PUBLIC INSPECTION COPY

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2025

Open to Public Inspection

A For the 2025 calendar year, or tax year beginning January 01 , 2025, and ending December 31 , 20 25

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization American Academy of Otolarngic Allergy Foundation In

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 11130 SUNRISE VALLEY DR STE 100,

Room/suite

City or town, state or province, country, and ZIP or foreign postal code: Reston, VA 20191-5474

D Employer identification number: 22-2480270

E Telephone number: (202) 955-5010

G Gross receipts $ 492,299

F Name and address of principal officer: Jami Lucas
11130 SUNRISE VALLEY DR STE 100, Reston, VA 20191-5474

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions.

H(c) Group exemption number

I Tax-exempt status: ☑ 501(c)(3) ☐ 501(c) ( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: www.aaoallergy. org-foundation

K Form of organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation: 1981

M State of legal domicile: DC

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: See Schedule O.

2 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	7
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2025 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	7
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	9,600	9,600
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	535,812	354,552
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	545,412	364,152

Expenses

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	61,748	28,857
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	11,445	14,814
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) 0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	37,761	29,870
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	110,954	73,541
19	Revenue less expenses. Subtract line 18 from line 12	434,458	290,611

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	9,561,874	11,014,666
21	Total liabilities (Part X, line 26)	93,828	55,067
22	Net assets or fund balances. Subtract line 21 from line 20	9,468,046	10,959,599

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.

Sign Here

Signature of officer

Date 09/25/2026

Jami Lucas

Type or print name and title Jami Lucas, Chief Executive Officer

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
R Michael Sorrells		09/25/2026		P00001737

Firm's name EO Tax Services LLC — Firm's EIN 87-1873512

Firm's address 4508 Sunflower Dr, Rockville, MD 20853 — Phone no. (301) 807-3599

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No