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|                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                   |                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| <div>Form 990</div> <div></div> <div>Department of the Treasury<br/>Internal Revenue Service</div> | <div>Return of Organization Exempt From Income Tax</div> <div>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</div> <div><div><div></div>The organization may have to use a copy of this return to satisfy state reporting requirements</div></div> | OMB No 1545-0047          |
|                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                   | 2009                      |
|                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                   | Open to Public Inspection |

|                                                                                                                                                                                                                                                                                                                                          |                                                                   |                                                                                                                                                 |                          |                                                                                                                            |                                |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------|--|
| A For the 2009 calendar year, or tax year beginning 01-01-2009 and ending 12-31-2009                                                                                                                                                                                                                                                     |                                                                   |                                                                                                                                                 |                          |                                                                                                                            |                                |  |
| B Check if applicable<br><div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div> <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Terminated</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Application pending</div> | Please use IRS label or print or type. See Specific Instructions. | C Name of organization<br>ALLIANCE OF AUTOMOBILE MANUFACTURERS INC                                                                              |                          | D Employer identification number<br>52-2143968                                                                             |                                |  |
|                                                                                                                                                                                                                                                                                                                                          |                                                                   | Doing Business As                                                                                                                               |                          | E Telephone number<br>(202) 326-5593                                                                                       |                                |  |
|                                                                                                                                                                                                                                                                                                                                          |                                                                   | Number and street (or P O box if mail is not delivered to street address)<br>1401 EYE STREET NW No 900                                          |                          | Room/suite                                                                                                                 | G Gross receipts \$ 39,678,867 |  |
|                                                                                                                                                                                                                                                                                                                                          |                                                                   | City or town, state or country, and ZIP + 4<br>WASHINGTON, DC 200056562                                                                         |                          |                                                                                                                            |                                |  |
|                                                                                                                                                                                                                                                                                                                                          |                                                                   | F Name and address of principal officer<br>DAVID K MCCURDY<br>1401 EYE STREET NW No 900<br>WASHINGTON, DC 200056562                             |                          | H(a) Is this a group return for affiliates? <div><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> |                                |  |
| I Tax-exempt status <input checked="" type="checkbox"/> 501(c) ( 6 ) <div><input checked="" type="checkbox"/> (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</div>                                                                                                                                     |                                                                   | H(b) Are all affiliates included? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div> If "No," attach a list (see instructions) |                          | H(c) Group exemption number <div></div>                                                                                    |                                |  |
| J Website: <div><div></div> WWW AUTOALLIANCE ORG</div>                                                                                                                                                                                                                                                                                   |                                                                   |                                                                                                                                                 |                          |                                                                                                                            |                                |  |
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <div></div>                                                                                                                                                    |                                                                   |                                                                                                                                                 | L Year of formation 1999 |                                                                                                                            | M State of legal domicile DC   |  |

|        |         |
|--------|---------|
| Part I | Summary |
|--------|---------|

|                         |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |              |  |
|-------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------|--|
| Activities & Governance | 1                           | Briefly describe the organization's mission or most significant activities<br>TO REPRESENT THE COMMON INTERESTS OF ITS MEMBERS AND PROVIDE A FORUM TO ENABLE THEM TO ADVANCE PUBLIC POLICIES THAT MEET CONSUMER AND SOCIETAL NEEDS FOR CLEAN, SAFE, EFFICIENT, AND AFFORDABLE PERSONAL TRANSPORTATION TO REPRESENT 11 CAR AND LIGHT TRUCK MANUFACTURERS SELLING VEHICLES IN THE UNITED STATES AND SERVES AS A LEADING ADVOCACY GROUP FOR THE AUTO INDUSTRY ALLIANCE MEMBERS REPRESENT APPROXIMATELY 77% OF ALL CAR AND LIGHT TRUCK SALES IN THE U S RESPECT FOR PRINCIPALS OF SUSTAINABLE MOBILITY PERMITS TECHNOLOGICAL PROGRESS IN HARMONY WITH THE ENVIRONMENT AND THE ECONOMY |                           |              |  |
|                         |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |              |  |
|                         |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |              |  |
|                         |                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                           |              |  |
|                         | 2                           | Check this box <div><input checked="" type="checkbox"/></div> if the organization discontinued its operations or disposed of more than 25% of its net assets                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                           |              |  |
|                         | 3                           | Number of voting members of the governing body (Part VI, line 1a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 3                         | 19           |  |
|                         | 4                           | Number of independent voting members of the governing body (Part VI, line 1b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4                         | 19           |  |
|                         | 5                           | Total number of employees (Part V, line 2a)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 5                         | 59           |  |
|                         | 6                           | Total number of volunteers (estimate if necessary)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 6                         | 19           |  |
|                         | 7a                          | Total gross unrelated business revenue from Part VIII, column (C), line 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7a                        | 0            |  |
|                         | 7b                          | Net unrelated business taxable income from Form 990-T, line 34                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 7b                        | 0            |  |
| Revenue                 | 8                           | Contributions and grants (Part VIII, line 1h)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Prior Year                | Current Year |  |
|                         | 9                           | Program service revenue (Part VIII, line 2g)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 35,658,556                | 28,590,301   |  |
|                         | 10                          | Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | -86,311                   | 183,795      |  |
|                         | 11                          | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 10,102                    | 100          |  |
|                         | 12                          | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 35,582,347                | 28,774,196   |  |
|                         | 13                          | Grants and similar amounts paid (Part IX, column (A), lines 1–3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                           | 0            |  |
| Expenses                | 14                          | Benefits paid to or for members (Part IX, column (A), line 4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           | 0            |  |
|                         | 15                          | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 8,695,619                 | 8,875,085    |  |
|                         | 16a                         | Professional fundraising fees (Part IX, column (A), line 11e)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                           | 0            |  |
|                         | 16b                         | Total fundraising expenses (Part IX, column (D), line 25) <div><div></div>0</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                           |              |  |
|                         | 17                          | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 23,755,402                | 16,371,915   |  |
|                         | 18                          | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 32,451,021                | 25,247,000   |  |
|                         | 19                          | Revenue less expenses Subtract line 18 from line 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 3,131,326                 | 3,527,196    |  |
|                         | Net Assets or Fund Balances |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Beginning of Current Year | End of Year  |  |
| 20                      |                             | Total assets (Part X, line 16)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 16,020,592                | 19,510,915   |  |
| 21                      |                             | Total liabilities (Part X, line 26)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4,798,006                 | 4,761,133    |  |
| 22                      |                             | Net assets or fund balances Subtract line 21 from line 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 11,222,586                | 14,749,782   |  |

|         |                 |
|---------|-----------------|
| Part II | Signature Block |
|---------|-----------------|

|                          |                                                                                                                                                                                                                                                                                                                     |                                                                                       |                                                            |                                                  |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------------------------------|
| Sign Here                | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge |                                                                                       |                                                            |                                                  |
|                          | <div><div></div>Signature of officer</div>                                                                                                                                                                                                                                                                          |                                                                                       | <div>2010-11-09</div> Date                                 |                                                  |
|                          | <div><div></div>CHARLES ROBINSON VP OF FINANCE &amp; OPERATIONS</div> Type or print name and title                                                                                                                                                                                                                  |                                                                                       |                                                            |                                                  |
| Paid Preparer's Use Only | Preparer's signature <div><div></div>RICHARD L WOLF</div>                                                                                                                                                                                                                                                           | Date                                                                                  | Check if self-employed <div><input type="checkbox"/></div> | Preparer's identifying number (see instructions) |
|                          | Firm's name (or yours if self-employed), address, and ZIP + 4                                                                                                                                                                                                                                                       | HERTZBACH & COMPANY PA<br>800 RED BROOK BOULEVARD SUITE 300<br>OWINGS MILLS, MD 21117 |                                                            | EIN <div></div>                                  |
|                          |                                                                                                                                                                                                                                                                                                                     |                                                                                       |                                                            | Phone no <div><div></div>(410) 363-3200</div>    |

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

☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

TO REPRESENT THE COMMON INTERESTS OF ITS MEMBERS AND PROVIDE A FORUM TO ENABLE THEM TO ADVANCE PUBLIC POLICIES THAT MEET CONSUMER AND SOCIETAL NEEDS FOR CLEAN, SAFE, EFFICIENT, AND AFFORDABLE PERSONAL TRANSPORTATION TO REPRESENT 11 CAR AND LIGHT TRUCK MANUFACTURERS SELLING VEHICLES IN THE UNITED STATES AND SERVES AS A LEADING ADVOCACY GROUP FOR THE AUTO INDUSTRY ALLIANCE MEMBERS REPRESENT APPROXIMATELY 77% OF ALL CAR AND LIGHT TRUCK SALES IN THE U S RESPECT FOR PRINCIPALS OF SUSTAINABLE MOBILITY PERMITS TECHNOLOGICAL PROGRESS IN HARMONY WITH THE ENVIRONMENT AND THE ECONOMY

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

☒

No

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?

Yes

☒

No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ including grants of \$ ) (Revenue \$ )

TO WORK WITH MEMBER COMPANIES ON RESEARCH MATTERS THIS INCLUDES PROGRAMS ADDRESSING A VARIETY OF ENVIRONMENTAL AND VEHICLE SAFETY ISSUES

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

TO WORK WITH MEMBER COMPANIES ON LEGISLATIVE AND REGULATORY ISSUES AFFECTING THE INDUSTRY

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses \$

Part IV

Checklist of Required Schedules

|     |                                                                                                                                                                                                                                                     | Yes | No  |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .                                                                                                         | 1   | No  |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .                                                                                                                                                            | 2   | No  |
| 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   | Yes |
| 4   | <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .                                                                                                        | 4   |     |
| 5   | <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III                                        | 5   | Yes |
| 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," complete Schedule D, Part I  | 6   | No  |
| 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   | No  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III                                                                                                   | 8   | No  |
| 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   | No  |
| 10  | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V                                                                                        | 10  | No  |
| 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  | Yes |
|     | • 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 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 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 Schedule D, Parts XI, XII, and XIII                                                                                             | 12  | Yes |
| 12A | 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 | No  |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                                                                                                                                                   | 13  | No  |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? . . . . .                                                                                                                                               | 14a | No  |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I . . . . .                   | 14b | Yes |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II . . . . .                                      | 15  | No  |
| 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 U S ? If "Yes," complete Schedule F, Part III . . . . .                                          | 16  | No  |
| 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  | No  |
| 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  | No  |
| 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  | No  |
| 20  | Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .                                                                                                                                                         | 20  | No  |

Part IV

Checklist of Required Schedules (continued)

|     |                                                                                                                                                                                                                                                                                                                                                                 |     |     |    |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|----|
| 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 1? <i>If "Yes," complete Schedule I, Parts I and II . . . .</i>                                                                                                                                 | 21  |     | No |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>                                                                                                                                                | 22  |     | No |
| 23  | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . . . .</i>  | 23  | Yes |    |
| 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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25 . . . . .</i>                                                                      | 24a |     | No |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .                                                                                                                                                                                                                                                       | 24b |     |    |
| c   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .                                                                                                                                                                                                            | 24c |     |    |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .                                                                                                                                                                                                                                                 | 24d |     |    |
| 25a | <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I . . . . .</i>                                                                                                                                           | 25a |     |    |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . . . .</i>                                                                            | 25b |     |    |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>                                                                                                         | 26  |     | No |
| 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? <i>If "Yes," complete Schedule L, Part III . . . . .</i>                                                                                 | 27  |     | No |
| 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)                                                                                                                                                                   |     |     |    |
| a   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>                                                                                                                                                                                                                                        | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>                                                                                                                                                                                                                     | 28b |     | No |
| 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 owner? <i>If "Yes," complete Schedule L, Part IV . . . .</i>                                                                                                                                  | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>                                                                                                                                                                                                                                       | 29  |     | No |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>                                                                                                                                                                       | 30  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>                                                                                                                                                                                                                             | 31  |     | No |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>                                                                                                                                                                                                           | 32  |     | No |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>                                                                                                                                                           | 33  |     | No |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>                                                                                                                                                                                                              | 34  |     | No |
| 35  | Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>                                                                                                                                                                                                        | 35  |     | No |
| 36  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>                                                                                                                                                                | 36  |     |    |
| 37  | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>                                                                                                                  | 37  |     | No |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .                                                                                                                                                                    | 38  | Yes |    |

Part V

Statements Regarding Other IRS Filings and Tax Compliance

|                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                      |                                                                                 | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----|----|
| 1a                                                                                                                                                                                                                                                                                | Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .                                                                                           | 1a                                                                              | 178 |    |
|                                                                                                                                                                                                                                                                                   | b                                                                                                                                                                                                                                                    | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b  |    |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .                                                                                                              |                                                                                                                                                                                                                                                      |                                                                                 | 1c  |    |
| 2a                                                                                                                                                                                                                                                                                | Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .                                                        | 2a                                                                              | 59  |    |
|                                                                                                                                                                                                                                                                                   | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)     |                                                                                 |     |    |
| 3a                                                                                                                                                                                                                                                                                | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .                                                                                                                       | 3a                                                                              |     | No |
| 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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . | 4a                                                                              |     | No |
|                                                                                                                                                                                                                                                                                   | b If "Yes," enter the name of the foreign country: <input type="text"/><br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts                                          |                                                                                 |     |    |
| 5a                                                                                                                                                                                                                                                                                | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .                                                                                                                                      | 5a                                                                              |     | No |
| b                                                                                                                                                                                                                                                                                 | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                                     | 5b                                                                              |     | No |
| c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .                                                                                                                       |                                                                                                                                                                                                                                                      |                                                                                 | 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                                                                              |     | No |
| 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).                                                                                                                                                                                                   |                                                                                                                                                                                                                                                      |                                                                                 |     |    |
| a                                                                                                                                                                                                                                                                                 | 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                                                                              |     |    |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .                                                                                                                                                                       |                                                                                                                                                                                                                                                      |                                                                                 | 7b  |    |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .                                                                                                                                  |                                                                                                                                                                                                                                                      |                                                                                 | 7c  |    |
| d                                                                                                                                                                                                                                                                                 | If "Yes," indicate the number of Forms 8282 filed during the year . . . . .                                                                                                                                                                          | 7d                                                                              |     |    |
| e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 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 required? . . . . .                                                                                                                                                 |                                                                                                                                                                                                                                                      |                                                                                 | 7h  |    |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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 Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .                                                                                                                                                                                |                                                                                                                                                                                                                                                      |                                                                                 | 9b  |    |
| 10 Section 501(c)(7) organizations. Enter                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                      |                                                                                 |     |    |
| a Initiation fees and capital contributions included on Part VIII, line 12 . . . . .                                                                                                                                                                                              |                                                                                                                                                                                                                                                      | 10a                                                                             |     |    |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities                                                                                                                                                                                     |                                                                                                                                                                                                                                                      | 10b                                                                             |     |    |
| 11 Section 501(c)(12) organizations. Enter                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                      |                                                                                 |     |    |
| a Gross income from members or shareholders . . . . .                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                      | 11a                                                                             |     |    |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .                                                                                                                                           |                                                                                                                                                                                                                                                      | 11b                                                                             |     |    |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?                                                                                                                                                                    |                                                                                                                                                                                                                                                      |                                                                                 | 12a |    |
| b If "Yes," enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                                                           |                                                                                                                                                                                                                                                      | 12b                                                                             |     |    |

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

|    |                                                                                                                                                                                                                           |    |     |    |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
|    |                                                                                                                                                                                                                           |    | Yes | No |
| 1a | Enter the number of voting members of the governing body . . .                                                                                                                                                            | 1a | 19  |    |
| b  | Enter the number of voting members that are independent . . .                                                                                                                                                             | 1b | 19  |    |
| 2  | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .                                           | 2  |     | No |
| 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  |     | No |
| 4  | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?                                                                                                     | 4  |     | No |
| 5  | Did the organization become aware during the year of a material diversion of the organization's assets? . . .                                                                                                             | 5  |     | No |
| 6  | Does the organization have members or stockholders? . . . . .                                                                                                                                                             | 6  | Yes |    |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .                                                                                     | 7a | Yes |    |
| b  | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .                                                                                                             | 7b | Yes |    |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following                                                                                          |    |     |    |
| a  | The governing body? . . . . .                                                                                                                                                                                             | 8a | Yes |    |
| b  | Each committee with authority to act on behalf of the governing body? . . . . .                                                                                                                                           | 8b | Yes |    |
| 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  |     | No |

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

|     |                                                                                                                                                                                                                                                                                                          |     |     |    |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|----|
|     |                                                                                                                                                                                                                                                                                                          |     | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? . . . . .                                                                                                                                                                                                                            | 10a |     | No |
| 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 |     |    |
| 11  | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                                       | 11  | Yes |    |
| 11A | Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .                                                                                                                                                                                                    |     |     |    |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .                                                                                                                                                                                                       | 12a | Yes |    |
| b   | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .                                                                                                                                                              | 12b | Yes |    |
| 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 | Yes |    |
| 13  | Does the organization have a written whistleblower policy? . . . . .                                                                                                                                                                                                                                     | 13  | Yes |    |
| 14  | Does the organization have a written document retention and destruction policy? . . . . .                                                                                                                                                                                                                | 14  | Yes |    |
| 15  | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?                                                                                     |     |     |    |
| a   | The organization's CEO, Executive Director, or top management official . . . . .                                                                                                                                                                                                                         | 15a | Yes |    |
| b   | Other officers or key employees of the organization . . . . .                                                                                                                                                                                                                                            | 15b |     | No |
|     | If "Yes" to line a or b, 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 |     | No |
| 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 |     |    |

Section C. Disclosure

|    |                                                                                                                                                                                                                                                                                                                                                          |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17 | List the States with which a copy of this Form 990 is required to be filed CA                                                                                                                                                                                                                                                                            |
| 18 | Section 6104 requires an organization to make its Form 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.<br><input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. See Additional Data Table.                                                                                                                                               |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization. THE ORGANIZATION<br>1401 EYE STREET NW NO 900<br>WASHINGTON, DC 20005<br>(202) 326-5593                                                                                                                                    |

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

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

Form 990 (2009)

|                 |           |   |         |
|-----------------|-----------|---|---------|
| <b>1b Total</b> | 3,585,775 | 0 | 669,883 |
|-----------------|-----------|---|---------|

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶**29

|                                                                                                                                                                                                                                              | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>                                        |     | No |
| <b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | Yes |    |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>                                     |     | No |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A)<br>Name and business address                                   | (B)<br>Description of services | (C)<br>Compensation |
|--------------------------------------------------------------------|--------------------------------|---------------------|
| BINGHAM MCCUTCHEN LLP<br>3000 K STREET<br>NW WASHINGTON, DC 20006  | LEGAL                          | 1,458,407           |
| KIRKLAND & ELLIS LLP<br>655 15TH STREET<br>NW WASHINGTON, DC 20005 | LEGAL                          | 933,329             |
| HOGAN & HARTSON LLP<br>875 3RD AVENUE<br>NEW YORK, NY 10022        | LEGAL                          | 915,640             |
| CORE LABORATORIES LP<br>8210 MOSLEY ROAD<br>HOUSTON, TX 77075      | RESEARCH                       | 498,268             |
| CONNECTIONS MEDIA<br>1428 U STREET NW<br>WASHINGTON, DC 20009      | TECHNOLOGY                     | 351,932             |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**27

Part VIII

Statement of Revenue

|                                                           |                                                                    |                                                                                                                                               |                                                                                          | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512, 513, or<br>514 |         |
|-----------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------|---------|
| Contributions, gifts, grants<br>and other similar amounts | 1a                                                                 | Federated campaigns . . .                                                                                                                     | 1a                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | b                                                                  | Membership dues . . . . .                                                                                                                     | 1b                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | c                                                                  | Fundraising events . . . . .                                                                                                                  | 1c                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | d                                                                  | Related organizations . . . .                                                                                                                 | 1d                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | e                                                                  | Government grants (contributions)                                                                                                             | 1e                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | f                                                                  | All other contributions, gifts, grants, and<br>similar amounts not included above                                                             | 1f                                                                                       |                      |                                                    |                                         |                                                                                 |         |
|                                                           | g                                                                  | Noncash contributions included in<br>lines 1a-1f \$ _____                                                                                     |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | h                                                                  | Total. Add lines 1a-1f . . . . .                                                                                                              |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| Program Service Revenue                                   |                                                                    |                                                                                                                                               | Business Code                                                                            |                      |                                                    |                                         |                                                                                 |         |
|                                                           | 2a                                                                 | MEMBERSHIP DUES                                                                                                                               | 900,099                                                                                  | 28,578,849           | 28,578,849                                         |                                         |                                                                                 |         |
|                                                           | b                                                                  | SPECIAL PROJECTS                                                                                                                              | 900,099                                                                                  | 11,452               | 11,452                                             |                                         |                                                                                 |         |
|                                                           | c                                                                  |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | d                                                                  |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | e                                                                  |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | f                                                                  | All other program service revenue                                                                                                             |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | g                                                                  | Total. Add lines 2a-2f . . . . .                                                                                                              |                                                                                          | 28,590,301           |                                                    |                                         |                                                                                 |         |
|                                                           | Other Revenue                                                      | 3                                                                                                                                             | Investment income (including dividends, interest<br>and other similar amounts) . . . . . |                      | 186,466                                            |                                         |                                                                                 | 186,466 |
| 4                                                         |                                                                    | Income from investment of tax-exempt bond proceeds . . .                                                                                      |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 5                                                         |                                                                    | Royalties . . . . .                                                                                                                           |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 6a                                                        |                                                                    | (i) Real                                                                                                                                      |                                                                                          | (ii) Personal        |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| b                                                         |                                                                    | Less rental<br>expenses                                                                                                                       |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| c                                                         |                                                                    | Rental income<br>or (loss)                                                                                                                    |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| d                                                         |                                                                    | Net rental income or (loss) . . . . .                                                                                                         |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 7a                                                        |                                                                    | (i) Securities                                                                                                                                |                                                                                          | (ii) Other           |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    | 10,902,000                                                                                                                                    |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    | 10,904,671                                                                                                                                    |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    | -2,671                                                                                                                                        |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| d                                                         |                                                                    | Net gain or (loss) . . . . .                                                                                                                  |                                                                                          | -2,671               |                                                    |                                         | -2,671                                                                          |         |
| 8a                                                        |                                                                    | Gross income from fundraising<br>events (not including<br>\$ _____<br>of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . |                                                                                          | a                    |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    | b Less direct expenses . . . . .                                                                                                              |                                                                                          | b                    |                                                    |                                         |                                                                                 |         |
| c                                                         |                                                                    | Net income or (loss) from fundraising events . . .                                                                                            |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 9a                                                        |                                                                    | Gross income from gaming activities<br>See Part IV, line 19 . . . . .                                                                         |                                                                                          | a                    |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | b Less direct expenses . . . . .                                   |                                                                                                                                               | b                                                                                        |                      |                                                    |                                         |                                                                                 |         |
| c                                                         | Net income or (loss) from gaming activities . . .                  |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 10a                                                       | Gross sales of inventory, less<br>returns and allowances . . . . . |                                                                                                                                               | a                                                                                        |                      |                                                    |                                         |                                                                                 |         |
|                                                           |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
|                                                           | b Less cost of goods sold . . . . .                                |                                                                                                                                               | b                                                                                        |                      |                                                    |                                         |                                                                                 |         |
| c                                                         | Net income or (loss) from sales of inventory . . .                 |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| Miscellaneous Revenue                                     |                                                                    | Business Code                                                                                                                                 |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| 11a                                                       | MISCELLANEOUS                                                      | 900,099                                                                                                                                       | 100                                                                                      | 100                  |                                                    |                                         |                                                                                 |         |
| b                                                         |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| c                                                         |                                                                    |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| d                                                         | All other revenue . . . . .                                        |                                                                                                                                               |                                                                                          |                      |                                                    |                                         |                                                                                 |         |
| e                                                         | Total. Add lines 11a-11d . . . . .                                 |                                                                                                                                               | 100                                                                                      |                      |                                                    |                                         |                                                                                 |         |
| 12                                                        | Total revenue. See Instructions . . . . .                          |                                                                                                                                               | 28,774,196                                                                               | 28,590,401           | 0                                                  | 183,795                                 |                                                                                 |         |

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).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |                                                                                                                                                                                                                         | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1                                                                              | Grants and other assistance to governments and organizations in the U S See Part IV, line 21                                                                                                                            |                       |                                 |                                        |                             |
| 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                                                                                                 |                       |                                 |                                        |                             |
| 4                                                                              | Benefits paid to or for members                                                                                                                                                                                         |                       |                                 |                                        |                             |
| 5                                                                              | Compensation of current officers, directors, trustees, and key employees . . . . .                                                                                                                                      | 3,184,233             |                                 |                                        |                             |
| 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                                                                                                                                                                                                | 4,081,207             |                                 |                                        |                             |
| 8                                                                              | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .                                                                                                                 | 574,920               |                                 |                                        |                             |
| 9                                                                              | Other employee benefits . . . . .                                                                                                                                                                                       | 658,619               |                                 |                                        |                             |
| 10                                                                             | Payroll taxes . . . . .                                                                                                                                                                                                 | 376,106               |                                 |                                        |                             |
| 11                                                                             | Fees for services (non-employees)                                                                                                                                                                                       |                       |                                 |                                        |                             |
| a                                                                              | Management . . . . .                                                                                                                                                                                                    |                       |                                 |                                        |                             |
| b                                                                              | Legal . . . . .                                                                                                                                                                                                         | 3,276,509             |                                 |                                        |                             |
| c                                                                              | Accounting . . . . .                                                                                                                                                                                                    | 219,901               |                                 |                                        |                             |
| d                                                                              | Lobbying . . . . .                                                                                                                                                                                                      | 4,241,720             |                                 |                                        |                             |
| e                                                                              | Professional fundraising See Part IV, line 17 . . . . .                                                                                                                                                                 |                       |                                 |                                        |                             |
| f                                                                              | Investment management fees . . . . .                                                                                                                                                                                    |                       |                                 |                                        |                             |
| g                                                                              | Other . . . . .                                                                                                                                                                                                         | 2,910,400             |                                 |                                        |                             |
| 12                                                                             | Advertising and promotion . . . . .                                                                                                                                                                                     | 780,942               |                                 |                                        |                             |
| 13                                                                             | Office expenses . . . . .                                                                                                                                                                                               | 170,524               |                                 |                                        |                             |
| 14                                                                             | Information technology . . . . .                                                                                                                                                                                        | 79,925                |                                 |                                        |                             |
| 15                                                                             | Royalties . . . . .                                                                                                                                                                                                     |                       |                                 |                                        |                             |
| 16                                                                             | Occupancy . . . . .                                                                                                                                                                                                     | 1,197,273             |                                 |                                        |                             |
| 17                                                                             | Travel . . . . .                                                                                                                                                                                                        | 498,231               |                                 |                                        |                             |
| 18                                                                             | Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .                                                                                                                |                       |                                 |                                        |                             |
| 19                                                                             | Conferences, conventions, and meetings . . . . .                                                                                                                                                                        | 587,996               |                                 |                                        |                             |
| 20                                                                             | Interest . . . . .                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| 21                                                                             | Payments to affiliates . . . . .                                                                                                                                                                                        |                       |                                 |                                        |                             |
| 22                                                                             | Depreciation, depletion, and amortization . . . . .                                                                                                                                                                     | 215,730               |                                 |                                        |                             |
| 23                                                                             | Insurance . . . . .                                                                                                                                                                                                     | 92,500                |                                 |                                        |                             |
| 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 )                                                     |                       |                                 |                                        |                             |
| a                                                                              | MEMBERSHIPS & SPONSORSH                                                                                                                                                                                                 | 1,706,643             |                                 |                                        |                             |
| b                                                                              | MISCELLANEOUS                                                                                                                                                                                                           | 393,621               |                                 |                                        |                             |
| c                                                                              |                                                                                                                                                                                                                         |                       |                                 |                                        |                             |
| d                                                                              |                                                                                                                                                                                                                         |                       |                                 |                                        |                             |
| e                                                                              |                                                                                                                                                                                                                         |                       |                                 |                                        |                             |
| f                                                                              | All other expenses                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| 25                                                                             | Total functional expenses. Add lines 1 through 24f                                                                                                                                                                      | 25,247,000            |                                 |                                        |                             |
| 26                                                                             | Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       |                                 |                                        |                             |

Part X

Balance Sheet

|                             |                                                                                                                                           |                                                                                                                                                                               |     |           | (A)               |     | (B)         |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----------|-------------------|-----|-------------|
|                             |                                                                                                                                           |                                                                                                                                                                               |     |           | Beginning of year |     | End of year |
| Assets                      | 1                                                                                                                                         | Cash—non-interest-bearing . . . . .                                                                                                                                           |     |           | 3,594,882         | 1   | 2,664,144   |
|                             | 2                                                                                                                                         | Savings and temporary cash investments . . . . .                                                                                                                              |     |           | 5,785,497         | 2   | 4,367,479   |
|                             | 3                                                                                                                                         | Pledges and grants receivable, net . . . . .                                                                                                                                  |     |           |                   | 3   |             |
|                             | 4                                                                                                                                         | Accounts receivable, net . . . . .                                                                                                                                            |     |           | 239,745           | 4   | 395,789     |
|                             | 5                                                                                                                                         | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .                  |     |           |                   | 5   |             |
|                             | 6                                                                                                                                         | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L . . . . .     |     |           |                   | 6   |             |
|                             | 7                                                                                                                                         | Notes and loans receivable, net . . . . .                                                                                                                                     |     |           |                   | 7   |             |
|                             | 8                                                                                                                                         | Inventories for sale or use . . . . .                                                                                                                                         |     |           |                   | 8   |             |
|                             | 9                                                                                                                                         | Prepaid expenses and deferred charges . . . . .                                                                                                                               |     |           | 107,027           | 9   | 101,307     |
|                             | 10a                                                                                                                                       | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D                                                                                             | 10a | 3,198,349 | 937,783           | 10c | 761,820     |
|                             | b                                                                                                                                         | Less accumulated depreciation . . . . .                                                                                                                                       | 10b | 2,436,529 |                   |     |             |
|                             | 11                                                                                                                                        | Investments—publicly traded securities . . . . .                                                                                                                              |     |           | 4,739,230         | 11  | 10,148,332  |
|                             | 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 . . . . .                                                                                                                                   |     |           | 616,428           | 15  | 1,072,044   |
|                             | 16                                                                                                                                        | Total assets. Add lines 1 through 15 (must equal line 34) . . . . .                                                                                                           |     |           | 16,020,592        | 16  | 19,510,915  |
| Liabilities                 | 17                                                                                                                                        | Accounts payable and accrued expenses . . . . .                                                                                                                               |     |           | 2,835,419         | 17  | 2,088,093   |
|                             | 18                                                                                                                                        | Grants payable . . . . .                                                                                                                                                      |     |           |                   | 18  |             |
|                             | 19                                                                                                                                        | Deferred revenue . . . . .                                                                                                                                                    |     |           |                   | 19  |             |
|                             | 20                                                                                                                                        | Tax-exempt bond liabilities . . . . .                                                                                                                                         |     |           |                   | 20  |             |
|                             | 21                                                                                                                                        | Escrow or custodial account liability Complete Part IV of Schedule D . . . . .                                                                                                |     |           | 553,851           | 21  | 813,852     |
|                             | 22                                                                                                                                        | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . . |     |           |                   | 22  |             |
|                             | 23                                                                                                                                        | Secured mortgages and notes payable to unrelated third parties . . . . .                                                                                                      |     |           |                   | 23  |             |
|                             | 24                                                                                                                                        | Unsecured notes and loans payable to unrelated third parties . . . . .                                                                                                        |     |           |                   | 24  |             |
|                             | 25                                                                                                                                        | Other liabilities Complete Part X of Schedule D . . . . .                                                                                                                     |     |           | 1,408,736         | 25  | 1,859,188   |
|                             | 26                                                                                                                                        | Total liabilities. Add lines 17 through 25 . . . . .                                                                                                                          |     |           | 4,798,006         | 26  | 4,761,133   |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. |                                                                                                                                                                               |     |           |                   |     |             |
|                             | 27                                                                                                                                        | Unrestricted net assets . . . . .                                                                                                                                             |     |           | 11,222,586        | 27  | 14,749,782  |
|                             | 28                                                                                                                                        | Temporarily restricted net assets . . . . .                                                                                                                                   |     |           |                   | 28  |             |
|                             | 29                                                                                                                                        | Permanently restricted net assets . . . . .                                                                                                                                   |     |           |                   | 29  |             |
|                             | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.                          |                                                                                                                                                                               |     |           |                   |     |             |
|                             | 30                                                                                                                                        | Capital stock or trust principal, or current funds . . . . .                                                                                                                  |     |           |                   | 30  |             |
|                             | 31                                                                                                                                        | Paid-in or capital surplus, or land, building or equipment fund . . . . .                                                                                                     |     |           |                   | 31  |             |
|                             | 32                                                                                                                                        | Retained earnings, endowment, accumulated income, or other funds . . . . .                                                                                                    |     |           |                   | 32  |             |
|                             | 33                                                                                                                                        | Total net assets or fund balances . . . . .                                                                                                                                   |     |           | 11,222,586        | 33  | 14,749,782  |
|                             | 34                                                                                                                                        | Total liabilities and net assets/fund balances . . . . .                                                                                                                      |     |           | 16,020,592        | 34  | 19,510,915  |

**Part XI Financial Statements and Reporting**

|                                                                                                                                                                                                                                                                                                                                                                   | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O                                                                        |     |    |
| <b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . .                                                                                                                                                                                                                                                   |     | No |
| <b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .                                                                                                                                                                                                                                                             | Yes |    |
| <b>c</b> If "Yes," to 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?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . . | Yes |    |
| <b>d</b> 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<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis                     |     |    |
| <b>3a</b> 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? . . . . .                                                                                                                                                                                      |     | No |
| <b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .                                                                                                                               |     |    |

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

|                                                                      |                                              |
|----------------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>ALLIANCE OF AUTOMOBILE MANUFACTURERS INC | Employer identification number<br>52-2143968 |
|----------------------------------------------------------------------|----------------------------------------------|

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

|   |                                                                                                          |            |
|---|----------------------------------------------------------------------------------------------------------|------------|
| 1 | Provide a description of the organization's direct and indirect political campaign activities in Part IV |            |
| 2 | Political expenditures                                                                                   | ▶ \$ 6,500 |
| 3 | Volunteer hours                                                                                          |            |

Part I-B Complete if the organization is exempt under section 501(c)(3).

|    |                                                                                         |      |                                                          |
|----|-----------------------------------------------------------------------------------------|------|----------------------------------------------------------|
| 1  | Enter the amount of any excise tax incurred by the organization under section 4955      | ▶ \$ |                                                          |
| 2  | Enter the amount of any excise tax incurred by organization managers under section 4955 | ▶ \$ |                                                          |
| 3  | If the organization incurred a section 4955 tax, did it file Form 4720 for this year?   |      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made?                                                                  |      | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b  | If "Yes," describe in Part IV                                                           |      |                                                          |

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

|   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                     |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------------------------------------------------------------------|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities                                                                                                                                                                                                                                                                                                                                                                                                             | ▶ \$ | 0                                                                   |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities                                                                                                                                                                                                                                                                                                                                                                                     | ▶ \$ | 6,500                                                               |
| 3 | Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b                                                                                                                                                                                                                                                                                                                                                                                                                       | ▶ \$ | 6,500                                                               |
| 4 | Did the filing organization file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 5 | State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV |      |                                                                     |

| (a) Name                                    | (b) Address                                         | (c) EIN    | (d) Amount paid from filing organization's funds If none, enter -0- | (e) A moun't of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|---------------------------------------------|-----------------------------------------------------|------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| ALLIANCE OF AUTOMOBILE MANUFACTURERS CA PAC | 555 CAPITOL MALL SUITE 1425<br>SACRAMENTO, CA 95814 | 26-2335858 | 6,500                                                               | 0                                                                                                                                            |

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                   | (a) Filing<br>Organization's<br>Totals          | (b) Affiliated<br>Group<br>Totals  |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------|------------------------------------|--------------------|------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grass roots lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| b Total lobbying expenditures to influence a legislative body (direct lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| c Total lobbying expenditures (add lines 1a and 1b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| d Other exempt purpose expenditures                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| e Total exempt purpose expenditures (add lines 1c and 1d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table> |                                                   | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 |  |  |
| If the amount on line 1e, column (a) or (b) is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | The lobbying nontaxable amount is:                |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Not over \$500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 20% of the amount on line 1e                      |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$500,000 but not over \$1,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$100,000 plus 15% of the excess over \$500,000   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$1,000,000 but not over \$1,500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$175,000 plus 10% of the excess over \$1,000,000 |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$1,500,000 but not over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$225,000 plus 5% of the excess over \$1,500,000  |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$1,000,000                                       |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| g Grassroots nontaxable amount (enter 25% of line 1f)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| h Subtract line 1g from line 1a If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| i Subtract line 1f from line 1c If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                 |                                    |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   | <input type="checkbox"/> Yes                    | <input type="checkbox"/> No        |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period         |          |          |          |          |           |
|--------------------------------------------------------------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)                  | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2a Lobbying non-taxable amount                               |          |          |          |          |           |
| b Lobbying ceiling amount<br>(150% of line 2a, column(e))    |          |          |          |          |           |
| c Total lobbying expenditures                                |          |          |          |          |           |
| d Grassroots non-taxable amount                              |          |          |          |          |           |
| e Grassroots ceiling amount<br>(150% of line 2d, column (e)) |          |          |          |          |           |
| f Grassroots lobbying expenditures                           |          |          |          |          |           |

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)).

|    |                                                                                                                                                                                                                              | (a) |    | (b)    |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------|
|    |                                                                                                                                                                                                                              | Yes | No | Amount |
| 1  | 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 |     |    |        |
| a  | Volunteers?                                                                                                                                                                                                                  |     |    |        |
| b  | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?                                                                                                                                 |     |    |        |
| c  | Media advertisements?                                                                                                                                                                                                        |     |    |        |
| d  | Mailings to members, legislators, or the public?                                                                                                                                                                             |     |    |        |
| e  | Publications, or published or broadcast statements?                                                                                                                                                                          |     |    |        |
| f  | Grants to other organizations for lobbying purposes?                                                                                                                                                                         |     |    |        |
| g  | Direct contact with legislators, their staffs, government officials, or a legislative body?                                                                                                                                  |     |    |        |
| h  | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?                                                                                                                                    |     |    |        |
| i  | Other activities? If "Yes," describe in Part IV                                                                                                                                                                              |     |    |        |
| j  | Total lines 1c through 1i                                                                                                                                                                                                    |     |    |        |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?                                                                                                                                |     |    |        |
| b  | If "Yes," enter the amount of any tax incurred under section 4912                                                                                                                                                            |     |    |        |
| c  | If "Yes," enter the amount of any tax incurred by organization managers under section 4912                                                                                                                                   |     |    |        |
| d  | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?                                                                                                                                 |     |    |        |

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

|   |                                                                                                  | Yes | No |
|---|--------------------------------------------------------------------------------------------------|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members?                     | 1   | No |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                | 2   | No |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3   | No |

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

|   |                                                                                                                                                                                                                                            |    |            |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------|
| 1 | Dues, assessments and similar amounts from members                                                                                                                                                                                         | 1  | 28,578,849 |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).                                                                                |    |            |
| a | Current year                                                                                                                                                                                                                               | 2a | 5,794,422  |
| b | Carryover from last year                                                                                                                                                                                                                   | 2b |            |
| c | Total                                                                                                                                                                                                                                      | 2c | 5,794,422  |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues                                                                                                                                            | 3  | 7,716,289  |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4  |            |
| 5 | Taxable amount of lobbying and political expenditures (see instructions)                                                                                                                                                                   | 5  | -1,921,867 |

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

| Identifier       | Return Reference                                                | Explanation                                                                                                                      |
|------------------|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| Part I-A, Line 1 | Organizations Direct and Indirect Political Campaign Activities | ALLIANCE OF AUTOMOBILE MANUFACTURERS, INC PROVIDED INDIRECT POLITICAL SUPPORT TO THE ALLIANCE OF AUTOMOBILE MANUFACTURERS CA PAC |

OMB No 1545-0047

**Open to Public Inspection**

▶ **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.**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**  
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

**For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990**      Cat No 52283D      **Schedule D (Form 990) 2009**

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

|    |        |
|----|--------|
|    | Amount |
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a

Did the organization include an amount on Form 990, Part X, line 21?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|    | (a)Current Year                                          | (b)Prior Year | (c)Two Years Back | (d)Three Years Back | (e)Four Years Back |
|----|----------------------------------------------------------|---------------|-------------------|---------------------|--------------------|
| 1a | Beginning of year balance . . . . .                      |               |                   |                     |                    |
| b  | Contributions . . . . .                                  |               |                   |                     |                    |
| c  | Investment earnings or losses . . . . .                  |               |                   |                     |                    |
| d  | Grants or scholarships . . . . .                         |               |                   |                     |                    |
| e  | Other expenditures for facilities and programs . . . . . |               |                   |                     |                    |
| f  | Administrative expenses . . . . .                        |               |                   |                     |                    |
| g  | End of year balance . . . . .                            |               |                   |                     |                    |

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

3a(i)

Yes

No

(ii) related organizations . . . . .

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of investment                                                                              | (a) Cost or other basis (investment) | (b)Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------|------------------------------|----------------|
| 1a Land . . . . .                                                                                      |                                      |                                |                              |                |
| b Buildings . . . . .                                                                                  |                                      |                                |                              |                |
| c Leasehold improvements . . . . .                                                                     |                                      | 1,324,555                      | 798,933                      | 525,622        |
| d Equipment . . . . .                                                                                  |                                      | 1,873,794                      | 1,637,596                    | 236,198        |
| e Other . . . . .                                                                                      |                                      |                                |                              |                |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶ |                                      |                                |                              | 761,820        |

Schedule D (Form 990) 2009



Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

|    |                                                                                 |    |            |
|----|---------------------------------------------------------------------------------|----|------------|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                        | 1  | 28,774,196 |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                         | 2  | 25,247,000 |
| 3  | Excess or (deficit) for the year Subtract line 2 from line 1                    | 3  | 3,527,196  |
| 4  | Net unrealized gains (losses) on investments                                    | 4  |            |
| 5  | Donated services and use of facilities                                          | 5  |            |
| 6  | Investment expenses                                                             | 6  |            |
| 7  | Prior period adjustments                                                        | 7  |            |
| 8  | Other (Describe in Part XIV)                                                    | 8  |            |
| 9  | Total adjustments (net) Add lines 4 - 8                                         | 9  | 0          |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | 3,527,196  |

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

|   |                                                                                            |    |            |
|---|--------------------------------------------------------------------------------------------|----|------------|
| 1 | Total revenue, gains, and other support per audited financial statements . . . . .         | 1  | 28,774,196 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12                         |    |            |
| a | Net unrealized gains on investments . . . . .                                              | 2a |            |
| b | Donated services and use of facilities . . . . .                                           | 2b |            |
| c | Recoveries of prior year grants . . . . .                                                  | 2c |            |
| d | Other (Describe in Part XIV) . . . . .                                                     | 2d |            |
| e | Add lines 2a through 2d . . . . .                                                          | 2e | 0          |
| 3 | Subtract line 2e from line 1 . . . . .                                                     | 3  | 28,774,196 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1                        |    |            |
| a | Investment expenses not included on Form 990, Part VIII, line 7b . . . . .                 | 4a |            |
| b | Other (Describe in Part XIV) . . . . .                                                     | 4b |            |
| c | Add lines 4a and 4b . . . . .                                                              | 4c | 0          |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . . | 5  | 28,774,196 |

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

|   |                                                                                             |    |            |
|---|---------------------------------------------------------------------------------------------|----|------------|
| 1 | Total expenses and losses per audited financial statements . . . . .                        | 1  | 25,247,000 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25                            |    |            |
| a | Donated services and use of facilities . . . . .                                            | 2a |            |
| b | Prior year adjustments . . . . .                                                            | 2b |            |
| c | Other losses . . . . .                                                                      | 2c |            |
| d | Other (Describe in Part XIV) . . . . .                                                      | 2d |            |
| e | Add lines 2a through 2d . . . . .                                                           | 2e | 0          |
| 3 | Subtract line 2e from line 1 . . . . .                                                      | 3  | 25,247,000 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1:                          |    |            |
| a | 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 | 0          |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . . | 5  | 25,247,000 |

Part XIV

Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

| Identifier       | Return Reference                                    | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|------------------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Part IV, Line 2b |                                                     | THE ALLIANCE SERVES AS A PASS-THRU ENTITY WHEREBY ALLIANCE MEMBERS CONTRIBUTE CERTAIN AMOUNTS TO THE ALLIANCE. THE ALLIANCE THEN WILL REMIT THE FUNDS TO OTHER NONPROFIT ORGANIZATIONS WHO ARE DOING RESEARCH IN RELATED AUTOMOTIVE FIELDS.                                                                                                                                                                                                                                           |
| Part X           | Description of Uncertain Tax Positions Under FIN 48 | Effective January 1, 2009, the Alliance adopted ASC 740, Income Taxes (formerly referred to as FASB Financial Interpretation No. 48, Accounting for Uncertainty in Income Taxes), which clarified the accounting for uncertainty in income taxes. The Alliance recognizes the tax benefit from uncertain tax positions only if it is more likely than not the tax position will be sustained on examination by the taxing authorities, based on the technical merits of the position. |



[illegible]**Schedule F (Form 990) 2009**

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

[illegible]

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

**Schedule F (Form 990) 2009**

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

|                                                                      |                                              |
|----------------------------------------------------------------------|----------------------------------------------|
| Name of the organization<br>ALLIANCE OF AUTOMOBILE MANUFACTURERS INC | Employer identification number<br>52-2143968 |
|----------------------------------------------------------------------|----------------------------------------------|

Part I

Questions Regarding Compensation

|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |     |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes | No  |
| 1a | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |     |
|    | <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div></div> <div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div></div> <div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div></div> <div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div> |     |     |
| b  | If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1b  | Yes |
| 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   | Yes |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |     |     |
|    | <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div></div> <div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div></div> <div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>                                                                                                                                                                                                                    |     |     |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |     |     |
| a  | Receive a severance payment or change-of-control payment?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4a  | Yes |
| b  | Participate in, or receive payment from, a supplemental nonqualified retirement plan?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 4b  | Yes |
| c  | Participate in, or receive payment from, an equity-based compensation arrangement?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4c  | No  |
|    | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |     |     |
|    | Only 501(c)(3) and 501(c)(4) organizations only 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 compensation contingent on the revenues of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |     |
| a  | The organization?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 5a  |     |
| b  | Any related organization?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 5b  |     |
|    | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |     |     |
| a  | The organization?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 6a  |     |
| b  | Any related organization?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 6b  |     |
|    | 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   |     |
| 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 in Part III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 8   |     |
| 9  | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 9   |     |

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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 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

| (A) Name            |      | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|---------------------|------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|------------------------------------------------------------|
|                     |      | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                            |
| DAVE K MCCURDY      | (i)  | 700,000                                            | 60,000                              | 123,580                             | 227,400                                        | 21,284                  | 1,132,264                       | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| JOHN T WHATLEY      | (i)  | 253,219                                            | 22,725                              | 2,637                               | 27,400                                         | 19,836                  | 325,817                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| GLORIA BERGQUIST    | (i)  | 231,404                                            | 21,198                              | 3,268                               | 27,400                                         | 16,279                  | 299,549                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| ROBERT STRASSBURGER | (i)  | 214,382                                            | 20,070                              | 0                                   | 26,242                                         | 16,227                  | 276,921                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| JULIE BECKER        | (i)  | 208,676                                            | 19,700                              | 0                                   | 25,564                                         | 16,210                  | 270,150                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| SHANE KARR          | (i)  | 259,390                                            | 23,200                              | 0                                   | 27,400                                         | 19,336                  | 329,326                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| MATTHEW GODLEWSKI   | (i)  | 204,750                                            | 19,333                              | 2,274                               | 24,890                                         | 8,029                   | 259,276                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| CHARLES ROBINSON    | (i)  | 220,000                                            | 20,400                              | 7,440                               | 26,848                                         | 16,242                  | 290,930                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| VANN WILBER         | (i)  | 138,106                                            | 13,069                              | 99,663                              | 2,726                                          | 15,253                  | 268,817                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| STEVEN DOUGLAS      | (i)  | 163,008                                            | 13,492                              | 0                                   | 19,290                                         | 19,543                  | 215,333                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| CHARLES TERRITO     | (i)  | 175,000                                            | 6,235                               | 0                                   | 20,830                                         | 19,582                  | 221,647                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| CURTIS AUGUSTINE    | (i)  | 158,125                                            | 13,596                              | 0                                   | 11,560                                         | 2,372                   | 185,653                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
| CLINTON BLAIR       | (i)  | 146,300                                            | 12,012                              | 9,523                               | 4,749                                          | 7,391                   | 179,975                         | 0                                                          |
|                     | (ii) | 0                                                  | 0                                   | 0                                   | 0                                              | 0                       | 0                               | 0                                                          |
|                     | (i)  |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |
|                     | (ii) |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |
|                     | (i)  |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |
|                     | (ii) |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |
|                     | (i)  |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |
|                     | (ii) |                                                    |                                     |                                     |                                                |                         |                                 |                                                            |

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.

| Identifier               | Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|--------------------------|------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | Part I, Line 1a  | ALL OF THE ITEMS CHECKED ON SCHEDULE J - PART 1, LINE 1A RELATE TO DAVID K MCCURDY, PRESIDENT & CEO OF THE ORGANIZATION. FIRST CLASS TRAVEL IS PROVIDED IN THE NORMAL COURSE OF BUSINESS FOR AN EXECUTIVE IN THIS POSITION. MUCH OF MR. MCCURDY'S TRAVEL IS OVERSEAS, AND IN ORDER TO CONDUCT BUSINESS UPON HIS ARRIVAL IT IS NECESSARY TO TRAVEL BUSINESS OR FIRST CLASS TRAVEL FOR MR. MCCURDY'S SPOUSE IS TREATED AS TAXABLE COMPENSATION ON HIS W-2 AS WELL AS HIS GROSS-UP PAYMENT AND SOCIAL CLUB DUES.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                          | Part I, Line 4a  | VANN WILBER - SEVERANCE PAYMENT - \$99,525 DAVID K MCCURDY - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN - PRESIDENT & CEO - \$200,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Supplemental Information | Part III         | Beginning in 2008, the Alliance also sponsors a nonqualified 457(f) executive retirement plan for its president. The 457(f) plan required and employer-funded initial contribution of \$959,834, adjusted for any earnings, gains or losses. The participant was vested one-sixth of this amount on June 27, 2007 and five-sixths of the amount upon termination of employment. The assets and liabilities under the 457(f) plan are shown in the accompanying financial statements as investments for executive retirement plan and deferred compensation - executive retirement plan. The 457(f) plan also requires additional contributions by the Alliance to cover taxes on certain distributions, for which the participant is fully vested upon termination, and for a bonus and matching on the bonus. Total deferred compensation for the 457(f) plan for 2009 and 2008 was \$1,225,337 and \$1,008,832, respectively. Total deferred compensation expense for the 457(f) plan for 2009 and 2008 was \$200,000 and \$370,000, respectively. |

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization  
ALLIANCE OF AUTOMOBILE MANUFACTURERS INC

Employer identification number  
52-2143968

| Identifier                             | Return Reference | Explanation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----------------------------------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Form 990, Part VI, Section A, line 6   |                  | THE ALLIANCE HAS REGULAR MEMBERS AND ASSOCIATE MEMBERS. THOSE WHO ARE REGULAR MEMBERS MAY VOTE ON ALLIANCE MATTERS. ASSOCIATE MEMBERS MAY SERVE ON THE BOARD AND PARTICIPATE IN DISCUSSIONS BUT MAY NOT VOTE.                                                                                                                                                                                                                                                                                                                   |
| Form 990, Part VI, Section A, line 7a  |                  | THERE WERE SEVEN REGULAR MEMBER COMPANIES ON THE BOARD OF DIRECTORS. EACH REGULAR MEMBER COMPANY CAN NOMINATE UP TO THREE MEMBERS TO THE BOARD OF DIRECTORS. THESE REGULAR MEMBERS HAVE VOTING RIGHTS AND PARTICIPATE IN THE ALLIANCE GOVERNANCE. ADDITIONALLY, THERE WERE FOUR ASSOCIATE MEMBERS WHO DO NOT HAVE VOTING RIGHTS.                                                                                                                                                                                                |
| Form 990, Part VI, Section A, line 7b  |                  | EACH OF THE SEVEN REGULAR MEMBER COMPANIES CAN NOMINATE UP TO THREE MEMBERS TO THE BOARD OF DIRECTORS. MEMBERS OF THE BOARD ALSO PARTICIPATE IN THE EXECUTIVE COMMITTEE MEETINGS. EACH COMPANY, REGARDLESS OF THE NUMBER OF BOARD MEMBERS PRESENT, HAS ONE VOTE ON EACH ISSUE FOR A TOTAL IF ALL MEMBERS ARE REPRESENTED OF SEVEN VOTES.                                                                                                                                                                                        |
| Form 990, Part VI, Section B, line 11  |                  | THE INFORMATION FOR THE 990 IS COMPILED BY THE VP OF FINANCE AND THE OUTSOURCED ACCOUNTING STAFF AND GIVEN TO THE TAX STAFF OF THE INDEPENDENT AUDITING FIRM. ONCE THE AUDIT FIRM HAS PREPARED THE DRAFT, THE SENIOR MANAGER FROM THE OUTSOURCED ACCOUNTING FIRM REVIEWS IT AND REQUESTS ANY NECESSARY CHANGES. THEN THE VP OF FINANCE MAKES HIS FINAL REVIEW BEFORE THE FINAL REVIEW IS MADE BY THE PRESIDENT AND CEO, AND THE GENERAL COUNSEL. A COPY OF THE 990 IS MADE AVAILABLE TO THE BOARD OF DIRECTORS PRIOR TO FILING. |
| Form 990, Part VI, Section B, line 12c |                  | THE CONFLICT OF INTEREST DECLARATION IS DISCUSSED IN AT LEAST ONE BOARD MEETING ANNUALLY. IN ADDITION, EACH MEMBER OF THE BOARD REAFFIRMS THE CONFLICT OF INTEREST DECLARATION ANNUALLY. THE PROCESS IS RECORDED IN THE MINUTES OF THE BOARD MEETINGS.                                                                                                                                                                                                                                                                          |
| Form 990, Part VI, Section B, line 15a |                  | COMPARABILITY DATA FROM A NUMBER OF LIKE INDUSTRY SURVEYS IS MAINTAINED AND REVIEWED BY THE PRESIDENT AND CEO AND THE EXECUTIVE COMMITTEE OF THE BOARD. ANNUAL PERFORMANCE WEIGHS HEAVILY IN THE DETERMINATION OF ANNUAL PAY ADJUSTMENTS. RECOMMENDATIONS ARE PRESENTED TO THE BOARD AT THE ANNUAL SPRING MEETING. THE BOARD SETS THE COMPENSATION FOR THE PRESIDENT AND CEO BASED ON THE DATA COLLECTED AND ACCEPTS OR MODIFIES RECOMMENDATIONS FOR THE REMAINING STAFF.                                                       |
| Form 990, Part VI, Section C, line 19  |                  | GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC ON AN AS REQUESTED BASIS.                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                        |                  | FORM 990, PART XI, LINE 2C. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

| Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors |                               |                                        |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| (A)<br>Name and Title                                                                                                                         | (B)<br>Average hours per week | (C)<br>Position (check all that apply) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|                                                                                                                                               |                               | Individual trustee or director         | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| CHARLES ROBINSON<br>VP OF FINANCE, OPERATION                                                                                                  | 40 00                         |                                        |                       | X       |              |                              |        | 247,840                                                              | 0                                                                         | 43,090                                                                                        |
| VANN WILBER<br>DIRECTOR, SAFETY                                                                                                               | 40 00                         |                                        |                       |         |              | X                            |        | 250,838                                                              | 0                                                                         | 17,979                                                                                        |
| STEVEN DOUGLAS<br>SR DIRECTOR ENVIRON AFF                                                                                                     | 40 00                         |                                        |                       |         |              | X                            |        | 176,500                                                              | 0                                                                         | 38,833                                                                                        |
| CHARLES TERRITO<br>SR DIRECTOR COMMUNICATI                                                                                                    | 40 00                         |                                        |                       |         |              | X                            |        | 181,235                                                              | 0                                                                         | 40,412                                                                                        |
| CURTIS AUGUSTINE<br>SR DIRECTOR                                                                                                               | 40 00                         |                                        |                       |         |              | X                            |        | 171,721                                                              | 0                                                                         | 13,932                                                                                        |
| CLINTON BLAIR<br>SR DIRECTOR GOV'T AFFAI                                                                                                      | 40 00                         |                                        |                       |         |              | X                            |        | 167,835                                                              | 0                                                                         | 12,140                                                                                        |

Additional Data

Software ID:

Software Version:

EIN: 52-2143968

Name: ALLIANCE OF AUTOMOBILE MANUFACTURERS INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| (A)<br>Name and Title                           | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position (check all<br>that apply) |                       |         |              |                                 |        | (D)<br>Reportable<br>compensation<br>from the<br>organization (W-<br>2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | (F)<br>Estimated<br>amount of other<br>compensation<br>from the<br>organization and<br>related<br>organizations |
|-------------------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
|                                                 |                                        | Individual trustee<br>or director         | Institutional Trustee | Officer | Key employee | Highest compensated<br>employee | Former |                                                                                   |                                                                                            |                                                                                                                 |
| STEFAN JACOBY<br>CHAIRMAN                       | 2 00                                   | X                                         |                       | X       |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| ZIAD OJAKLI<br>VICE CHAIRMAN                    | 2 00                                   | X                                         |                       | X       |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| JOSEPHINE S COOPER<br>SECRETARY                 | 2 00                                   | X                                         |                       | X       |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| KEN W COLE<br>TREASURER                         | 2 00                                   | X                                         |                       | X       |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| DAVID GEANACOPOULOS<br>BOARD MEMBER             | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| ANNA-MARIA SCHNEIDER<br>BOARD MEMBER            | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| PETER LAWSON<br>BOARD MEMBER                    | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| SUSAN M CISCHE<br>BOARD MEMBER                  | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| JIM O'DONNELL<br>BOARD MEMBER                   | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| THOMAS C BALOGA<br>BOARD MEMBER                 | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| CRAIG HELSING<br>BOARD MEMBER                   | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| FREDERICK A HENDERSON<br>BOARD MEMBER           | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| MICHAEL J ROBINSON<br>BOARD MEMBER              | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| ERNST H LIEB<br>BOARD MEMBER                    | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| JAKE JONES<br>BOARD MEMBER                      | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| WALTER PUETZ<br>BOARD MEMBER                    | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| JAMES E LENTZ<br>BOARD MEMBER                   | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| TOM J LEHNER<br>BOARD MEMBER                    | 2 00                                   | X                                         |                       |         |              |                                 |        | 0                                                                                 | 0                                                                                          | 0                                                                                                               |
| DAVE K MCCURDY<br>PRESIDENT & CEO               | 40 00                                  |                                           |                       | X       |              |                                 |        | 883,580                                                                           | 0                                                                                          | 248,684                                                                                                         |
| JOHN T WHATLEY<br>VP & GENERAL COUNSEL          | 40 00                                  |                                           |                       | X       |              |                                 |        | 278,581                                                                           | 0                                                                                          | 47,236                                                                                                          |
| GLORIA BERGQUIST<br>VP OF COMMUNICATIONS        | 40 00                                  |                                           |                       | X       |              |                                 |        | 255,870                                                                           | 0                                                                                          | 43,679                                                                                                          |
| ROBERT STRASSBURGER<br>VP OF SAFETY & HARMONIZA | 40 00                                  |                                           |                       | X       |              |                                 |        | 234,452                                                                           | 0                                                                                          | 42,469                                                                                                          |
| JULIE BECKER<br>VP OF ENVIRONMENT AFFAIR        | 40 00                                  |                                           |                       | X       |              |                                 |        | 228,376                                                                           | 0                                                                                          | 41,774                                                                                                          |
| SHANE KARR<br>VP OF GOVERNMENT AFFAIRS          | 40 00                                  |                                           |                       | X       |              |                                 |        | 282,590                                                                           | 0                                                                                          | 46,736                                                                                                          |
| MATTHEW GODLEWSKI<br>VP OF STATE AFFAIRS        | 40 00                                  |                                           |                       | X       |              |                                 |        | 226,357                                                                           | 0                                                                                          | 32,919                                                                                                          |

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

OMB No. 1545-1709

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶ ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868**Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ ☐

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

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

|               |                                                                                                                             |                                                     |
|---------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Type or print | Name of Exempt Organization<br><b>ALLIANCE OF AUTOMOBILE MANUFACTURERS INC.</b>                                             | Employer identification number<br><b>52-2143968</b> |
|               | Number, street, and room or suite no. If a P.O. box, see instructions<br><b>1401 EYE STREET, NW, NO. 900</b>                |                                                     |
|               | City, town or post office, state, and ZIP code. For a foreign address, see instructions<br><b>WASHINGTON, DC 20005-6562</b> |                                                     |

**Check type of return to be filed** (file a separate application for each return)

- |                                              |                                                                   |                                    |
|----------------------------------------------|-------------------------------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**THE ORGANIZATION**

- The books are in the care of ▶ **1401 EYE STREET, NW NO. 900 - WASHINGTON, DC 20005**

Telephone No ▶ **202-326-5593**

FAX No ▶

- 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 this is for the whole group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover

- 1** I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☒ calendar year **2009** or
- ▶ ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

- 2** If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

|                                                                                                                                                                                                                               |           |               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------|
| <b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.                                                                    | <b>3a</b> | \$            |
| <b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.                                               | <b>3b</b> | \$            |
| <b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | <b>3c</b> | \$ <b>N/A</b> |

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

|                                                                                             |                                                                                                                              |                                                                                                         |  |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|--|
| <b>Part II</b>                                                                              |                                                                                                                              | <b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed). |  |
| Type or print<br><br>File by the extended due date for filing the return. See instructions. | Name of Exempt Organization<br><b>ALLIANCE OF AUTOMOBILE MANUFACTURERS INC.</b>                                              | Employer identification number<br><b>52-2143968</b>                                                     |  |
|                                                                                             | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>1401 EYE STREET, NW, NO. 900</b>                | For IRS use only                                                                                        |  |
|                                                                                             | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>WASHINGTON, DC 20005-6562</b> |                                                                                                         |  |

**Check type of return to be filed** (File a separate application for each return):

- ☒ Form 990   
 ☐ Form 990-EZ   
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)   
 ☐ Form 1041-A   
 ☐ Form 5227   
 ☐ Form 8870  
☐ Form 990-BL   
☐ Form 990-PF   
☐ Form 990-T (trust other than above)   
☐ Form 4720   
☐ Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

### THE ORGANIZATION

- The books are in the care of **1401 EYE STREET, NW NO. 900 - WASHINGTON, DC 20005**  
Telephone No. **202-326-5593** FAX No. \_\_\_\_\_
- 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 this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.
- I request an additional 3-month extension of time until **NOVEMBER 15, 2010**.
- For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.
- If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- State in detail why you need the extension  
**ADDITIONAL TIME TO FILE IS REQUESTED SO THAT THE THE ACCOUNTING AND AUDITING FUNCTIONS CAN BE COMPLETED AND AN ACCURATE RETURN FILED.**

|                                                                                                                                                                                                                                            |           |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------|
| <b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.                                                                                 | <b>8a</b> | \$            |
| <b>b</b> If this application is for Form 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 and any amount paid previously with Form 8868. | <b>8b</b> | \$            |
| <b>c</b> <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.       | <b>8c</b> | \$ <b>N/A</b> |

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature **Rebecca R. Blaw** Title **ACTING CONTROLLER** Date **8/16/10**

Form 8868 (Rev. 4-2009)