—2017. If the organi				33 1/3% or more,	check this	. —
	box and stop here. The organization qualit			*(A, B) * A) * A) * A) * (A) (A) (A) (A) (A)	900000 00 00 0000		
b	33 1/3% support test—2016. If the organic				15 is 33 1/3% or m	ore, check	N [
	this box and stop here. The organization of						
17a	10%-facts-and-circumstances test—201	-					
	10% or more, and if the organization meets Part VI how the organization meets the "fac						
	organization	Jis-and-Circumsta	mices test. The org	gamzadon qualines	as a publicly sup	ported	▶ □
h	10%-facts-and-circumstances test—201		ion did not check a			d line	X-000000000000000000000000000000000000
þ	15 is 10% or more, and if the organization	-					
	Explain in Part VI how the organization me						
	supported organization			_		20019	▶ □
8	Private foundation. If the organization did		on line 13, 16a, 16			ee	
-	instructions						• [



74-2471312

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

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

Sec	etion A. Public Support	quality diract til	e tests listed by	siow, picase oc	implete r art ii.)		
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	31,459	34,386	32,430	30,713	12,134	141,122
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	222,647	189,183	181,235	268,178	270,738	1,131,981
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	254,106	223,569	213,665	298,891	282,872	1,273,103
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	3,170	4,210	5,150	4,580	2,240	19,350
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	3,170	4,210	5,150	4,580	2,240	19,350
8	Public support. (Subtract line 7c from line 6.)						1,253,753
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	254,106	223,569	213,665	298,891	282,872	1,273,103
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	92	95	108	127	136	558
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	92	95	108	127	136	558
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.)	254,198	223,664	213,773	299,018	283,008	1,273,661
14	First five years. If the Form 990 is for the organization, check this box and stop here	organization's first,					2,2,3,302
Sec	tion C. Computation of Public Su		ae				******
5	Public support percentage for 2017 (line 8,			(f))		15	98.44 %
6	Public support percentage from 2016 Sche						98.00%
-	tion D. Computation of Investmen	77.5.01					
7	Investment income percentage for 2017 (lir			column (f))		17	%
8	Investment income percentage from 2016		-	3311010		18	%
9a	33 1/3% support tests—2017. If the organ			14, and line 15 is n	nore than 33 1/3%,	and line	[
	17 is not more than 33 1/3%, check this bo	x and stop here . T	he organization qu	alifies as a publicly	y supported organi:	zation	× X
b	33 1/3% support tests—2016. If the organ	ization did not ched	ck a box on line 14	or line 19a, and lin	ne 16 is more than	33 1/3%, and	
	line 18 is not more than 33 1/3%, check this	s box and stop her	e. The organization	n qualifies as a pul	blicly supported org	ganization	
20	Private foundation. If the organization did	not check a box or	line 14, 19a, or 19	b, check this box	and see instruction	IS THE TOO BE SOURCE	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a (b) and (c) below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use,
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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).
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 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).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined 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.
- 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.
- 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.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		_
46		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b m 990		

secti	on E.	Type II	l Functionally	/-Integrate	d Supportin	g Organizations		
1	Check	the box	next to the metho	d that the orga	anization used to	satisfy the Integral Par	t Test during the year	(see instri

а The organization satisfied the Activities Test. Complete line 2 below.

b The organization is the parent of each of its supported organizations. Complete line 3 below.

The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). C

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

- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- 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.

	Yes	No
2a		
2b		
3a		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	ganizati	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on I	Nov. 20, 19	970 (explain in Part VI).	See
instructions. All other Type III non-functionally integrated supporting organizations m	nust compl	ete Sections A through E	
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-functionally integrated instructions).	d Type III s	supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

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Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organiza	tions (continued)	<u></u>
Sec	tion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purpo	oses of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	apported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions, Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the orga	nization is responsive		
	(provide details in Part VI). See instructions.	<u> </u>		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			Tantouni for 2011
2	Underdistributions, if any, for years prior to 2017			
-	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2017:			
а				
b	From 2013			
С	From 2014			
	From 2015			
е	From 2016			
f	Total of lines 3a through e			
q	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
ì	Carryover from 2012 not applied (see instructions)			
- 1	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, 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 2017. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
-	Excess from 2013			
	Excess from 2013			
	Excess from 2015			
	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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.

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or 990-EZ.
➤ Go to www.irs.gov/Form990 for the latest information.

2017

Open to Public Inspection

Name of the organization The Economic Science
Association, Inc.

74-2471312

Employer identification number

Form 990 - Organization's Mission or Most Significant Activities
An educational and scientific organization that sponsors conferences,
maintains a professional website and is a contractual holder of rights in
two professional journals (Experimental Economics and The Journal of the
Economic Science Association).

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The tax information is supplied by the Treasurer to the accounting firm which prepared the return for the organization. After completion, they are emailed to the President of the Association. They are also uploaded to the website of the Association and made publicly available for veiwing by any interested party. The website, economicscience.org, maintains public copies of the records going back many years. The website also contains other documents regarding governing policies for the Association. At the yearly international conference, the Treasurer drafts and presents a full report regarding the financial picture of the organization which is presented to the assembled board members with highlights of it also often incorporated by the Association President in their presentation to the full membership.

Form	1990,	Part VI,	Line 19	- Go	vernir	ng Docume	nts Di	sclosure	Explanation
See	Above	Disclosu	re - For	m 990	Part	VI, Line	11b.		. 616

C2465 The Economic Science

74-2471312

Federal Statements

5/3/2018 5:12 PM

FYE: 12/31/2017

<u>Taxable Interest on Investments</u>

Descript	tion					
	_	Amount	Unrelated Business Code		Acquired after 6/30/75	US _Obs (\$ or %)_
Interest Income						
	\$_	136		14		
Total	\$	136				

74-2471312 -YE: 12/31/2017	.2465 The Economic Science 74-2471312 FYE: 12/31/2017	Federal Statements	5/3/2018 5:12 PM
	Ш	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	4
fisc Labor Total	Description	Total Program Management & General \$ 7,800 \$ 7,800 \$ \$ 7,800 \$ 7,800 \$	Fund Raising
		Schedule A, Part III, Line 7a - Support from Disqualified Persons	
	Donor Name	\$ 3,170 \$ 4,210 \$ 5,150 \$ 4,	580 \$ 2,240