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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009 Open to Public

iritei	nai Revenue	Service	The organization may have to use a copy of this return to satisfy state	reporting requi	ements	Inspection
<u>A</u>	For the 200	9 calendar y	ar, or tax year beginning , and ending			
В	Check if applicab		C Name of organization		D Emplo	yer identification number
	Address change	use IRS læbel or	AAA Foundation for Traffic Safety		j	
币	Name change	print or	Doing Business As		52-	-0794368
뭄	-	type	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
닏	Initial return	See	607 14th Street NW	201	202	2-638-5944
Ш	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4		G Gross rece	epts \$ 3,511,513
X	Amended return	1	Washington DC 20005			
\exists	Application pend	f Nam	e and address of pnncipal officer		H(a) Isthis	a group return for
Ш	Аррисацоп рен	##19	HN P KISSINGER		affiliate	
		60	7 14th Street NW, Suite 201		H(b) Are all	affiliates
		I	shington DC 20005			" attach a list. (see instructions)
$\overline{}$	Tax-exempt		501(c) (3) 4 (insert no) 4947(a)(1) or 527		┤ "` `` `	attorn a not (see mosactorio)
÷	Website: ▶		laafts.org		H(c) Coun	exemption number
<u>, </u>	Type of organiz	Tee!		Year of formation	1947	M State of legal domicile DC
_	Part I	Summa		rear or formation	LJ21	M State of legal comicile DC
						
		-	ne organization's mission or most significant activities			
ø	E	DUCATIO	N AND RESEARCH AS RELATED TO TRAFFIC SAFETY.			
ä						
Governance			n			
Š	2 Chec	ck this box 🕽	If the organization discontinued its operations or disposed of more than 25%	of its net asset	ts ,	
	3 Num	ber of voting	members of the governing body (Part VI, line 1a)		3	38
es	4 Num	ber of indep	endent voting members of the governing body (Part VI, line 1b)		4	38
Activities &	5 Total	I number of	employees (Part V, line 2a)		5	10
Acti	6 Total	I number of	volunteers (estimate if necessary)		6	100
•	7a Total	l gross unre	ated business revenue from Part VIII, column (C), line 12		7a	
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34		7b	0
				Prior Y		Current Year
ø.	8 Cont	inbutions an	grants (Part VIII, line 1h)	3,40	9,554	2,916,585
Revenue	9 Prog	ram service	revenue (Part VIII, line 2g)			
eve	10 Inves	stment incor	ne (Part VIII, column (A), lines 3, 4, and 7d)	-14	2,351	<u>330,932</u>
œ	11 Othe	er revenue (f	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26	8,033	172,928
	12 Total	l revenue –	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,5	5,236	3,420,445
	1		ar amounts paid (Part IX, column (A), lines 1-3)	37	6,295	535,593
		efits paid to				
	15 Sala	nes, other c	0,777	924,210		
ses	16a Profe					
Expenses	b Tota		Iraising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25). 148,716			
ă	17 Othe	-	(Part IX, column (A), line Racit IVED	1.61	8,534	1,317,883
	18 Tota	l evnenses	Add lines 13-17 (must equal Part IX, column (A), line 25)		5,606	2,777,686
			penses Subtracting 18 from line 12		9,630	642,759
-		Silue less ex		Beginning of C		End of Year
Assets or	20 Tota	I assets (Pa	t X, line 16)		6,611	12,395,293
Ass	21 Tota	•	art X, line 26)		38,395	557,799
戛	22 Net	,	nd balances Subtract line 2 From line 2b		8,216	11,837,494
	Part II		re Block	5,703	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_			titles of perjury, 1 declare that I have examined this return, including accompanying schedules an	d statements, and	t to the best s	of my knowledge
		and belief	is true, correct and complete poclaration of preparer (other than officer) is based on all inform	nation of which pr	eparer has an	y knowjedge
e:	gn	L (Lew Peter Donnin's		111	(1) [[1
	-	<u> </u>	The state of the s			
ПЕ	ere	Signa	up of officer O HIN P KISSINGER PRESI		Date	
				DENT CE		
_		y Type o	r prnt name and title			Preparer's identifying number
Pa	id	Preparer's	Date	Chec setf-	k ıf _	(see instructions)
	eparer's	signature	Allen P. DeLeon, CPA 01/1		oyed ▶	P00256516
	eparer s se Only	Firm's name	or yours DeLeon & Stang, CPA's		EIN	52-1373858
US	oc Only	ıf self-emplo	yed), 100 Lakeforest Blvd Ste 650		Phone	
_		address, ar	d ZIP+4 Gaithersburg, MD 20877-2609		no l	301-948-9825
Ма	y the IRS d	iscuss this r	eturn with the preparer shown above? (see instructions)			X Yes No
		ct and Pap	rwork Reduction Act Notice, see the separate instructions.			Form 990 (2009)
DA	A					

4d	Other program services	(Describe in Schedule O)		
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service	expenses ▶ 2,480,164		

external fulfillment house that specializes in serving associations to meet consumer requests, and prices its products well below the for-profit market

Pa	rt 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	х	
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? If "Yes," complete			
•	Schedule C, Part II	4		x
_				
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			v
_	complete Schedule D, Part I	_6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		7.7
_	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,"			7.7
_	complete Schedule D, Part III	_8_		_X
9	Did the organization report an amount in Part X, line 21, 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 term, permanent, or	- 1		
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	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			
•	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			
•	Did the organization report an amount for other assets related 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			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	7	
42A	Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent cudited financial statements for the tay year? Very New	12	X	<u> </u>
IZM	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No If "Yes." completing Schedule D, Parts XI, XII, and XIII is optional 12A X			
13	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	1-70		
	business, and program service activities outside the United States? If "Yes," complete Schedule F. Part I	14b	x	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	70		-
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	x	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	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			<u></u>
	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?	<u> </u>		<u></u> -
	If "Yes," complete Schedule G, Part III	19	l	x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
			990	

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			٠,
22	United States 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	į		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
24a	employees? If "Yes," complete Schedule J	23	X	
44 a	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 25	1		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24u		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	200		
-	pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or			
	990-EZ? If "Yes," complete Schedule L. Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	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, 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? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		<u>x</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
22	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		<u> </u>
34	III, IV, and V, line 1			v
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	-	<u> </u>
00	Schedule R, Part V, line 2	25		v
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related	35		<u> </u>
	organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
	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 11 and	<u> </u>		
	19° Note . All Form 990 filers are required to complete Schedule O	38	x	
		_	990	(2009)

<u> </u>	nt v Statements Regarding Other IRS Filings and Tax Compliance						
4.	Enter the number reported in Paul 2 of Farm 4000, Assured Communication and Trans. M. L. C.			_		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	ا ـ ا	6				
ь	U.S. Information Returns. Enter -0- if not applicable. Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1a 1b	6				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and report		0				
·	gaming (gambling) winnings to prize winners?	able			10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				1c		
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	10				
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 e-file this return (see			<u> </u>	£U.		
	instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	v			,		
	this return?	•			3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	onty		Γ			
	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial	ıal					
	account)?				4a		X
b	If "Yes," enter the name of the foreign country						
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	ık		Ì			
	and Financial Accounts						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			<u>_</u>	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	ng					
_	Prohibited Tax Shelter Transaction?			<u> </u> _	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
	organization solicit any contributions that were not tax deductible?			-	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or					
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			 	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	4.					
	and services provided to the payor?	15			,	x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7a 7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			<u> </u>	''		
	required to file Form 8282?				7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		<u> </u>	•		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person	-					
	benefit contract?				7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			-	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			Γ			
	required?				7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			ļ			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
_	organization, have excess business holdings at any time during the year?			-	8	_	
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966?				9a		
b 40	Did the organization make a distribution to a donor, donor advisor, or related person?			-	9b		
10	Section 501(c)(7) organizations. Enter	ایدا					
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 13, for public use of club facilities	10a			-		
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	10b					
''a	Gross income from members or shareholders	44.		1	ł		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11a			Ī		
~	amounts due or received from them)	11b		•			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	$\overline{}$			I2a		l
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
	,	1		<u> </u>	Form	990	(2009)

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.

Sac	tion A. Governing Body and Management			
Jec	BOT A. GOVERNING BODY and Management		Yes	No
1a	Enter the number of voting members of the governing body		169	140
b	Enter the number of voting members that are independent 1b 38	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		
•	any other officer, director, trustee, or key employee?	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?	3		x
4	Did the organization make any significant changes to its organizational documents since the pnor Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the 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	9	X	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	enue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	L	<u> </u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11_	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b	_X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does 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			Į
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			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?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	L	<u> </u>
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, IA, I	D,IL		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
₩.	organization > AAA FNDN FOR TRAFFIC SFTY 607 14TH STREET N.W.	2-63	8-5	944

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

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. Use Schedule J-2 if additional space is needed
- 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. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

(A) Name and Title	(B) Average	Posi		(C check	all ti	hat ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
J. SCOTT OSBERG		├~		\Box						
Research Dir	40.00				_			109,733	0	0
Chris Bauer										
Trustee	1.00	X						0	0	0
Avery Brown						1 1				
Trustee	1.00	x						0	0	0
Mark Brown										
Trustee	1.00	X						· 0	0	0
Wayne Budd	-									
Trustee	1.00	X		Lŀ				0	0	0
H. Thomas Chestnut										
Trustee	1.00	X						0	0	0
Dennis J. Crossle	Y					1				
Trustee	1.00	X						0	0	0
Robert Darbelnet		Π								
Trustee	1.00	X						0	0	0
Anthony J. DeNove	llis									
Trustee	1.00	X						0	0	0
Allen DeWalle	-									
Trustee	1.00	X			_			0	0	0
Marshall Doney						1				
Trustee	1.00	X						0	0	0
James H. Doran										
Trustee	1.00	X						0	0	0
Terry R.Farias				1		1 1				
Trustee	1.00	X		L. I				0	0	0
Jeanette Gamba	İ	1								
Trustee	1.00	X	<u>L</u>			<u>L.</u>		0	0	0
Timothy R. George		1	}							
Trustee	1.00	X	L_					0	0	0
Frederick L.Gruel										
Trustee	1.00	X				$oxed{oxed}$		0	0	0
Marguerite Hamble										
Trustee	1.00	X						0	0	0
DAA										Form 990 (2009)

Part VII Section A. Officers,	Directors, Trus	tees	, Ke	/ En	nploy	/ees,	and	Highest Compensated E	mployees (continued)				
(A) Name and Title	(B) Average hours per	<u> </u>		check		hat ap		(D) Reportable compensation	(E) Reportable compensation		(F) Estima amour	ited	
	week	Individual trustee or director	Institutional	Officer	Key employee	Highest compensated employee	Former	from the organization	from related organizations (W-2/1099-MISC)		othe compens from	er sation the	
		trustee	al trustee		oyee	ompensa		(W-2/1099-MISC)			organiza and rel organiza	ated	
_						ted							
Richard S. Hamilt Trustee	on 1.00	x						0	0				0
Kenneth A. Johnson Trustee	1.00	x						0	0	·			0
Thomas D. Kinley Trustee	1.00	x						0	0				0
Charles B. Liekwe										\vdash			<u> </u>
Trustee	1.00	X						0	0				0
D.James McDowell													
Trustee	1.00	X						0	0	<u> </u>			0
Thomas V.McKernan Trustee	1.00	x						o	0				^
Chris E.Mensing	1.00	^							<u>_</u>	 			
Trustee Kathleen Marvaso	1.00	х						0	0	<u> </u>			0
Trustee	1.00	x				:		О	o				0
Thomas E. O'Brein													
Trustee	1.00	X						0	0				0
David E. Parsons								_	_				
Trustee Paul Pelletier	1.00	X						0	0	 			0
Trustee	1.00	x						o	o				0
Charles H. Podows	ki										-		
Trustee	1.00	X				-		0	0	<u> </u>			0
John D.Porter Trustee	1.00	x							_				_
1b Total	1.00				l			325,359	. 0	 			0
2 Total number of individuals (inc	luding but not lim	nted	to th	ose	listed	abo	ve)		00.000 in				
reportable compensation from t			_										
6 Dalah.	e= .						_					Yes	No
3 Did the organization list any for employee on line 1a? If "Yes,"	mer officer, direc complete Schedu	tor o	or tru for si	stee, uch i	, key ndıvı	empi dual	loye	e, or highest compensated			3		x
4 For any individual listed on line	1a, is the sum of	f rep	ortat	ole ca	ompe	ensati	on a	and other compensation fror	n				
the organization and related organization	ganizations greate	er tha	an \$	150,0	000?	If "Y	es,"	complete Schedule J for su	ch		4	x	
5 Did any person listed on line 1a	a receive or accri	ue co	mpe	nsat	on f	rom a	any i	unrelated organization for			•		\vdash
services rendered to the organi		comp	lete	Sch	edule	J fo	rsu	ch person			5		X
Section B. Independent Contracto 1 Complete this table for your five	e highest compei	nsate	ed inc	lepe	nder	nt con	trac	tors that received more than	s \$100,000 of				
compensation from the organization	(A) business address				-	-			(B)		1	(C)	
Midwest Research Ins					<u> </u>	Вох	-		(B) ion of services		Co	(C) mpensat	10n
Kansas City	MO	6	411			808	ı	ossoo Research				413	3,114
AAA National								Drive					,,114
Heathrow	FI		27	46-	-50	63	F	Research				127	7,669
The Henry M. Jackson					140	1 F	i	kville Pike					
Rockville Stratacomm	MD	2	08		1 5	YI		Research	· · · · ·		_	115	5,146
Washington	חר	2	00		1 1	non	l	Cır., NW Consulting				11/	2 050
ABDI					Bun	che	_	Commerce Park, A	ve A			110	960
Leetsdale	PA	. 1	<u>50</u>				l	Research				100	0,483
2 Total number of independent of						to the	ose	listed above) who received					
more than \$100,000 in compen	sation from the c	rgan	ızatıc	n Þ	·			· · · · · · · · · · · · · · · · · · ·			5	. 000	(2009)
D/ V \											rom	・コマリ	(ZUU9)

	III Statem	ent of Reve		•		(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
							exempt function revenue	business revenue	excluded from tax under sections 512, 513, or 514
1a	Federated cam	paigns	1a				revenue		312, 313, 01 314
a b c d e f g h	Membership du	ies	1b						
E c	Fundraising ev	ents	1c						
a d	Related organiz		1d				1		
- e	Government grants (1e				İ		
e f	All other contributions								
	and similar amounts		1f	2,9	16,585				
⊇ a	Noncash contribution	s included in lines 1a-	1f \$						
e h	Total. Add line				▶	2,916,585			
T		·		В	usn. Code				
2a b c d e f									
b									
C									
d									
е									
f	All other progra	ım service rever	nue						
<u>g</u>	Total. Add line	s 2a–2f							
3	Investment inc	ome (including o	lividends	s, interest, a	and				
	other similar ar	nounts)			▶ _	330,932			330,932
4	Income from in	vestment of tax-	exempt	bond proce	eds 🕨				
5	Royalties								
1		(ı) Real		(II) Per	sonal				
6a	Gross Rents						·		
b	Less rental exps								
C	Rental inc or (loss)								
_d		me or (loss)			•		_		
7a	Gross amount from sales of assets	(i) Secunties	s	(II) O	ther				
_	other than inventory								
b	Less cost or other								
	basis & sales exps								
С	Gain or (loss)								
d	Net gain or (lo:	is)			•				
8a	Gross income fro	m fundraising evei	nts [
	(not including \$								
	of contributions r	eported on line 1c)	1						
: 1	See Part IV, line	18	a						
b	Less direct ex	penses	b						
c	Net income or	(loss) from fund	raising e	events					
9a	Gross income fro	m gaming activities	s						
	See Part IV, line	19	a						
b	Less direct ex	penses	ьL						<u> </u>
C	Net income or	(loss) from gam	ıng actı <u>vı</u>	ities	<u> </u>				
10a	Gross sales of	inventory, less							
ı	retums and all	owances	a	2	63,996				
b	Less cost of g	oods sold	b		91,068		l		
С	Net income or	(loss) from sales	s of inve	ntory	•	172,928	172,928		
	Misc	ellaneous Revenue	e	E	Busn. Code				
11a									
b	•								
C									
d	All other reven	ue							
_ e	Total. Add line	s 11a–11d			•				
12	Total Revenue	e. See instruction	ns		▶	3,420,445	172,928		0 330,93

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must c	(A) (A) but ar			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				· · · · · · · · · · · · · · · · · · ·
•	organizations in the U.S. See Part IV, line 21	15,480	15,480		
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	520,113	520,113		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	····			
•	-trustees, and key employees	325,358	268,766	20,184	36,408
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 salanes and wages	413,308	341,418	25,640	46,250
8	Pension plan contributions (include section 401(k)	320,000		20,020	
3	and section 403(b) employer contributions)	-54,100		-54,100	
9	Other employee benefits	183,370	164,116	13,753	5.501
10	Payroll taxes	56,274	46,487	3,489	5,501 6,298
11	Fees for services (non-employees)	30,214	30, 307	3, 203	0,290
"	Management				
d L	Legal	28,151		28,151	
b	· ·	77,545		77,545	
ر د	Accounting	77,343		11,343	
d	Conference of fundamental control of the late of the l				
e	Professional fundraising services See Part IV, line 17				·····
Ţ	Investment management fees		···		3
g	Other				
12	Advertising and promotion	6,316	5,330	689	297
13	Office expenses	6,316	5,330	009	291
14	Information technology	· · · · · · · · · · · · · · · · · · ·			
15	Royalties				
16	Occupancy	40 410	44 061	0.020	1 407
17	Travel	48,418	44,061	2,930	1,427
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		4 05 0	464	
19	Conferences, conventions, and meetings	2,319	1,855	464	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not		,		
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	ıRap	276,061	276,061		
b	Road Assessment Program	177,278	177,278		
C	Project outreach	168,829	168,829		
d	Pysc foundations of SC	67,840	67,840		
е	Changes in teen crashes	65,612	65,612		
f	All other expenses	399,514	316,918	30,061	52,535
25	Total functional expenses. Add lines 1 through 24f	2,777,686	2,480,164	148,806	148,716
26					
	SOP 98-2 Complete this line only if the		}		
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				
DAA					Form 990 (2009)

	rt X	Balance Sheet	TIC Sale	cy JZ	-0794366		Page 11	
		Summer of the second of the se			(A) Beginning of year		(B) End of year	
$\neg \neg$	1	Cash—non-interest bearing			580,169	1	657,553	
	2	Savings and temporary cash investments				2		
	3	Pledges and grants receivable, net		ļ	3,303,080	3	2,307,144	
	4	Accounts receivable, net			504,514	4	552,572	
ļ	5	Receivables from current and former officers, directors, tri	ustops kov		501/511	-	002/0/2	
ł	•	employees, and highest compensated employees Comple						
		Schedule L	ste Fait II OI			5		
	6	Receivables from other disqualified persons (as defined un	nder section	ŀ		-		
ĺ	•	4958(f)(1)) and persons described in section 4958(c)(3)(B)						
l		Part II of Schedule L		6				
g	7	Notes and loans receivable, net		ŀ		7		
Assets	,	inventories for sale or use		-	101,211	8	88,692	
As	9			-	21,585	9	41,596	
l		Prepaid expenses and deferred charges	[[-	21,363	9	41,390	
	iva	Land, buildings, and equipment cost or	400	200 060		:		
	L	other basis Complete Part VI of Schedule D	10a	288,069 234,421	72 244	40-	E2 640	
		Less accumulated depreciation	10b	234,421	72,344 6,203,708	10c	53,648 8,694,088	
	11	Investments—publicly traded securities	}	6,203,708	11	0,034,086		
	12	Investments—other securities See Part IV, line 11	}		12			
	13	Investments—program-related See Part IV, line 11	}		13			
	14	Intangible assets	ŀ		14			
	15	Other assets See Part IV, line 11	ŀ	10 706 611	15	10 205 202		
-+	16	Total assets. Add lines 1 through 15 (must equal line 34)			10,786,611	16	12,395,293	
	17	Accounts payable and accrued expenses	ļ	390,772	17	338,132		
	18	Grants payable		}		18		
	19	Deferred revenue		ł		19		
	20	Tax-exempt bond liabilities	0	}		20		
Liabilities	21	Escrow or custodial account liability Complete Part IV of S		ŀ		21		
#	22	Payables to current and former officers, directors, trustees	•					
멸		employees, highest compensated employees, and disqual	imea					
		persons Complete Part II of Schedule L		ŀ		22		
	23	Secured mortgages and notes payable to unrelated third p		-		23		
	24	Unsecured notes and loans payable to unrelated third part	ties		407 603	24	210 667	
	25	Other liabilities Complete Part X of Schedule D			497,623	25	219,667	
-	26	Total liabilities. Add lines 17 through 25	Fl		888,395	26	557,799	
ces		Organizations that follow SFAS 117, check here	and					
	27	complete lines 27 through 29, and lines 33 and 34.			3,340,557		5,055,777	
Balar		Unrestricted net assets		}	117,224	27	317,427	
	28	Temporanty restricted net assets	}	6,440,435	28	6,464,290		
Ĕ	29	Permanently restricted net assets Organizations that do not follow SFAS 117, check her		}	0,440,433	29	0,404,230	
Ē	-	-	e 🕨 📋	ļ				
ō	30	•	nd complete lines 30 through 34.					
ste	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment f	fund	ŀ		30_	<u> </u>	
SS	31	Retained earnings, endowment, accumulated income, or or	-		31			
Net Assets or Fund	32	•	outer turias	•	9,898,216	32	11,837,494	
Zei	33	Total net assets or fund balances				33		
	34	Total liabilities and net assets/fund balances			10,786,611	34	12,395,293	

Form **990** (2009)

<u> POII</u>	11 990 (2009) AMA FOUNDATION TOT TRAILITE SAFETY 52-0794368		Pa	<u>ge</u> 1∡
_P	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
28	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		x
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
c	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
38	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
t	of "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3ь		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number

52-0794368

Department of the Treasury Internal Revenue Service

Name of the organization

Dark I

AAA Foundation for Traffic Safety

Reason for Public Charity Status (All organizations must complete this part.) So

	ail i	reasi	UII IUI	Fublic	Charty	y S	tatus	(All Oil	jariizat	ions	must c	ompiete	triis p	<u>an) </u>	ee ms	tructio	ns			
The	orga	nization is not a	a private	foundati	on becaus	se it	ıs (Fo	r lines 1 tl	hrough 1	1, ched	ck only o	ne box)								
1	\sqcup	A church, cor	vention o	of churc	hes, or as	SOCI	ation o	f churche:	s describ	ed in s	section 1	70(b)(1)(/	A)(i).							
2		A school desc	cribed in	section	170(b)(1)((A)(i	ii). (Att	ach Sche	dule E)											
3		A hospital or	a cooper	rative ho	spital serv	vice i	organiz	ation des	cnbed in	sectio	on 170(b)	(1)(A)(iii).								
4		A medical res												(A)(iii).	Enter th	ne hospi	ital's name,			
	_	city, and state							•				,			•	,			
5		An organization	on operat	ted for the	ne benefit	of a	collea	e or unive	ersity own	ed or	operated	by a gov	emmenta	al unit de	scabed	ın				
	_	section 170(I							•			-, - , - ,								
6	\Box	A federal, sta				-		tal unit de	escribed	n sect	tion 170(b)(1)(A)(v	١.							
7	X	An organization												n the de	neral nu	iblic				
	_	described in s							pp		- 80.0		01 11011	raio go	ioiai pa					
8	П	A community							omolete i	Part II	١									
9	Н	An organization										ontabution	s mamh	orchin fe	oc and	l amee				
Ī	ш	receipts from														-				
		support from														i ita				
		acquired by the											1 1 (ax) II	OIII DUSI	103303					
10	П	An organization											2)(4)							
11	H	An organization												cam, on	t tha					
• •	اللا	purposes of o														tion				
		509(a)(3). Ch														LIOII				
													1							
6	fΠ		Type in various and Type in other																	
Ŭ	Ш		y checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified ersons other than foundation managers and other than one or more publicly supported organizations described in section																	
		509(a)(1) or s			managere	J 4,10	u ouiçi	alaii one	or more	public	ay Suppo	teu organ	iizau0113	describe	0 111 360	20011				
f		If the organiza			vritten dete	emii	nation t	from the I	RS that if	tic a T	Type I Tv	ne II or I	Type III e	upporting	,					
•		organization,			viilloir acto	C111111	iiduoii i	ioiii ale i	i (O tilat ii	15 4 1	ype i, iy	pe II, OI	ype iii s	upporting	4					\Box
_		Since August			e omaniza	ation	accon	ted any d	uff or con	tabutto	n from a	ay of the								Ш
g		following pen	_	o, nas a	ic organiza	auon	· accep	led ally g	iii oi wii	uibulo	ii iioiii ai	iy or use								
		(i) A person		ectly or	indirectly o	contr	role out	har alana	or togoth		h noroon	. dooonbo	(در) جمادة					ſ	V	
											n person	s describe	ia in (ii)				44	\exists	Yes	No
		(ii) A family			ning body o				anization	•							11g			
									\ abaya?								119			
h		(iii) A 35% c						., .	•								פורו	1(iii)		
	\ Nam	Provide the f e of supported	Ollowing			une :					(by) to the		(A) D		1 6.5	1. 4	fth			
٠,	-	anization		(ii) Eli	N	1) Type of or escribed or	•		1 ' '	organization isted in your		ou notify	organizati	lsthe non⊪ncol		Ато шрро	ount of	
								bove or IR			1 ''	document?	col (i)	of your		zed in the	_			
							(see instru	ctions))		Yes	No.	1	port?		S?				
						-					165	No	Yes	No	Yes	No				
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 AAA Foundation for Traffic Safety 52-0794368 Page 2 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) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 1,984,087 2,321,142 7,851,305 3,409,554 2,916,583 18,482,671 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 Total. Add lines 1 through 3 3,409,554 18,482,671 1,984,087 2,321,142 7,851,305 2,916,583 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) 3,585,859 Public support. Subtract line 5 from line 4 14,896,812 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 2,916,583 1,984,087 3,40<u>9</u>,554 18,482,671 Amounts from line 4 2,321,142 7,851,305 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 248,356 157,087 164,258 265,590 330,932 1,166,223 Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets 545,619 545,619 (Explain in Part IV) 11 Total support. Add lines 7 through 10 20,194,513 12 Gross receipts from related activities, etc (see instructions) 12 1,160,352 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 73 77% 14 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 71.10% 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 AAA Foundation for Traffic Safety 52-0794368

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Provide any other additional information. See instructions

Part II, Line 10 - Other Income Detail

Gain from sale of securities

\$ 545,619

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name	of the organization		Employe	identification number
	A Foundation for Traffic Safety			794368
Pa	t I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, F	ids or Other Similar Funds or Acc Part IV, line 6	counts	. Complete if
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			<u> </u>
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that t	he assets held in donor advised		
	funds are the organization's property, subject to the organization's exclusion	sive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w	inting that grant funds can be		
	used only for chantable purposes and not for the benefit of the donor or	donor advisor, or for any other		
	purpose conferring impermissible private benefit?			Yes No
<u>Pa</u>	rt II Conservation Easements. Complete if the orga	anization answered "Yes" to Form !	990, Pa	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check a	Il that apply)		
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impor	tant land	area
	Protection of natural habitat	Preservation of certified historic stru	ıcture	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conserv	ation contribution in the form of a conservatio	n	
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified historic structure include	ded in (a)	2c	<u>-</u>
đ	Number of conservation easements included in (c) acquired after 8/17/06	6	2d	
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization of	uring	
	the taxable year ▶		-	
4	Number of states where property subject to conservation easement is lo	cated >		
5	Does the organization have a written policy regarding the periodic monitor	onng, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?	<u> </u>		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	ng conservation easements during the year		
	>	,		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	onservation easements during the year		
	▶ \$	moontagen agestions during and you		
8	Does each conservation easement reported on line 2(d) above satisfy the	ne requirements of section		
-	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	is requirements of section		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conservation easeme	nts in its revenue and expense statement, an	d	
•	balance sheet, and include, if applicable, the text of the footnote to the co	•		
	the organization's accounting for conservation easements	riganization of interior of the first decorate		
Pa	rt III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		milar A	ssets.
	If the organization elected, as permitted under SFAS 116, not to report ii		orks of	
	art, historical treasures, or other similar assets held for public exhibition,			.
	provide, in Part XIV, the text of the footnote to its financial statements th	•	10 301 1100	•
b	If the organization elected, as permitted under SFAS 116, to report in its		of art	
-	historical treasures, or other similar assets held for public exhibition, edu			
	provide the following amounts relating to these items	and the residence of public st	,	
	(i) Revenues included in Form 990, Part VIII, line 1		.	\$
	(ii) Assets included in Form 990, Part X			<u>-</u>
2		other similar assets for financial gain, provide	the	"
-	If the organization received or held works of art, historical treasures, or of following amounts required to be reported under SEAS 116 relating to the	•	uÆ	
_	following amounts required to be reported under SFAS 116 relating to the	iese ileitis		œ.
a	Revenues included in Form 990, Part VIII, line 1		₽	•
b	Assets included in Form 990, Part X		•	•

Sched	lule D (Form 990) 2009 AAA Founda	tion for	Traffic	Safet	У	<u>52-079</u>	94368	Page 2
Pa	rt III Organizations Maintaining C	Collections of	Art, Historic	al Treasu	ıres, o	r Other S	<u>imilar Asse</u>	ts (continued)
3	Using the organization's acquisition, accession, a collection items (check all that apply)	and other records,	check any of the	following th	nat are a	significant u	se of its	
а	Public exhibition	aП	Loan or exchan	ae programs	s			
b	Scholarty research	Ę H	Other	go programm				
c	Preservation for future generations	ب -						-
4	Provide a description of the organization's collect	ctions and explain h	now they further	the organiza	ation's ex	empt purpos	e in	
5	Dunng the year, did the organization solicit or re	eceive donations of	art, historical tre	easures, or o	other sim	lar		□ v ₌₌ □ N ₌
Pa	assets to be sold to raise funds rather than to be rt IV Escrow and Custodial Arrai					swered "Y	es" to Form	Yes No
	IV, line 9, or reported an amo							,
1a	Is the organization an agent, trustee, custodian	or other intermedia	ry for contribution	ns or other	assets n	 ot		
	included on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIV an	d complete the folk	wing table					
								Amount
С	Beginning balance						1c	
d	Additions during the year						1d	
e	Distributions during the year						1e	
f	Ending balance						1f	
2a	Did the organization include an amount on Form	n 990. Part X. line 2	112					Yes No
	If "Yes," explain the arrangement in Part XIV		•					
	rt V Endowment Funds. Comple	ete if organizati	on answered	"Yes" to	Form	990 Part	IV. line 10	
		(a) Current year		nor year		years back	(d) Three years	back (e) Four years back
1a	Beginning of year balance	9,470,4		353,212	<u> </u>		·, · · · ·	
	Contributions	2,253,6		617,223	<u> </u>			
	Net investment earnings, gains,	2,233,	-	<u> </u>	 			
·	and losses							
	Grants or scholarships							
					-			
e	Other expenditures for facilities							
	and programs Administrative expenses		- -					
	•	11,724,0	188 0	470,435	-			
g	End of year balance		700 3,	110,433				
2	Provide the estimated percentage of the year er							
a	Board designated or quasi-endowment	- - -%						
D	Permanent endowment > %							
C	Term endowment ▶ %							
3a	Are there endowment funds not in the possessi	on of the organizat	on that are held	and admini	stered to	r the		[v] n.
	organization by							Yes No
	(i) unrelated organizations							3a(i) X
	(ii) related organizations		o					3a(ii) X
_	If "Yes" to 3a(ii), are the related organizations list	•						3b
4	Describe in Part XIV the intended uses of the o			Farra 000	D	V lun n 40		
_ <u></u>	rt VI Investments—Land, Buildin	· · · · · · · · · · · · · · · · · · ·						(d) Dealers
	Description of investment	(a) Cost or other		(b) Cost or oth			umulated ecation	(d) Book value
		(investment	'	basis (other	<u>, </u>		Mauon	
	Land							
	Buildings							
	Leasehold improvements	<u> </u>			-0.00			- FO 640
	Equipment			288	<u>,069</u>		234,421	53,648
_	Other	_ 		4.5.		L		FO 645
Tota	I. Add lines 1a through 1e (Column (d) must equ	uai ⊦orm 990, Part	x, column (B), li	ne 10(c))				53,648

Schedule D (Form 990) 2009 AAA FOUNCATION FOR TE	arric Sarety	52-0794368	Page <u>3</u>
Part VII Investments—Other Securities. See Form 99	0, Part X, line 12		
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-year	market value
Financial derivatives			
Closely-held equity interests			
•			
Other			
	-		
			·
			
T 1 1 (0 1 4)	 		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 99			
(a) Description of investment type	(b) Book value	(c) Method of	/aluation
		Cost or end-of-year	market value
			
	-		
	 		
	-		
	-		
	<u> </u>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15	l	<u> </u>	
			(h) Doob water
(a) Description			(b) Book value
	<u> </u>		
			
			
			
	· · · · · · · · · · · · · · · · · · ·		
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 2	.5		
1 (a) Description of liability	(b) Amount		
Federal income taxes		1	
Accrued pensions and other liability	145,310		
Unamortized endowment contribution			
Unamortized endowment contribution	74,357	-	
		1	
]	
]	
		1	
	+	1	
		4	
		4	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	219,667	1	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organ		that reports the	

Sche@	dule D (Form 990) 2009 AAA FOUNDATION FOR TRAITIC SAIR	ety 52-0/94368	<u> </u>	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	3,420,445
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	2,777,686
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	642,759
4	Net unrealized gains (losses) on investments		4_	1,296,519
5	Donated services and use of facilities		5_	
6	Investment expenses		6	
7	Pnor period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9_	1,296,519
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	[10_	1,939,278
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements	s With Revenue per Retu	ırn	
í	Total revenue, gains, and other support per audited financial statements		1	5,004,632
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a 1,296,519		
b	Donated services and use of facilities	2b 196,600		
С	Recovenes of pnor year grants	2c		
d	Other (Describe in Part XIV)	2d 91,068		
e	Add lines 2a through 2d		2e	1,584,187
3	Subtract line 2e from line 1		3	3,420,445
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	3,420,445
	rt XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Expenses per R		
1	Total expenses and losses per audited financial statements		1	3,065,354
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a 196,600		
b	Pπor year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIV.)	2d 91,068		
e	Add lines 2a through 2d		2e	287,668
3	Subtract line 2e from line 1		3	2,777,686
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	[
-	-Investment expenses not included on Form 990, Part VIII, line 7b	4a		
h	Other (Describe in Part XIV)	4b		
c	Add lines 4a and 4b	70	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	2,777,686
Pa	rt XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1	a and 4 Part IV lines 1h		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2	· · ·		
	part to provide any additional information	d and 40 Also complete		
	art XI, Line 8 - Reconciliation of Changes -	Other		
:	in the first of the contribution of changes.		- <i>-</i>	
_c	OST OF SALES	\$		9 <u>1,068</u>
C	OST OF SALES	•		<u>-91,068</u>
_~				= - = - = = = = = = = = = = = = = = =
		_ _		
D:	art XII, Line 2d - Revenue Amounts Included	in Financials -	O+h	er
			~ L	
_C	OST OF SALES	\$		9 <u>1,068</u>

Schedule D	(Form 990)	2009	AAA	Fot	unda	tion	ı fo	r T	rafí	Fic	Saf	ety		52-	079	436	8				Page 5
Part XIV	/ Supp	lement	al Info	ormat	tion (continu	ued)				_				-						
Part	ΧΙΊΙΥ							unt	s Ir	nclu	d <u>e</u> d	_i <u>n</u>	Fi	nanc	<u>ial</u>	s	c	<u>t</u> he	r _		
COST	OF_SA	LES														Ś			91	. 068	}
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Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. 2009

Department of the Treasury Internal Revenue Service

Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

	AAA 1		or Traffic Safety	52-0794	
Part I	General Informat	tion on Activities	Outside the United States. C	Complete if the organization a	inswered
1 For grant		0, Part IV, line 14b	o. Is to substantiate the amount of the gi	rants or	
			tance, and the selection criteria used t		
the grants	or assistance?	-			X Yes No
2 For grant United Sta		art IV the organization's	procedures for monitoring the use of	grant funds outside the	
3 Activities p	per Region (Use Sched	dule F-1 (Form 990) if a	dditional space is needed)	· · · · · · · · · · · · · · · · · · ·	·- -
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
_					
					· , , ,
_					
					-
	-				
					
Totals					

Page 2 appraisal, other) valuation (book, FMV, (i) Method of Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, (h) Description of non-cash assistance Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 (g) Amount of non-cash assistance (f) Manner of cash disbursement IVED IVED IVED IVED 313,274 125,787 10,500 70,552 52-0794368 (e) Amount of cash grant AAA Foundation for Traffic Safety (d) Purpose of grant Use Schedule F-1 (Form 990) if additional space is needed. CH H CH CH (c) Region (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization Part II

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Schedule F (Form 990) 2009

8 Enter total number of other organizations or entities

N

AAAF4368 01/11/2011 3 26 PM

Part IV	(h) Method of valuation (book, FMV, appraisal, other)									
168 10 10 1 330	(g) Description of non-cash assistance									
ization answered	(f) Amount of non-cash assistance									
	(e) Manner of cash disbursement									
ne omiteu states. ded.	(d) Amount of cash grant									
viduais Outside t onal space is nee	(c) Number of recipients									
sistance to indi- rm 990) if additi	(b) Region									
Fart III Grants and Omer Assistance to Individuals Outside the Use Schedule F-1 (Form 990) if additional space is needed.	(a) Type of grant or assistance									

Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds The AAA Foundation for Traffic Safety has contracts for traffic safety research with organizations outside the US. During 2009 we had contracts with RACC, and with TIRF, a Canadian company for work on a research project in Canada and the US. All of these contracts were awarded on merit and were closely monitored. Expenses for services rendered uoto contractual limits are paid periodically.

AAAF4368 01/11/2011 3 26 PM

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I

AAA Foundation for Traffic Safety

General Information on Grants and Assistance

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

Employer identification number 52-0794368

OMB No 1545-0047

Open to Public Inspection

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the grants or assistance? The selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	(a) Name and address of organization (b) EIN (c) IRC (d) Amount of cash grant section or government and address of organization (g) Description of assistance of grant assistance or government or government and address of organization or government and address of organization or government and address of organization or government organization or government and address of organization or government organization or government organization organi	10,000					Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations ▶	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
1 Does the organization maintain rec the selection oriena used to award 2 Describe in Part IV the organization	Part II Grants and Other Form 990, Part IV Part IV and Sched	1 (a) Name and address of or or government	Charles M. Hayes Fund					2 Enter total number of section 501(c)(3) at3 Enter total number of other organizations	For Privacy Act and Paperwork Reduct

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Page 2 Part IV, line 22.		(f) Description of non-cash assistance					al information.
on answered "Yes" to Form		(e) Method of valuation (book, FMV, appraisal, other)					provide the information required in Part I, line 2, and any other additional information.
52-0794368 molete if the organizat		(d) Amount of non-cash assistance					required in Part I, li
s Safety 5 United States. Com	al space is needed.	(c) Amount of cash grant					ovide the information
on for Traffic to Individuals in the	Form 990) if addition	(b) Number of recipients					
Schedule (Form 990) 2009 AAA Foundation for Traffic Safety 52-0794368 Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	(a) Type of grant or assistance					Supplemental Information. Complete this part to
Schedule I (Fo				:			Part IV

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

AAA Foundation for Traffic Safety **Questions Regarding Compensation**

Employer identification number 52-0794368

			Yes	No
4-	Check the energy to be (c) (d)			
18	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	į		
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply		ŀ	
	X Compensation committee			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization	ŀ		
а	Receive a severance payment or change-of-control payment?	4a		x
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	 	X
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III	1		
	, , , , , , , , , , , , , , , , , , , ,			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	Ì		
	compensation contingent on the revenues of			
а	The organization?	_ 5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of	į		
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		x
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

Page 2

AAA Foundation for Traffic Safety

52-0794368

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the Part II

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)—(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	volvácena (a)	of M.2 and/or 1000 MISC	nontesagenas	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(i) Base (ii) Bonus & incentive (iii) Other compensation compensation compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(I)+(D)	reported in pnor Form 990 or Form 990-EZ
JOHN P. KISSINGER	(i) 215,626 (ii) 0	0 0	0 0	0 0	0	215,626	0 0
II)	(0)						
U	(0)						
C 3	(1)						
1)	0						
12)	(C)						
(i)	(0)						
(ii)	(1)						
	6.0						
<u>1)</u>	(B)						
	(0)			•			
(a)	(n)			•			
n) D	(1)						
(n)	(n) (j)						
(i) (i)	(n)		·	•			
3	(i)			•			
			!			Schedi	Schedule J (Form 990) 2009

Schedule J (Form 990) 2009

AAA Foundation for Traffic Safety 52-0794368

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part

for any additional information

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047 **2009**

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

AAA Foundation for Traffic Safety

Employer Identification number 52-0794368

	Officers, Di							y Employees, and H	ighest Compensated	
Employees	T	_					 -	 · · · · · · · · · · · · · · · · · · ·		
(A) Name and Title	(B) Average hours per week			check		natapp Tog ≖I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
James R. Pouliot Trustee	1.00	x						0	0	0
Earle B. Seeley		T	 			I I	\neg			
Trustee	1.00	X						0	0	0
Mark A. Shaw										
Trustee	1.00	X						0	0	
Mark H. Shaw										
Trustee	1.00	X	L		<u> </u>			0	0	0
Tim Shearman										
Trustee	1.00	X	<u></u>	<u> </u>	<u> </u>			0	0	0
JOHN P. KISSINGER		1		Ì		1 1				_
PRES/CEO	40.00	 	_	X	╙	<u> </u>		215,626	0	0
Frances Smith								_	_	
Secretary	2.00	-	1	X	<u> </u>	1_		0	0	0
Robert Sharp	0.00	İ								
Vice Chairman	2.00	+	⊢ -	X	┢	\vdash	—	0	0	0
Paul Petrillo	0.00								_	
Chairman John Schaffer	2.00	+-	╄	X	├-	+		0	0	0
	2.00			x				_	o	d
Treasurer	2.00	╁		┢	\vdash	\vdash		0	0	
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury
Intcinal Revenue Service
Name of the organization

AAA Foundation for Traffic Safety

Employer identification number

52-0794368

Amended Return Explanation

The return is amended to correct Officers and Board of Directors listing.

Form 990, Part I, Line 6

Numerous individuals volunteer their time to the foundation to serve on foundation governance committees and technical project oversight committees or panels.

Form 990, Part III, Line 4a - First Achievement Users," and "Aggressive Driving: Research Update.

Partnered with the Western Transportation Institute and co-hosted the first National Rural Summit on Traffic Safety Culture, which brought together a cross section of the transportation community and resulted in the unanimous approval of a resolution calling on President Obama to address the fact that more than one million people have been killed in motor vehicle crashes over the past quarter-century.

Partnered with the South Carolina DOT, Michelin, and the Roadway Safety
Foundation to develop and implement a public information and education
campaign to educate motorists about the key planned strategies to reduce
run-off-the-road crashes, and to build support for additional funding for
these strategies. The Foundation's contribution focused explicitly on
adapting the materials for both a U.S and South Carolina audience and
making them available, for free, to driver education schools and other
community organizations.

Released the AAA Foundation's second annual Traffic Safety Culture (TSC)

Index, based on our nationwide survey of driver knowledge, beliefs,
attitudes and behaviors, which was also a catalyst for the Foundation's

creation and promotion of Heads Up Driving Week (HUDW) that immediately
followed the Distracted Driving Summit.

Initiated the field phase in Manitoba and Oregon of the Large Scale

Evaluation of Driver Education (LSEDE) program. This multi-year evaluation
of novice driver education programs will directly support State and Federal
efforts to enhance the scope and quality of driver education offerings. It
provided and will continue to provide invaluable input to NHTSA's new

Driver Education Administrative Standards and efforts at the state level to
increase the regulation and oversight of driver education activities.

Completed risk mapping in eight states though the pilot stage of usRAP, and validated the Road Protection Score that can be used to benchmark road risk through inspection of design features. The latter protocol is extremely significant and invaluable in assisting county and local road authorities that often don't have good crash data, with their highway safety management efforts.

Collaborated with Posit Science to release DriveSharp, a scientifically-validated computer training program that reduces crash risk for older drivers after as little as 10 hours of use.

Form 990, Part III, Line 4b - Second Achievement

Employer identification number 52-0794368

As an additional public service, the Foundation has promoted traffic safety awareness in the social communities of YouTube and Facebook, and has continued to host a blog in order to spark conversation about the serious subject of traffic safety. The Foundation also launched a free online tool, called Roadwise Review online, which allows seniors to test their driving skills in the privacy of their own homes. Overall, the Foundation maintains six websites whose pages received over 800,000 views last year.

Form 990, Part III, Line 4c - Third Achievement for similar materials.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

In accordance with our By-laws, the AAA Board may appoint up to 4 Trustees
to the Foundation's Board of Trustees each year. In addition, the AAA

Board has two ex-officio positions on the Foundation's Board of Trustees.

Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached
D. James-McDowell
3144 N. 7th Avenue

Avery-Brown
3333 Fairview Rd
Costa Mesa, CA 92626

Phoenix, AZ 85013

Frederick-Gruel

Name of the organization

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

1 Hanover Rd

Florham Park, NJ 7932

Anthony-DeNovellis

4100 E Arkansas Avenue

Denver, CO 80222

Allen-DeWalle

One River Place

Wilmington, DE 19801

Charles-Liekweg

1745 114th Ave SE

Bellevue, WA 98004

Chris-Mensing

150 Capital Drive

West Springfield, MA 1089

Charles-Podowski

1 Auto Club Dr

Dearborn, MI 48126

Dennis-Crossley

1415 Kellum Pl

Garden City, NY 11530

Schedule O (Form 990) 2009 Name of the organization

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

David-Parsons

6600 AAA Dr

Charlotte, NC 28212

Earle-Seeley

49 Orchard Hill Rd

North Andover, MA 1845

Frances-Smith

6068 Terrace Hills Drive

Birmingham, AL 35242

James-Doran

Madison Place

Alexandria, VA 22314

James-Pouliot

100 Van Ness Ave

San Francisco, CA 94102

Jeanette-Gamba

1512 Westchester Drive

Oklahoma City, OK 73120

Paul-Petrillo

1142 Carole Court

Weddington, NC 28104

Name of the organization

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

John-Porter

600 SW Market Street

Portland, OR 97201

John-Schaffer

1000 AAA Drive M.S. #34

Heathrow, FL 32746

Kathleen-Marvaso

1000 AAA Drive MS 90

Heathrow, FL 32746

Robert-Sharp

1515 North Westshore Blvd.

Tampa, FL 33607

Mark-Shaw

110 Royal Little Drive

Providence, RI 2904

Mark-Brown

1000 AAA Drive M.S. #29

Heathrow, FL 32746

Marshall-Doney

1000 AAA Drive

Name of the organization

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

Heathrow, FL 32746

Marguerite-Hambleton

7234 Tory Lane

Naples, FL 34108

Mark-Shaw

90 E Wilson Bridge Rd

Worthington, OH 43085

Paul-Pelletier

444 Bouvier St

Quebec, QC G2J 1E3

Robert-Darbelnet

1000 AAA Drive

Heathrow, FL 32746

Richard-Hamilton

5900 Baum Blvd

Pittsburgh, PA 15206

Terry-Farias

3750 Guion Rd

Indianapolis, IN 46222

Timothy-Georgeoff

Name of the organization

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

2151 Thurston Drive

Ottawa, ON K1G6C9

Thomas-Kinley

68 Marginal Way, P.O. Box 3544

Portland, ME 4104

Thomas-O'Brien

315 Inner Harbour Cir

Tampa, FL 33602

H. Thomas-Chestnut

100 International Dr

Buffalo, NY 14221

John P. Kissinger

607 14th St, NW, Ste 201

Washington, DC 20005

Kenneth-Johnson

14980 Chateau Village Drive

Chesterfield, MO 63017

Chris-Bauer

2545 N. Wahl Avenue, Apt 1

Milwaukee, WI 53211

AAA Foundation for Traffic Safety

Employer identification number 52-0794368

Wayne-Budd

Exchange Place

Boston, MA 2109

Thomas-McKernan

3333 Fairview Road

Costa Mesa, CA 92626

Tim-Shearman

1145 Hunt Club Rd #200

Ottawa, ON K1V 0Y3

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

The form was reviewed by the Foundation's Audit Committee and Board of

Trustees prior to submission.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Annually, the Board of Trustees and Foundation Associates are asked to read
the Foundation's Policy on potential conflicts of Interest and execute a
form signifying they have and identifying any possible conflict of
interest. The Foundation's President and CEO, and senior Foundation
managers keep this policy in mind when all potential contracts are being
negotiated.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The President/CEO's compensation is determined by the Foundation Chariman
based on input from AAA Human Resources and independent market

Employer identification number

52-0794368

comparability data, in coordination with select members of the Foundation's Administrative Committee.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Other key Foundation associates compensation is recommended by the

Foundation's President and CEO based on individual position descriptions,

market comparability data provided by AAA National and independent sources

and approved by the Foundation's Administrative Committee during review of
the proposed annual budget.

Form 990, Part VI, Line 17 - Other States Where Copy of Return is Filed Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Maryland, Maine, Michigan, Minnesota, Missouri, Mississippi, Montana, North Carolina, North Dakota, Nebraska, New Hampshire, New Jersey, New York, Nevada, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Vermont, Washington, Wisconsin, West Virginia, Wyoming, Alaska, Hawaii

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governance documents availability is noted on the AAA Foundation for traffic safety's webpage.

AAAF4368 AAA Foundation for Traffic Safety 1/11/2011 3:25 PM Federal Statements 52-0794368 FYE: 12/31/2009 Taxable interest on investments Unrelated Exclusion Postal Acquired after Description **Amount Business Code** Code Code 6/30/75 5 14 DC 5 Total \$ **Taxable Dividends from Securities** Exclusion Postal Acquired after Code Code 6/30/75 Unrelated Description Amount **Business Code** Code Code DIVIDENDS 330,927 14 DC Total 330,927

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Form 990, Part IX, Line 241 - All Other Expenses Fund Fund sing sing states and contract of contract of the contract of contract of the contract	94368 12/31/2009	rederal Sta	tements		
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Forms 990 / 990-EZ Return Summary

For calendar year 2009, or tax year beginning

, and ending

52-0794368

Net Asset / Fund Balance at Begin	nning of Year		_	9,898,216
Revenue				
Contributions	2,	916,585		
Program service revenue				
Investment income		330,932		
Capital gain / loss				
Special events				
Gross revenue				
Direct expenses				
Net income				
Other income	··	172,928		
Total revenue		•	3,420,445	
Expenses				
Program services	2,	480,164		
Management and general		148,806		
Fundraising		148,716		
Total expenses		<u> </u>	2,777,686	
Excess / (deficit)				642,759
Other changes			_	1,296,519
Net Asset / Fund	Balance at End of Year			11,837,494
Reconciliation of otal revenue per financial statements ess	5,004,632	Less	Reconciliation of Exercises per financial statements	3,065,354
otal revenue per financial statements ess Unrealized gains	5,004,632 1,296,519	Less Donated	es per financial statements services	
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otal revenue per financial statements ess Unrealized gains Donated services Recoveries Other flus Investment expenses Other Total revenue per return	5,004,632 1,296,519 196,600 91,068 3,420,445	Less Donated s Pnor year Losses Other Plus Investmer Other Total Balance Sheet Ending	es per financial statements services radjustments et expenses expenses per return Differences	3,065,354 196,600 91,068
otal revenue per financial statements ess Unrealized gains Donated services Recoveries Other Plus Investment expenses Other Total revenue per return Assets	5,004,632 1,296,519 196,600 91,068 3,420,445 Beginning 10,786,611	Less Donated s Prior year Losses Other Plus Investmer Other Total Balance Sheet Ending 12,395,293	es per financial statements services radjustments nt expenses expenses per return Differences	3,065,354 196,600 91,068
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