Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY

DiPiazza, LaRocca, Heeter & Co., LLC P. O. Box 530095 Birmingham, Alabama 35253-0095

July 27, 2021

Alabama Mining Association f/k/a Alabama Coal Association 2 North Jackson Street No. 402 Montgomery, AL 36104 Attention: Patrick Cagle

Dear Patrick,

Enclosed is the organization's 2020 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

In order to prevent the Association from paying income or excise taxes, you should continue the practice of notifying members of the non-deductible percentage of the dues for each year in which you have lobbying expenses. Form 990 now requires the completion of Schedule C to report the lobbying expenses and members dues. Please review Schedule C.

Please review the return for completeness and accuracy.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return.

We prepared return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We have provided you tax advice in connection with the preparation of your U.S. federal tax return and associated tax planning services we have furnished. This advice is not intended or written to be used by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer by the Internal Revenue Service, and it cannot be used by any taxpayer for such purpose.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

Monty & Warter, OPA

Monty S. Waites, CPA

Form 8879-EO	IRS e-file Signate	ure Authorization t Organization		OMB No. 1545-0047
	-	-		
	For calendar year 2020, or fiscal year beginning		20	2020
Department of the Treasury Internal Revenue Service		S. Keep for your records. 79EO for the latest information.		
Name of exempt organization			Taxpayer	identification number
ALABAMA MININ				
	COAL AGGOCTATION		63-0	635462
Name and title of officer or pe				
PATRICK CAGLE				
PRESIDENT				
Part I Type of I	Return and Return Information (Whole	Dollars Only)		
check the box on line 1a , 2 blank, then leave line 1b , 2 return, then enter -0- on the	n for which you are using this Form 8879-EO and a, 3a, 4a, 5a, 6a, or 7a below, and the amount o b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, applicable line below. Do not complete more th	n that line for the return being filed with blank (do not enter -0-). But, if you enter an one line in Part I.	this form v red -0- on th	vas
	b Total revenue, if any (Form 990, F			
2a Form 990-EZ check h	· , , , , , , , , , , , , , , , , ,			
3a Form 1120-POL chec		., line 22)		
4a Form 990-PF check h		ome (Form 990-PF, Part VI, line 5)		
5a Form 8868 check here 6a Form 990-T check here		3c)		
		line 4)		
7a Form 4720 check here	on and Signature Authorization of Of	line 1) ficer or Person Subject to Tax	/D	
	I declare that $\boxed{\mathbf{X}}$ I am an officer of the above o			with respect to
		•	-	
to receive from the IÁS (a) processing the return or re Agent to initiate an electro software for payment of th a payment, I must contact (settlement) date. I also au confidential information ne identification number (PIN) PIN: check one box only	nediate service provider, transmitter, or electronic an acknowledgement of receipt or reason for reje und, and (c) the date of any refund. If applicable ic funds withdrawal (direct debit) entry to the finan- e federal taxes owed on this return, and the finan- the U.S. Treasury Financial Agent at 1-888-353-45 horize the financial institutions involved in the pro- cessary to answer inquiries and resolve issues rel as my signature for the electronic return and, if a	ection of the transmission, (b) the reason, , I authorize the U.S. Treasury and its d ancial institution account indicated in the ical institution to debit the entry to this a 337 no later than 2 business days prior bocessing of the electronic payment of ta ated to the payment. I have selected a pplicable, the consent to electronic func-	on for any d esignated F le tax prepa account. To to the payn axes to rece personal ds withdrav	elay in Financial aration o revoke nent sive val.
X I authorize DI	PIAZZA LAROCCA HEETER & C	0., LLC	to enter m	y PIN 35223
	ERO firm name			Enter five numbers, but do not enter all zeros
a state agency(ie PIN on the return As an officer or p electronically file	on the tax year 2020 electronically filed return. If I s) regulating charities as part of the IRS Fed/Stat 's disclosure consent screen. erson subject to tax with respect to the organiza d return. If I have indicated within this return that es as part of the IRS Fed/State program, I will ent	e program, I also authorize the aforeme tion, I will enter my PIN as my signature a copy of the return is being filed with a	ntioned ER on the tax a state ager	O to enter my year 2020 ncy(ies)
Signature of officer or person subject	to tax tion and Authentication		Date	e 🕨
ERO's EFIN/PIN. Enter vo	ur six-digit electronic filing identification			
•	your five-digit self-selected PIN.	63743410000 Do not enter all zeros		
	eric entry is my PIN, which is my signature on the turn in accordance with the requirements of Pub iness Returns.	. 4163, Modernized e-File (MeF) Informa	ation for Au	
ERO's signature 🕨		Date 07 /	27/21	
	ERO Must Retain This F Do Not Submit This Form to the		So	
LHA For Paperwork Rec	uction Act Notice, see instructions.			Form 8879-EO (2020)

023051 11-03-20

(Rev. January 2020)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

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

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

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

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

Application Return Application Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 4720 (individual) 02 Form 1041-A 06 Form 990-FE 04 Form 5227 10 Form 990-FE 04 Form 5227 10 Form 990-FE 04 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 PATRICK CAGLE Form 8870 12 12 PATRICK CAGLE Form 8870 12 12 If the books are in the care of ▶ 2 NORTH JACKSON STREET, NO. 402 - MONTGOMERY, AL 36104 12 Telephone No. ▶ (334) 354 - 0107 Fax No. ▶	Type or print				Taxpayer identification numb			(TIN)
City, town or post office, state, and ZP code. For a foreign address, see instructions. MONTGOMERY, AL 36104 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 Application Return Application Return Ser Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990 regression 02 Form 1041-A 06 Form 990 regression 03 Form 4720 (chter than individual) 06 Form 990 regression 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 06 Form 8870 12 PATRICK CAGLE Form 800-T (sec. 401(a) or 408(a) trust) 06 If the organization of sour digit Group Exemption Numer (GEN) .ft this is for the whole group, check this box	due date for filing your			ions.				
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Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 06 Form 920-BL 03 Form 4720 (individual) 06 Form 990-BL 04 Form 4720 (individual) 06 Form 990-FF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 PATRICK CAGLE PATRICK CAGLE Form 8870 12 If the organization does not have an office or place of business in the United States, check this box	Applicati	on	Return	Application			F	Return
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Form 4720 (individual) 03 Form 4720 (other than individual) 05 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 870 12 PATRICK CAGLE PATRICK CAGLE 12 NONTGOMERY, AL 36104 Telephone No. ► (334) 354-0107 Fax No. ►	Form 990) or Form 990-EZ	01	Form 990-T (corporation)				07
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PATRICK CAGLE • The books are in the care of ▶ 2 NORTH JACKSON STREET, NO. 402 - MONTGOMERY, AL 36104 Telephone No. ▶ (334) 354-0107 Fax No. ▶ • If the organization does not have an office or place of business in the United States, check this box • If the organization does not have an office or place of business in the United States, check this box • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) • If it is for part of the group, check this box ▶ • If it is for part of the group, check this box ▶ • If the organization named above. The extension is for the organization's return for • X calendar year 2020 or • 1 tray ear entered in line 1 is for less than 12 months, check reason: • The tax year entered in line 1 is for less than 12 months, check reason: • If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. • If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. • Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. • Caution: If you ar	Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
 The books are in the care of > 2 NORTH JACKSON STREET, NO. 402 - MONTGOMERY, AL 36104 Telephone No. > (334) 354-0107 Fax No. >	Form 990		06	Form 8870				12
any nonrefundable credits. See instructions. 3a \$ b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 3b \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 3b \$ using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment	 If this box ▶ 1 I re the ▶ 2 If the ▶ 	is for a Group Return, enter the organization's four digit (. If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until organization named above. The extension is for the orga X calendar year 2020 or tax year beginning ne tax year entered in line 1 is for less than 12 months, ch Change in accounting period	Aroup Exe and atta NOVEN anization's , an neck reaso	mption Number (GEN), . ch a list with the names and TINs of MBER 15, 2021 , to file return for: d ending on: Initial return	If this is fo all member the exem	r the whole g ers the extension organizati	sion is for.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 3b \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 3c \$ using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment			or 6069, e	enter the tentative tax, less				0
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment See Top Payment					3a	\$		0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$ Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment			, ,					0
using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$c Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment Sc					3b	\$		0.
Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment								0
						\$		0.
LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-20	instructio	ns.			453-EO an			

023841 04-01-20

			EXTENDED TO NOVEMBER	-		_	OMB No. 1545-0047
OOD Return of Organization Exempt From Income Tax						0000	
Form 990 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)							
Depa	Department of the Treasury					Open to Public	
Interr	nal Reve	enue Service	Go to www.irs.gov/Form990 for instructions			ation.	Inspection
				and ending			
	heck if	le.	f organization		D Em	ployer identific	cation number
	 ⊣Addre	ALAE	SAMA MINING ASSOCIATION				
	chang	ge F'/K/	A ALABAMA COAL ASSOCIATION				c o
	Name chang		usiness as			53-06354	
	_returr Final	n Number	r and street (or P.O. box if mail is not delivered to street address)	Room/s		ephone number	
	lreturr termi	n_	ORTH JACKSON STREET	402		(205) 873	
	ated ∖Amer		town, state or province, country, and ZIP or foreign postal code			ss receipts \$	441,881.
	_returr ⊐Appli		GOMERY, AL 36104			s this a group re	
	_ tiòn pendi		and address of principal officer: PATRICK CAGLE			or subordinates	
			AS C ABOVE	(1)			
		empt status:	501(c)(3) X 501(c) (6) ◀ (insert no.) 4947(a) ALABAMAMINING.ORG	(1) or			list. See instructions
_		f organization:	Corporation Trust X Association Other				State of legal domicile: AL
_	art I	- U			Year of forma		State of legal domicile; AL
		,	be the organization's mission or most significant activities: TO	DROMO	ייד איי		
e	1		ABLE MINING OF THE NATURAL RESOU	RCES 1	THAT ST	PRENCTHE	
ja n	2		\blacktriangleright if the organization discontinued its operations or dis				
Governance	2						14 III
ğ	4		ting members of the governing body (Part VI, line 1a)				14
	5		of individuals employed in calendar year 2020 (Part V, line 2a)				2
Activities &	6						0
ť	-		of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12				0.
¥			business taxable income from Form 990-T, Part I, line 11				0.
	~			<u></u>		or Year	Current Year
	8	Contributions	and grants (Part VIII, line 1h)			22,747.	359,873.
Revenue	9		ice revenue (Part VIII, line 2g)			04,706.	76,152.
švel		•	come (Part VIII, column (A), lines 3, 4, and 7d)			6,510.	5,856.
ž	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			3,940.	0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12		5	537,903.	441,881.
	13		milar amounts paid (Part IX, column (A), lines 1-3)			1,000.	0.
	14		to or for members (Part IX, column (A), line 4)			0.	0.
S	15		r compensation, employee benefits (Part IX, column (A), lines 5-1		2	232,705.	199,229.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)			0.	0.
per	b		ing expenses (Part IX, column (D), line 25)	0.			
ш	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		1	.89,395.	227,731.
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		4	23,100.	426,960.
	19	Revenue less	expenses. Subtract line 18 from line 12		1	14,803.	14,921.
Assets or d Balances					Beginning	of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,0	80,126.	1,093,703.
ASt	21	Total liabilities	s (Part X, line 26)			1,344.	0.
Funct	22		fund balances. Subtract line 21 from line 20		1,0	78,782.	1,093,703.
	art II						
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying sched	dules and sta	itements, and	to the best of my	knowledge and belief, it is
true	corre	ct, and complete	e. Declaration of preparer (other than officer) is based on all information o	of which prep	arer has any	knowledge.	

Sign Here	Signature of officer PATRICK CAGLE, PRESIDE Type or print name and title	NT	Date						
Paid	Print/Type preparer's name MONTY S. WAITES, CPA	Preparer's signature	Date Check PTIN 07/27/21 self-employed P00438717						
Preparer	· · · · · ·	HEETER & CO., LLC	Firm's EIN ▶ 26-3731278						
Use Only	Firm's address P O BOX 530095								
	BIRMINGHAM, AL 3	5253-0095	Phone no. (205) 871-9973						
May the If	May the IRS discuss this return with the preparer shown above? See instructions								
032001 12-2	D32001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)								

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	ALABAMA MINING ASSOCIATION 990 (2020) F/K/A ALABAMA COAL ASSOCIATION 63-0635462 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	VARIOUS ACTIVITIES TO PROMOTE SAFE AND SUSTAINABLE MINING INCLUDING
	MEMBER MEETINGS AND EDUCATING THE PUBLIC THROUGH MEDIA OUTREACH.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
5	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$359,047. including grants of \$) (Revenue \$76,152.)
	VARIOUS ACTIVITIES TO PROMOTE SAFE AND SUSTAINABLE MINING INCLUDING
	MEMBER MEETINGS AND EDUCATING THE PUBLIC THROUGH MEDIA OUTREACH.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	(), (), (, /, (, /, (
ا م ۸	Other program convises (Describe on Schedule O)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 359,047.
	Form 990 (2020)
032002	12-23-20
	3

ALABAMA MINING ASSOCIATION F/K/A ALABAMA COAL ASSOCIATION

63-0635462 Page	3
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	990 (2020) F/K/A ALABAMA COAL ASSOCIATION 63-063	5462	Р	age 3
Par	t 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," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	<u> </u>
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		X
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 donor-restricted endowments			
	or in 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, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	<u> </u>
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
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 "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional			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?	14a		X
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 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	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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
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ALABAMA MINING ASSOCIATION Form 990 (2020) F/K/A ALABAMA COAL ASSOCIATION Part IV Checklist of Required Schedules (continued)

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			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		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 employees? If "Yes, " complete			
	Schedule J	23		X
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		Х
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		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
h	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			
		25b		
26	Schedule L, Part I	230		<u> </u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
04		34		х
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
		35a		- 23
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	OF-		
00	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			37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
D	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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ALABAMA MINING ASSOCIATION

<u>Form</u>	990 (2020) F/K/A ALABAMA COAL ASSOCIATION 63-0635	<u>462</u>	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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).	_		77
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	-		
-1	to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7-		
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
0		8		
9	Sponsoring organization nave excess business holdings at any time during the year?	-		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	0.0		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

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ALABAMA MINING ASSOCIATION F/K/A ALABAMA COAL ASSOCIATION

Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 th	nrough	7b below, and for a "	No" re	spons	e
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C					
						X
Sec	tion 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	14			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship		nv other			
	officer, director, trustee, or key employee?		,	2		Х
3	Did the organization delegate control over management duties customarily performed by or under th	e direct	supervision			
-	of officers, directors, trustees, or key employees to a management company or other person?			3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was	filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the encoding these merchanes are the slide set of a			6		X
7a	Did the organization have members or stockholders, or other persons who had the power to elect or ap					
14		•		7a		x
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			<i>1</i> a		
b			,	7b		х
Q	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			10		
8			-	0-	х	
a	The governing body?			8a 0h	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b	Λ	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			9		x
Sac	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		л
	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Gode.)		Vee	Ne
10-	Did the exercise time level characters to an efficience			10-	Yes	No X
	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 such ch	lapters	anniates,	10b		
44~	and branches to ensure their operations are consistent with the organization's exempt purposes?		filing the form?	11a	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y belor		11a	<u></u>	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10-		х
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a 12b		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>	,		10-		
40	in Schedule O how this was done			12c 13		x
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14		X
14 15				14		
15	Did the process for determining compensation of the following persons include a review and approva persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	а Бу Ш	ieperiuerit			
-				150		х
	The organization's CEO, Executive Director, or top management official			15a 15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent w	th a			
100				16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			104		
D						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			16b		
Sec	exempt status with respect to such arrangements?			100		
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 000	T (Section 501(c)(3)s		availa	
10	for public inspection. Indicate how you made these available. Check all that apply.	10 330		(Grify)	avalid	
	Own website X Another's website X Upon request Other (explain	0000-	hadula ()			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	rial	
13	statements available to the public during the tax year.	a milot U	and policy, and	midiil	101	
20	State the name, address, and telephone number of the person who possesses the organization's bo	nke and	records			
20	PATRICK CAGLE - (334) 354-0107	uno ant				
		5104				
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Form 990 (2020	0) F/K/A ALABAMA COAL ASSOCIATION	63-0635462	Page 7
Part VII Co	ompensation of Officers, Directors, Trustees, Key Employees, Highest Co	ompensated	
Er	nployees, and Independent Contractors		
Ch	eck if Schedule O contains a response or note to any line in this Part VII		
Section A. O	fficers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete t	his table for all persons required to be listed. Report compensation for the calendar year ending	with or within the organization's	s tax vear

ired to be listed. Report compensation for the calendar year ending with or within the organ • 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."

ALABAMA MINING ASSOCIATION F/K/A ALABAMA COAL ASSOCIATION

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C) Position						(D)	(E)	(F)
Name and title	Average hours per		not c	heck i ss per	more	than o		Reportable compensation	Reportable compensation	Estimated amount of
	week	offi		nd a di				from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or di	tee			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	al trus		yee	mpen		(00-2/1033-10130)		and related
	below	idual 1	Institutional trustee	er	Key employee	est co oyee	er			organizations
	line)	Indiv	Instit	Officer	Key e	High empl	Former			
(1) PATRICK CAGLE	40.00									
PRESIDENT		X		Х				137,500.	0.	0.
(2) BRETT BUSSMAN	1.00									
DIRECTOR		X						0.	0.	0.
(3) JOHN MCNAB	1.00									
DIRECTOR		Х						0.	0.	0.
(4) TONY NELSON	1.00									
TREASURER		X		Х				0.	0.	0.
(5) LANCE TUCKER	1.00									
DIRECTOR		X						0.	0.	0.
(6) RANCE PERRY	1.00									
DIRECTOR	1.00	X						0.	0.	0.
(7) BUDDY JONES	1.00								•	
SECRETARY	1 0 0	X		X				0.	0.	0.
(8) WALT SCHELLER	1.00							•	0	0
DIRECTOR	1 00	X						0.	0.	0.
(9) JON HALE	1.00							0	0	0
CHAIRMAN (10) FDIG NUDETN	1 00	X		X				0.	0.	0.
(10) ERIC MARTIN	1.00	v		x				0.	0.	0
1ST VICE CHAIRMAN (11) RICHARD MULLEN	1.00	X		Δ				0.	0.	0.
2ND VICE CHAIRMAN	1.00	x		x				0.	0.	0.
(12) TIM PARKER, III	1.00	^		Δ				0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(13) RICK STEWART	1.00								0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(14) MICHAEL ABNER	1.00								.	J •
DIRECTOR		x						0.	0.	0.
									••	
		1								
		1								
		1								
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Forn	ALABAMA 1 990 (2020) F/K/A ALZ								ION	63-06	5354	462	Pa	age 8
	TVII Section A. Officers, Directors, Trus (A) Name and title		oloy	ees,	and ((Pos	d Hig C) sitior	ghes	st C					(F) mate	
		hours per week (list any hours for related organizations below line)	box	, unle	ss pe	rson i	Highest compensated singly a single set and the set of	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	6	c comp fro orga	m the nizati relate	tion e on ed
			-											
			-											
			-											
			-											
			-											
1b	Subtotal		-						137,500.		0.			0.
c d	Total from continuation sheets to Part V Total (add lines 1b and 1c)	I, Section A	·····						0. 137,500.		0.			0.
2	Total number of individuals (including but r compensation from the organization	iot limited to th	ose	liste	ed an	DOVE	e) wn	o re	eceived more than \$100,0	JUU of reportable			Yes	1 No
3 4	Did the organization list any former officer line 1a? <i>If "Yes," complete Schedule J for s</i> For any individual listed on line 1a, is the su	uch individual										3		x
5	and related organizations greater than \$15 Did any person listed on line 1a receive or a	0,000? <i>If</i> "Yes, accrue compen	" co Isati	<i>mpl</i> on fi	ete S rom	Sche any	edule unre	e <i>J i</i> elate	for such individual ed organization or individ	lual for services		4		X
Sec	rendered to the organization? If "Yes," con tion B. Independent Contractors	nplete Schedule	e <i>J f</i>	or si	ich j	bers	on					5		Х
1	Complete this table for your five highest co the organization. Report compensation for										ensat			
	(A) Name and business	address	N	ONI	3				(B) Description of s	ervices	C	(C) ompen:		ו
2	Total number of independent contractors (i \$100,000 of compensation from the organi	•	ot lir	niteo	d to	thos (ted	above) who received mo	ore than				
		F										Form 9	90 (2	2020)

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	<u>1 990 (</u>	(2020) F/H	K/A ALA		G ASSOCIA COAL ASS			63-0635	462 Page 9
Pa	rt VII								_
		Check if Schedule O	<u>contains a re</u>	esponse	or note to any line	<u>in this Part VIII</u> (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d f f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (cont All other contributions, gifts, similar amounts not included Noncash contributions included in Total. Add lines 1a-1f	ributions) grants, and d above	1c 1d 1e 1f 1g \$	359,873. ▶ Business Code	359,873.			
Program Service Revenue	b c d e		CONTEST		212000 212000	63,470. 12,682.	63,470. 12,682.		
•	f a	All other program service Total. Add lines 2a-2f				76,152.			
	<u> </u>	Investment income (inclu- other similar amounts)	ding dividend	ds, intere	st, and	5,856.			5,856.
	5 6 a b c	Less: rental expenses	Real	(ii) Personal					
anue	7 a b	Net rental income or (loss Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Sea 7a 7b	curities	(ii) Other				
Other Reve	d 8 a	Gain or (loss) Net gain or (loss) Gross income from fundraisi including \$ contributions reported on Part IV, line 18 Less: direct expenses	ing events (no n line 1c). See	t of 8a					
	9 a b	Net income or (loss) from Gross income from gamir Part IV, line 19 Less: direct expenses Net income or (loss) from	ng activities.	See 9a 9b					
	b	Gross sales of inventory, and allowances Less: cost of goods sold Net income or (loss) from		10b					
Miscellaneous Revenue	е	All other revenue				441 001			
03200	12 9 12-23-	Total revenue. See instructi	ons		▶	441,881.	76,152.	0.	5,856. Form 990 (2020

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ALABAMA MINING ASSOCIATION Form 990 (2020) F/K/A ALABAMA COAL ASSOCIATION Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	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				
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,	405 500			
	trustees, and key employees	137,500.			
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	42,461.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,000.			
0	Payroll taxes	15,268.			
1	Fees for services (nonemployees):				
а	Management				
b	Legal	56,057.			
с	Accounting				
d	Lobbying	2,000.			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	40,698.			
2	Advertising and promotion				
3	Office expenses	1,379.			
4	Information technology	13,255.			
		15,255.			
5	Royalties	60,140.			
6		5,997.			
7	Travel	5,557.			
8	Payments of travel or entertainment expenses				
-	for any federal, state, or local public officials	1,421.			
9	Conferences, conventions, and meetings	1,441.			
20	Interest				
21	Payments to affiliates	645.			
2	Depreciation, depletion, and amortization	4,431.			
3		4,431.			
4	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	10 500			
а	MINE RESCUE	12,788.			
b	PUBLIC RELATIONS	5,650.			
с	STAFF RECRUITMENT	5,000.			
d	POSTAGE	4,023.			
е	All other expenses	14,247.			
5	Total functional expenses. Add lines 1 through 24e	426,960.			
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)				

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Form **990** (2020)

ALABAMA MINING ASSOCIATION

X	2020) F/K/A ALABAMA CO. Balance Sheet				635462 Page
	Check if Schedule O contains a response or note to	any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1,077,442.	1	1,091,664
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 any current or forn				
	trustee, key employee, creator or founder, substantia				
	controlled entity or family member of any of these pe			5	
6	Loans and other receivables from other disqualified				
	under section 4958(f)(1)), and persons described in s	$a = \frac{1}{2} $		6	
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9				9	
10a	Land, buildings, and equipment: cost or other				
	basis. Complete Part VI of Schedule D 10	a 42,68	9.		
b	Less: accumulated depreciation 10		0. 2,684.	10c	2,03
11	Investments - publicly traded securities	-		11	•
12	Investments - other securities. See Part IV, line 11			12	
13	Investments - program-related. See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets. See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line		1 000 100		1,093,70
17	Accounts payable and accrued expenses	1		, , .	
18	Grants payable		18		
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part			21	
22	Loans and other payables to any current or former of				
	trustee, key employee, creator or founder, substantia				
	controlled entity or family member of any of these pe			22	
23	Secured mortgages and notes payable to unrelated t			23	
23 24	Unsecured notes and loans payable to unrelated thir			23	
25	Other liabilities (including federal income tax, payable			24	
20	parties, and other liabilities not included on lines 17-2				
	of Schedule D			25	
26	Total liabilities. Add lines 17 through 25		1,344.		
20	Organizations that follow FASB ASC 958, check h	ere 🕨 🔀		20	
	and complete lines 27, 28, 32, and 33.				
27			1,078,782.	27	1,093,70
28				28	_,,
20	Organizations that do not follow FASB ASC 958, c			20	
	and complete lines 29 through 33.				
29	· · · · · · · · · · · · · · · · · · ·			29	
29 30	Paid-in or capital surplus, or land, building, or equipn	nent fund		30	
30 31	Retained earnings, endowment, accumulated income			30	
31 32					1,093,70
	Total net assets or fund balances		1 000 100		1,093,70
33	Total liabilities and net assets/fund balances		,000,120.	<u>ა</u> ა	Form 990 (20

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	ALABAMA MINING ASSOCIATION				
Form	990 (2020) F/K/A ALABAMA COAL ASSOCIATION	63-06	535462	Pag	_{ge} 12
Par	t 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		L,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,9	
3	Revenue less expenses. Subtract line 2 from line 1	3		1,92	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,078	3,78	82.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,093	3,7	03.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Cash Other		-		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewer	d 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?		2 b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		L
				000	

Form **990** (2020)

SCHEDULE C	Po	olitical Campaign a	nd Lobbyin	g Activities		OMB No. 1545-004	17
(Form 990 or 990-EZ)		anizations Exempt From Income	-	-		2020	
		if the organization is described t			D-EZ.	Open to Publ	ic
Department of the Treasury Internal Revenue Service		Go to www.irs.gov/Form990 for ir				Inspection	
If the organization answ	wered "Yes," or	n Form 990, Part IV, line 3, or Forr	n 990-EZ, Part V, lin	ne 46 (Political Campaig	on Activities	s), then	
 Section 501(c)(3) org 	anizations: Corr	plete Parts I-A and B. Do not comp	olete Part I-C.				
 Section 501(c) (other 	r than section 50	01(c)(3)) organizations: Complete Pa	arts I-A and C below.	Do not complete Part I-	В.		
 Section 527 organiza 	•						
-		n Form 990, Part IV, line 4, or Forr					
	•	have filed Form 5768 (election unde	()/				
		have NOT filed Form 5768 (election	•		•		
If the organization ansv Tax) (See separate inst		n Form 990, Part IV, line 5 (Proxy ⁻	Tax) (See separate i	nstructions) or Form 99	90-EZ, Part	V, line 35c (Pi	оху
		tions: Complete Part III.					
Name of organization		MINING ASSOCIATIO	N	Er	mplover ide	entification nu	nber
5		LABAMA COAL ASSOCI				0635462	
Part I-A Comple		anization is exempt under		or is a section 527			
•							
1 Provide a description	on of the organiz	ation's direct and indirect political	campaign activities ir	n Part IV.			
2 Political campaign	8		1 0		►\$		
3 Volunteer hours for							
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3	3).			
1 Enter the amount o	f any excise tax	incurred by the organization under	section 4955		►\$		
2 Enter the amount o	f any excise tax	incurred by organization managers	under section 4955		►\$		
e e		n 4955 tax, did it file Form 4720 fo	,			Yes	No
4a Was a correction m					L	Yes	No
b If "Yes," describe in		anization is exempt under	agation E01(a)	avaant agation 50	1(0)(2)		
-		•		-			
		by the filing organization for section			►\$		
	00	ization's funds contributed to othe	•		►\$		
		. Add lines 1 and 2. Enter here and			Φ		
	•	. Add lines 1 and 2. Enter here and	,		▶\$		
					· •	Yes	No
00		nployer identification number (EIN)		itical organizations to w	∟ hich the filin		
		tion listed, enter the amount paid fi					
		omptly and directly delivered to a s					
political action com	mittee (PAC). If	additional space is needed, provide	e information in Part I	IV.			
(a) Name	9	(b) Address	(c) EIN	(d) Amount paid from	m (e) A	mount of polit	cal
				filing organization's		outions received	
				funds. If none, enter -		nptly and direc ered to a separ	
						tical organizatio	
						none, enter -0-	

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

Schedule C (Form 990 or 990-EZ) 2020

032041 12-02-20

		ING ASSOCIA		CD	
Schedule C (Form 990 or 990-EZ) 2020 F Part II-A Complete if the orga	'/K/A ALABAI	MA COAL ASS	OCIATION n 501(c)(3) and file) – 3 d Form 5768 (el)635462 Page 2 ection under
section 501(h)).		•		,	
A Check 🕨 🗌 if the filing organizati	on belongs to an affil	ated group (and list ir	n Part IV each affiliated g	group member's nam	ne, address, EIN,
expenses, and share	of excess lobbying e	xpenditures).			
B Check 🕨 🗌 if the filing organizati	on checked box A an	d "limited control" pro	ovisions apply.		
	on Lobbying Exper tures" means amou	ditures nts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion (g	rassroots lobbying)			
b Total lobbying expenditures to influe	ence a legislative bod	y (direct lobbying)			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures					
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or	. /	oying nontaxable am			
Not over \$500,000		<u>he amount on line 1e.</u> 0 plus 15% of the exc			
Over \$500,000 but not over \$1,000, Over \$1,000,000 but not over \$1,50		0 plus 10% of the exc			
Over \$1,500,000 but not over \$1,50		0 plus 5% of the exce			
Over \$17,000,000	\$1,000,0				
	¢1,000,0				
g Grassroots nontaxable amount (ente	er 25% of line 1f)				
h Subtract line 1g from line 1a. If zero					
i Subtract line 1f from line 1c. If zero	or less, enter -0		[
j If there is an amount other than zero	o on either line 1h or l	ne 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye	ear?				Yes No
(Some organizations that	at made a section 50	raging Period Under 11(h) election do not Ite instructions for li	have to complete all o	f the five columns b	elow.
	Lobbying Expen	ditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount					
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2020

032042 12-02-20

ALABAMA MINING ASSOCIATION

Schedule C (Form 990 or 990-EZ) 2020 F/K/A ALABAMA COAL ASSOCIATION 63-06354 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
	lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?				
	Grants to other organizations for lobbying purposes?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	n 501(c)(5)	, or sec	tion	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				X
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered '	า 501(c)(5)	, or sec		3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		. 1	359	,873.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	al			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	2	2,000.
b	Carryover from last year		. 2b		
с	Total		2c		2,000.
3				2	2,000.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		. 4		
	Taxable amount of lobbying and political expenditures (See instructions)		5		
Par	t IV Supplemental Information				

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2020

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63-0635462 Page 3

SC	HEDULE D			S	Sup	ple	mer	nta	l Fin	ancia	al St	ta	teme	ents	;			\vdash	OMB No.	1545-00	47
(Forn	n 990)				► Con	nplete	if the	orga	nizatior	answei	ed "Ye	es"	' on Forn 11f, 12a,	n 990,	h				20	120	
Depart	ment of the Treasury							► A	Attach to	Form 9	90.								Open		olic
	Revenue Service								0 for ins		s and	the	e latest i	nforma	ation.				Inspec		-
Nam	e of the organization	ion							ASSC		TON					En			ntificati 0635		
Par	t I Organiza	atior										Sim	nilar Fu	inds	or Ad	cou					
	organizatio				-													0011	ipiete ii	une -	
										a) Donor	advise	ed f	funds			(b) Fu	nds a	and oth	ner acco	ounts	
1	Total number at er	end of	year																		
2	Aggregate value of																				
3	Aggregate value of																				
4	Aggregate value at	at end	of year					[
5	Did the organization	ion infe	orm all o	donors a	and do	onor a	advisors	s in w	vriting th	at the as	sets he	eld	in donor	advise	ed fund	ds			_	_	_
	are the organizatio																	L	Yes		No
6	Did the organizatio			•						•	•					•					
	for charitable purp									,		,		•		0			7.4		٦.
Par	t II Conserv			ement	s c	omple	to if the		anizatio		od "Vo		on Form	000 E	Dort IV	lino	 7		Yes		_ No
1	Purpose(s) of cons												OITFOITT	990, F	antiv	, iirie					
•	Purpose(s) of cons					-	•		•			_	Preservat	tion of	a hist	oricall	v imn	ortant	land an	ea	
	Protection o		•			oxun	ipio, iot	orouti		lacation		_	Preservat							ou	
	Preservation																				
2	Complete lines 2a				ganiza	tion h	eld a q	ualifie	ed cons	ervation	contrib	outio	on in the	form o	of a co	nserv	ation	easen	nent on	the las	st
	day of the tax year		5		5														e End of		
а	Total number of co	onser	vation e	asemer	nts											2a					
b	Total acreage restr															2b					
с	Number of conserv	rvatior	n easem	ients on	n a cer	tified	historic	: stru	icture ind	luded in	(a)					2c					
d	Number of conserv	rvatior	n easem	ients inc	cluded	d in (c)) acquir	red af	fter 7/25	/06, and	not on	nal	historic s	structu	re						
	listed in the Nation	nal Re	egister													2d					
3	Number of conserv	rvatior	n easem	ients mo	odified	d, tran	sferred	l, rele	eased, ex	tinguish	ed, or t	terr	minated I	by the	organi	izatio	n duri	ng the	tax		
	year 🕨																				
4	Number of states v																				
5	Does the organizat					Ũ	•	•			•			ũ.					7.4		٦.
~	violations, and enfo												onforoing						_ Yes		_ No
6	Staff and voluntee	er nou	irs devo	led to fr	IONILO	nng, i	nspecu	ing, r	landling	or violat	ons, ar	na	emorcing	y cons	ervalic	meas	emer	its dur	ing the	year	
7	Amount of expens	sos ind	curred i	n monitı	orina	ineno	ctina h	andli	ling of vi	latione	and on	ofor	rcina con	eorvat	ion og	somo	ate di	urina ti	ho voar		
'	► \$	363 111	curreu i	THOIIL	onng,	inspe	cung, n	anun		Jations,		1101		isei vai	ion ea	Seine	ns ui	uning ti	ie yeai		
8	Does each conserv	rvatior	n easem	lent rep	orted	on lin	e 2(d) a	bove	e satisfy	he requi	rement	ts c	of sectior	n 170(r	ו)(4)(B)	(i)					
	and section 170(h)																		Yes		No
9	In Part XIII, describ																		_		
	balance sheet, and	nd inclu	ude, if a	pplicab	le, the	e text	of the fo	ootno	ote to th	e organiz	ation's	s fir	nancial st	tateme	nts th	at des	cribe	s the			
	organization's acc	countii	ng for c	onserva	ation e	asem	ents.														
Par	t III Organiza	atior	ns Mai	intaini	ng C	olle	ctions	s of	Art, H	storica	al Tre	as	sures, o	or Otl	her S	imil	ar As	ssets	.		
	Complete if	if the o	organiza	ation and	swere	d "Ye	s" on F	orm 9	990, Par	t IV, line	8.										
1a	If the organization	n elect	ed, as p	permitte	d und	er FA	SB ASC	C 958	3, not to	report in	its rev	enu	ue staten	nent ar	nd bala	ance	sheet	works	1		
	of art, historical tre	reasure	es, or o	ther sim	ilar as	sets ł	neld for	publ	lic exhib	tion, edu	ication	1, OI	r researc	h in fui	rtherar	nce of	publ	ic			
	service, provide in																				
b	If the organization																				
	art, historical treas						-	Jplic	exhibitic	n, educa	tion, o	or re	esearch i	n furth	erance	e of p	ublic s	service	Э,		
	provide the followi	-		-												•	¢				
	(i) Revenue include																\$				
2	(ii) Assets include If the organization												ets for fin								
2	the following amou													anual	yanı,		10				
а	Revenue included		-		-					-						►	\$				
	Assets included in																· —				
	For Paperwork Re													<u></u>				edule	D (For	m 990) 2020
	12-01-20				,																,
	-								-	.7											

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		MINING ASS								
		LABAMA COAI						35462		age 2
Par	t III Organizations Maintaining C							(continu	ied)	
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records	s, check any	of the following th	nat make s	ignificant u	ise of its			
	Public exhibition	d		or ovebenge pro	arom					
a ⊾	Scholarly research	u		or exchange prog						
b		e								
C A	Preservation for future generations	lleations and avalais	bour thou fu	that the argonize	tion's aver	mat auraa	a in Dart	VIII		
4	Provide a description of the organization's co	-	-	-			se in Part	AIII.		
5	During the year, did the organization solicit o to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arran									
	reported an amount on Form 990, Pa		ste il the orga	Inzation answere	u les of	1101111 990	, Faitiv, i	iii e 9, 0i		
1a	Is the organization an agent, trustee, custodi		ary for contri	butions or other a	assets not	included				
iu	on Form 990, Part X?							Yes		No
h	If "Yes," explain the arrangement in Part XII						∟		L	
D		and complete the lon	iowing table.					Amount		
~	Beginning balance					1c		Amount		
	Additions during the year									
-	Distributions during the year									
f 20	Ending balance Did the organization include an amount on Fe							Yes		No
	If "Yes," explain the arrangement in Part XIII.					• • • • • • • • • •	L] INO
Par										
							aara baak	(a) Four	ro	hook
4.		(a) Current year	(b) Prior y	ear (C) Two y	ears back	(d) Three y	Ears Dack	(e) rour	/ears	DACK
	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	•	e (line 1g, coli	umn (a)) held as:						
	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are	held and administ	tered for th	ne organiza	tion	_		
	by:							· · ·	/es	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	ed on Sched	ıle R?				3b		
4	Describe in Part XIII the intended uses of the		wment funds							
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990	, Part IV, line	11a. See Form 9	90, Part X,	line 10.				
	Description of property	(a) Cost or o	ther (I) Cost or other	(c) A	ccumulate	d	(d) Book	value	Э
		basis (investr	nent)	basis (other)	de	preciation				
1a	Land									
	Buildings									
	Leasehold improvements			600	•	24	45.		3!	55.
	Equipment			42,089	•	40,40)5.	1	,68	84.
	Other			-		-				
	. Add lines 1a through 1e. (Column (d) must e		X. column (R)	line 10c.)				2	,03	39.
		<u></u>					Schedule	D (Form	-	

ALABAMA MINING ASSOCIATION F/K/A ALABAMA COAL ASSOCIATION

Schedule D (Form 990) 2020 F/K/A ALA Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability	(b) Book value

(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total, (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

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

Schedule D (Form 990) 2020

032053 12-01-20

	ALABAMA MINING ASSOCIATI	ON		
Sche	Schedule D (Form 990) 2020 F/K/A ALABAMA COAL ASSOCIATION			35462 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With Revenu	le per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	441,881.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			441,881.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		441,881.	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat	tements With Expen	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total expenses and losses per audited financial statements		1	426,960.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	426,960.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b			0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18,			426,960.
Pa	rt XIII Supplemental Information.			

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

PART X, LINE 2:

THE AS	SSOCIATION	HAS	IMPLEMENTED	THE	ACCOUNTING	REQUIREMENTS	ASSOCIATED
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WITH UNCERTAINTY IN INCOME TAXES USING THE PROVISIONS OF FINANCIAL

ACCOUNTING STANDARDS BOARD (FASB) ASC 740, INCOME TAXES. THE ASSOCIATION

HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR

DISCLOSURE IN THE FINANCIAL STATEMENTS. PREVIOUS OPEN TAX YEARS MAY BE

20

SUBJECT TO EXAMINATION BY TAXING AUTHORITIES.

032054 12-01-20

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. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

ALABAMA MINING ASSOCIATION F/K/A ALABAMA COAL ASSOCIATION

OMB No. 1545-0047 20 Open to Public Inspection Employer identification number

63-0635462

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

INFRASTRUCTURE AND GROWS OUR ECONOMY.

FORM 990, PART VI, SECTION B, LINE 11B:

THE PRESIDENT HAS REVIEWED AND APPROVED THE 990 FOR FILING.

FORM 990, PART VI, SECTION C, LINE 19:

ALL INFORMATION IS AVAILABLE FOR PUBLIC INSPECTION AT THE ORGANIZATION'S

OFFICE.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 11-20-20

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Schedule O (Form 990 or 990-EZ) 2020