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DLN: 93493135018072

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2010

Open to Public Inspection

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

A For	the	2010 ca	alendar year, or tax year begi	nning 07-01-2010 and ending 06-30-2	2011		_	
B Che	ck ıf a	pplicable	C Name of organization AUTOMOTIVE AFTERMARKET INI	DUSTRY ASSOCIATION		D	Employer	identification number
Add	ress ch	nange	Doing Business As				52-2172	219
Nam	ne cha	nge	Doing Business 75			E	Telephone	number
Initi	al retu	m		if mail is not delivered to street address)	Roon	n/suite	(301)65	4-6664
☐ Terr	nınate	d	7101 WISCONSIN AVENUE NO 1	300		<u> </u>	_	
☐ Ame	ended	return	City or town, state or country, a BETHESDA, MD 20814	and ZIP + 4	•	G	Gross receip	pts \$ 23,641,892
App	ication	n pending	DETTIESDIG TID 20011					
			F Name and address of	principal officer	H(a) Is this a group	return for affil	liates? Yes No
			KATHLEEN SCHMATZ 7101 WISCONSIN AVE	NUE NO 1300)		
			BETHESDA,MD 20814		"(") Are all affilia		f? Yes No t (see instructions)
	ovon	ant status			⊢ н(с	_		
		npt status		◀ (insert no)	-			
J W€	ebsite	e:► WW	VW AFTERMARKET ORG		<u> </u>			
		ganızatıon	Corporation Trust Associ	ation Other 🕨	LY	ear of formation	on 1999	M State of legal domicile IL
Par	t Ι	Sum	mary					
			-	ssion or most significant activities ERMARKET BY EXPANDING THE CON	ISUMERI	MARKET AN	ID PRESE	RVING AND
ප		ENHANG	CING THE SALE OF GOODS	AND SERVICES IN THE INDUSTRY				
Governance								
E								
<u>်</u>	2	Check th	his box দ if the organization	n discontinued its operations or dispose	ed of more	than 25%	of its net	assets
	3	Number	of voting members of the gov	erning body (Part VI, line 1a)			3	31
§				ers of the governing body (Part VI, line			4	31
Activities &				ın calendar year 2010 (Part V, line 2a)	•	5	38
Ă			mber of volunteers (estimate	n necessary)			6 7a	74,845
				ne from Form 990-T, line 34			7a 7b	-25,559
			Tacca basiness taxable meen	10 Holling 350 17, line 31 1		Prior Yea		Current Year
	8	Contri	butions and grants (Part VII)	[,line 1h)	. 🗁		23,597	8,150
횰	9		am service revenue (Part VII)	. 🗀	11,	626,142	13,441,436	
Revenue	10	Invest	tment income (Part VIII, colu	umn (A), lines 3, 4, and 7d)			402,641	1,642,063
#	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			46,620	28,022
	12			11 (must equal Part VIII, column (A),	line	12	099,000	15,119,671
	13			art IX, column (A), lines 1–3).			385,682	520,983
	14			rt IX, column (A), line 4)			0	0
ا پر	15			oyee benefits (Part IX, column (A), line	es			
Expenses		5-10)	•			4,	173,366	4,228,394
<u>₹</u>	16a			IX, column (A), line 11e)	-		0	0
五	b 		indraising expenses (Part IX, column	· · · · · · · · · · · · · · · · · · ·	-	7	417.011	7.075.530
	17 18			A), lines 11a-11d, 11f-24f) . . . must equal Part IX, column (A), line 25			417,911 976,959	7,975,520
	19		·	ne 18 from line 12	· —		122,041	2,394,774
8 % 9 8			·			eginning of (End of Year
1 mag	20		anata (Dant V. L. 190)			Year	210.460	
d Be	20 21						219,460 458,457	23,520,940
포함								
					· <u> </u>	10,	, 01,000	27,7000,7527
	22 t III pena edge	Net as Sign Ities of po and belie	nature Block erjury, I declare that I have exa	mined this return, including accompanying etc. Declaration of preparer (other than of		13,	761,003 nents, and	17,380,92 to the best of my
		****	**			2012-0	5-08	
Sign		I B	ature of officer			Date		
Here			HLEEN SCHMATZ PRESIDENT & CEO					
		Type	e or print name and title					
		Print/Type preparer's		Preparer's signature	Date		v if self-	PTIN
Paid			me CLIFTONLARSONALLEN LLP	1	1	1 2	, 1	Firm's EIN
Prepa		Fırm's add	dress 🕨 2900 SOUTH QUINCY ST SU	JITE 150				Phone no ► (703) 998-
Use C	nly		ARLINGTON, VA 22206					5100 F (703) 998-
Mayt		S discus	· ·	ar shown above? (see instructions)				Vas ENO

1 011111 2 2	0 (2010)				rage 2
Part II		_	Accomplishments e to any question in this Part I.	ı	
1 Bi	refly describe the org	ganızatıon's mıssıon			
ITS MEN BUSINE THE AFT SERVIC	IBERS WITH ACCES SSES THRIVE AAIA ERMARKET INDUST ES IN THE AREAS C	SS TO THE RIGHT SUP A AND ITS MEMBER VO TRY AAIA DOES ALL T DF GOVERNMENT AFFA	R AND THE AFTERMARKET IN PLIERS, CUSTOMERS, PRODU DLUNTEERS PROVIDE LEADE THIS BY OFFERING THE INDU AIRS, INFORMATION, MARKE SINESS DEVELOPMENT	ICTS, PROGRAMS, AND RI RSHIP AND A RESPECTEI STRY'S HIGHEST-QUALI	ESOURCES TO HELP THEIR D VOICE FOR AND WITHIN TY PROGRAMS AND
			program services during the ye		┌ Yes ┌ No
Ιf	Yes," describe these	e new services on Sched	dule O		
se	rvices?			onducts, any program	┌ Yes ┌ No
Ιf	'Yes," describe these	e changes on Schedule (0		
Se	ction 501(c)(3) and	501(c)(4) organizations	r each of the organization's thre s and section 4947(a)(1) trusts evenue, if any, for each progran	are required to report the a	
4a (Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
A C H II L A W L	AIA ACTIVELY COMMUNICA DMMITTED TO A COMPRE AVE THEIR VOICES BE HE IDUSTRY OF THE RIGHT I EGISLATIVE ACTION CENT ETTERMARKET INDUSTRY SE HERE THEY CAN LOCATE EGISLATIVE INITIATIVES A	ATES WITH LEGISLATORS ANI HENSIVE PROGRAM THAT CUARD THROUGH ITS "RIGHT" TO REPAIR LEGISLATION THAT COME ALLOWS MEMBERS TO COSUCH AS "PROTECT YOUR RITHEIR BUSINESS, FIGHTING IMED AT REPEALING HEALTH	E THAT THEIR CONCERNS ARE RECOG D LOBBIES FOR GOVERNMENT POLICIE ITS THROUGH THE REGULATORY MAZE TO REPAIR CAMPAIGN," AAIA IS LEADII TO REPAIR CAMPAIGN," AAIA IS LEADII TO WOULD GIVE CAR OWNERS MORE OF INTACT THEIR FEDERAL AND STATE ELIGHT TO REPAIR," OPPOSING EFFORTS A PROPOSAL TO END THE USE OF THE CARE REFORM ENACTED IN 2010 TH DC AND MEET WITH CONGRESSIONAL	S THAT ARE FAVORABLE TO AFTE AND HELPS RALLY ITS MEMBERS OF VOICING TO PTIONS OUTSIDE OF DEALERSHIP ECTED REPRESENTATIVES ABOUT IN OUTSIDE OF DEALERSHIP IS BY THE NATIONAL LABOR RELATIVE LIFO INVENTORY ACCOUNTING IN LEGISLATIVE SUMMIT PROVIDES	RMARKET BUSINESS AAIA IS FOR KEY INDUSTRY ISSUES AND HE SUPPORT OF THE AFTERMARKET S FOR CAR REPAIRS ITS HOT ISSUES IN THE AUTOMOBILE TONS BOARD TO TELL COMPANIES METHOD AND SUPPORTING AN OPPORTUNITY FOR
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
T T A IN C C S S S A	HE VEHICLE AFTERMARKE ECHNOLOGY TO HELP LOW AIA TECHNOLOGY STANDAD DUSTRY STANDARD STANDARD FOR THE MANAUBSCRIBERS DURING THE	ET INDUSTRY AAIA HAS TAKE VER THE COST OF BUSINESS ARDS AND SOLUTIONS COMM INDARDS DEVELOPED SPECIF ITA SERVES AS A NEUTRAL FA INS THAT BENEFIT THE ENTIF GEMENT AND EXCHANGE OF IE NEXT YEAR, THE NUMBER	LOP TECHNOLOGY STANDARDS AND BE EN A LEADERSHIP ROLE IN DEVELOPING AND INCREASE EFFICIENCIES IN THE ITTEE, THE ASSOCIATION HAS DEVELO ICALLY FOR THE AFTERMARKET INDUS ICILITATOR ALLOWING COMPETITORS A RE AFTERMARKET INDUSTRY CATALOG THE AUTOMOTIVE CATALOG AND VEHI OF SUBSCRIBERS IS EXPECTED TO RE LOW VEHICLE SERVICE EQUIPMENT, AN	G STANDARDS AND BEST PRACTIC AFTERMARKET VALUE CHAIN TH PED TOOLS AND PRACTICES THA' STRY ACCELERATE THE ADOPTION AND TRADING PARTNERS FROM A G STANDARDS OR "ACES" DEVELO CLE DATA AT THE END OF JUNE MAIN BETWEEN 280-300 ISHOP (CES IN E-COMMERCE AND ROUGH THE LEADERSHIP OF THE IF HAVE COME TO BE RECOGNIZED AS IF OF TECHNOLOGY AND LOWER THE ILL INDUSTRY SEGMENTS TO IPED BY AAIA ARE THE INDUSTRY 2011 AAIA HAD 289 ACTIVE DR INTEGRATED SHOP STANDARD IS
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
M II' R R A II	ARKET RESEARCH - AAIA' IFORMATION NEEDS OF A EPORTS TO HELP MEMBER ESEARCH PROGRAMS OFF ND SALES FORECASTS A CONTINUES TO ASSIST I ME-SENSITIVE INQUIRES	'S MARKET RESEARCH PROG AIA MEMBERS IT ASSESSES RS FROM ALL SEGMENTS OF FER UNPARALLELED INFORMA FULL RANGE OF PRODUCT OF ITS MEMBERS WITH THEIR RI SOME OF THE MOST SUCCE	RAM COLLECTS, ANALYZES, DISSEMIN. TRENDS THAT ARE RESHAPING THE AF THE AFTERMARKET STRATEGICALLY PO ATIONAL EXPERTISE WHERE BENCHMAL FFERINGS IS PRODUCED TO IMPROVE ESEARCH NEEDS BY IDENTIFYING, OR- ESSFUL PRODUCTS AVAILABLE TO AAIA AUTOMOBILE AFTERMARKET INDUSTR	ATES, AND DISTRIBUTES INDUSTRY FTERMARKET INDUSTRY AND PRO DITION THEIR COMPANY FOR THE RK RESEARCH TRACKS NEARLY 2 MEMBER INTELLIGENCE ABOUT T GANIZING, AND ANALYZING FOCU MEMBERS ARE THE AWARD WINI	RY DATA THAT ADDRESS VARIED DVIDES IN-DEPTH AND TIMELY IE FUTURE AAIA'S UNIQUE 0 YEARS OF DISTRIBUTION CHANGES HE AFTERMARKET INDUSTRY WHILE SED INFORMATION IN RESPONSE TO
4d 0	ther program service	es (Describe in Schedu	le O) See also Additional Data	for Description	
	Expenses \$	•	ng grants of \$) (Revenue \$)
4e T	otal program service	avnancach+¢			

Part TV	Checklist of	Required	Schedules
4 1 2 2 2 2	CHECKIISE OF	<u>Reduiled</u>	

			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 (see instruction)?	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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	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 quasiendowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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, Parts I and IV	14b		No
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, Parts II and IV.	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, Parts III and IV.	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 (see instructions)	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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t 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? If "Yes," complete Schedule I, Parts I and II $\textcircled{\textbf{5}}$	21	Yes	
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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	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? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	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	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part 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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 \Box Yes \Box No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2010)

orm 990 (2010)	Page 5
Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V		<u>.</u>	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 25			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	Yes	
1	gaming (gambling) winnings to prize winners?		165	
h	return			
_		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
3	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	F.		
	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?	5c 6a		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
l	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
i	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
1	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
,	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
•	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
3	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
•	Enter the amount of reserves the organization is required to maintain by the states			
•	in which the organization is licensed to issue qualified health plans			
:	Enter the amount of reserves on hand 13c			
3	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
_	If "Voc " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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.

itains a response to any question in					

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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		Νo
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 governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant 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	
ь	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		V	
a	The governing body?	8a	Yes	
Ь	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		Νo
	vertion B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
162	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	Yes	
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	Yes	
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
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 Own website. Another's website. 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 FTHE ORGANIZATION

7101 WISCONSIN AVENUE SUITE 1300 BETHESDA, MD 20814

(301) 654-6664

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organi		elated o	rganı	zatio	on co	ompen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours per		(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
				<u> </u>	<u> </u>					

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours		() tion (that a			ıll		Rep comp	(D) ortable ensation	(E) Reportable compensation	n	(F Estim amount o	ated of other
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organı	m the zation (W- 19-MISC)	from related organizations (W- 2/1099- MISC)		compen from organizat relat organiza	the ion and ed
See A	ddıtıonal Data Table	,												
1b								►						
c								_		1 476 070		+		225 709
2	Total number of individuals (incl	luding but not lin	nited to	thos	e lıs				receive			<u> </u>		
											,		Yes	No
Total from continuation sheets to Part VII, Section A			No											
4	organization and related organiz											4	Yes	
5										ganızatıon d	r individual for	•	100	
	services rendered to the organiz	zation? <i>If</i> "Yes,"	complet	e Sch	edul	e J f	or suci	h pers	son .		•	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent o	contra	ctors	that red	ceived more	e than			
	Nar	(A) me and business ad	dress							Descr	(B) iption of services		(C Compe	
9 PAR	TEGIC MANAGEMENT SERVICES RK STREET SUITE 500 ON, MA 02108									LOBBYING			·	930,843
PO BO	OR INFORMATION SYSTEMS DX 651518 LOTTE, NC 28265									VEHICLE RES	EARCH			143,000
1919 VIENN	RESOURCES INC GALLOWS ROAD SUITE 400 NA, VA 22182									MEMBERSHIF	SOFTWARE		117,725	
833 V	MUM MARKETING SERVICES V JACKSON BOULEVARD SUITE 300 AGO, IL 60607									MARKETING	& PR SERVICES			105,077
	Total number of independent cont \$100,000 in compensation from t			ot lın	nıted	l to	those	liste	d above)	l) who receiv	ed more than			

Form 9		•	10				Pa	ge 9
Part V	VIII	Statement of Revenu	ie		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
								512, 513, or 514
nts nts	1a	Federated campaigns	1a					
gra	b	Membership dues	. 1b					
ts, all	С	Fundraising events	. 1 c					
<u> </u>	d	Related organizations	. 1d					
Sing.	e	Government grants (contributions)	1e					
Contributions, gifts, grants and other similar amounts	-	All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in lir		8,150				
and and	-	Total. Add lines 1a-1f			8,150			
				Business Code	·			
Program Service Revenue	2a	SHOWS AND SHOW EVENTS		900099	7 380 100	7,389,190		
₽e	ь	MEMBERSHIP DUES		900099		3,329,928		
93	С	CONFERENCES		900099		1,793,247		
er Fe	d	TECHNOLOGY STANDARDS A		900099	780,851	755,851	25,000)
8	e	PUBLICATIONS		541800	137,629	98,284	39,345	
	f	All other program service rev	renue		10,591	10,591		
Š	g	Total. Add lines 2a-2f			13,441,436			
	3	Investment income (includin	g dıvıdends, ınterest					
		and other similar amounts) .			423,688			423,688
	4	Income from investment of tax-exe						
	5	Royalties			3,460			3,460
		Gross Rents	(ı) Real	(II) Personal				
		Less rental		+				
		expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)						
		Gross amount	(ı) Securities 9,740,596	(II) O ther				
		from sales of assets other than inventory						
		Less cost or other basis and sales expenses	8,522,221					
	_	Gain or (loss)	1,218,375					
		Net gain or (loss)			1,218,375			1,218,375
Other Revenue	8a	Gross income from fundraisir (not including \$	g events					
Rev		of contributions reported on I See Part IV, line 18						
o		,	a					
듔	ь	Less direct expenses	. b					
_	С	Net income or (loss) from fun	draising events 🟲					
			ctivities See Part IV, line 19 . a					
		Less direct expenses	_	ь				
		Net income or (loss) from gai		 				
	108	Gross sales of inventory, less returns and allowances	•					
			а					
		Less cost of goods sold .						
	С	Net income or (loss) from sal	es of inventory 🕨					
		Miscellaneous Revenue		Business Code	40.705	12 725		
		INDUSTRY AWARDS		900099	13,725			
		MANAGEMENT FEES		561000	10,500		10,500	1
		MISCELLANEOUS		900099	337	337		
		All other revenue						
	e	* Total. Add lines 11a-11d .	· · · · · · · · · · · · · · · · · · ·		24,562			
	12	Total revenue. See Instruction	ons	ŀ				
		. Star i Stariadi See Mistractio	• • •		15,119,671	13,391,153	74,845	1,645,523
	<u> </u>						rm 990 (20	210)

Part IX Statement of Functional Expenses

	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	520,983			
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	899,024			
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	2,395,417			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	56,161			
9	Other employee benefits	652,253			
0	Payroll taxes	225,539			
а	Fees for services (non-employees) Management				
b	Legal	279,210			
C	Accounting	69,243			
d	Lobbying	831,141			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	95,230			
g	Other	760,864			
2	Advertising and promotion	331,552			
3	Office expenses	358,768			
4	Information technology	342,054			
5	Royalties				
5	Occupancy	526,648			
7	Travel	271,090			
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	3,712,931			
)	Interest	10,205			
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	93,577			
3	Insurance	57,920			
4	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	MISCELLANEOUS	235,087			
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	12,724,897			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			150	1	150
	2	Savings and temporary cash investments			3,281,955	2	2,837,544
	3	Pledges and grants receivable, net	•			3	
	4	Accounts receivable, net			954,221	4	188,455
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of					
		Schedule L		5			
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ersponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)					
- \$		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			455,209	9	903,215
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	2,050,043			
	ь	Less accumulated depreciation	10b	1,958,803	136,384	10 c	91,240
	11	Investments—publicly traded securities	14,231,423	11	19,333,330		
	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			160,118	15	167,006
	16	Total assets. Add lines 1 through 15 (must equal line 34)			19,219,460	16	23,520,940
	17	Accounts payable and accrued expenses .			728,958	17	1,040,806
	18	Grants payable				18	
	19	Deferred revenue			4,547,989	19	4,970,386
	20	Tax-exempt bond liabilities				20	
es S	21	Escrow or custodial account liability Complete Part IV of Schedule	e D .			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ē		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		181,510	25	128,821	
	26	Total liabilities. Add lines 17 through 25			5,458,457	26	6,140,013
es-		Organizations that follow SFAS 117, check here ▶ and comp through 29, and lines 33 and 34.	lete lin	es 27			
nc Z	27	Unrestricted net assets			13,761,003	27	17,380,927
<u> 88</u>	28	Temporarily restricted net assets				28	
Fund Balances	29	Permanently restricted net assets				29	_
Ē		Organizations that do not follow SFAS 117, check here ▶ an	d comp	lete			
		lines 30 through 34.	u comp				
S O.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other fu				32	
Net	33	Total net assets or fund balances			13,761,003	33	17,380,927
Z	34	Total liabilities and net assets/fund balances			19,219,460	-	23,520,940
	L	· · · · · · · · · · · · · · · · · · ·			<u> </u>		

- Pa	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,1	119,67
2	Total expenses (must equal Part IX, column (A), line 25)	2			724,897
3	Revenue less expenses Subtract line 2 from line 1	3		2,3	394,774
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,7	761,00
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,2	225,150
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		17,3	380,927
Par	Tt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	☐ Separate basis ☐ Both consolidated and separated basis				
За	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?	•	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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DLN: 93493135018072

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

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.

Interna	l Revenue Service						Inspection
If th	e organization a	nswered "Ye	s," to Form 990, Part IV, Line 3, o	Form 990-EZ, P	art V, line 46 (Polit	ical Can	
ther							
			mplete Parts I-A and B Do not comple				
	, , ,		01(c)(3)) organizations Complete Pa	rts I-A and C belov	w Do not complete i	-art I-B	
	ction 527 organiza	•	s," to Form 990, Part IV, Line 4, o	Form 990-F7 P	art VI line 47 (I oh	hvina A	ctivities) then
	-		have filed Form 5768 (election under		•		•
			have NOT filed Form 5768 (election i				
	_		s," to Form 990, Part IV, Line 5 (P	roxy Tax) or For	m 990-EZ, Part V, I	ine 35a	(Proxy Tax), then
			rations Complete Part III		·		
	me of the organiza		SOCIATION		Employ	yer ident	ification number
					52-21	72219	
Par	t I-A Comple	te if the or	ganization is exempt under	section 501(c) or is a section	n 527	organization.
1	Provide a descri	ption of the ord	ganization's direct and indirect politi	cal campaign act	ıvıtıes ın Part IV		
2	Political expend		,	, ,		•	¢
3	Volunteer hours	icares				-	Ψ
	v ordineeer mours						
Par	t I-B Comple	te if the or	ganization is exempt under	section 501(c)(3).		
1	Enter the amoun	t of any excise	tax incurred by the organization un	der section 4955		>	\$
2	Enter the amoun	t of any excise	tax incurred by organization manag	jers under sectior	1 4955	-	\$
3	If the organization	on incurred a s	ection 4955 tax, did it file Form 47.	20 for this year?			┌ Yes ┌ No
4a	Was a correction	n made?					┌ Yes ┌ No
ь	If "Yes," describ	oe in Part IV					
Par			ganization is exempt under	section 501(c) except section	on 501	(c)(3).
1			nded by the filing organization for se				\$
2			rganization's funds contributed to o				
	exempt funtion a		. •			►	\$
3	Total exempt fur	nction expendit	cures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	F	\$
4	Did the filing org	anızatıon file F	orm 1120-POL for this year?				☐ Yes ☐ No
5	organization mad amount of politic	de payments Fal contribution	ed employer identification number (E for each organization listed, enter the is received that were promptly and o political action committee (PAC) If	e amount paid fro lirectly delivered	m the filing organiz to a separate polition	atıon's fu cal orgar	unds Also enter the nization, such as a
	(a) Namo	е	(b) Address	(c) EIN	(d) A mount paid filing organizat funds If none, en	ion's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1			
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns			
	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		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
c	Total lobbying expenditures							
d	Grassroots non-taxable amount							
e	Grassroots ceiling amount (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 Fo	orm 5768
	(election under section 501(h)).		

	(election under section 501(h)).	(6	(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				
а	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?				
е	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		ľ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), o	r sec	tion
				Y	es N
1	Were substantially all (90% or more) dues received nondeductible by members?			1	N
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	N
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3 Y	es

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	3,329,928
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).		
а	Current year	2a	1,258,745
b	Carryover from last year	2b	
С	Total	2c	1,258,745
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	1,997,957
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	-739,212

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

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DLN: 93493135018072

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Employer identification number Name of the organization AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION 52-2172219 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" to Form 99	0, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		
Pai	t III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat. Preservation of open space Complete lines 2a-2d if the organization held a quality easement on the last day of the tax year.	on or pleasure) Preservation of an Preservation of a G	n historically importantly land area certified historic structure n of a conservation
	easement on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his		2c 2c
d	Number of conservation easements included in (c) ac	` '	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	ed by the organization during
	the taxable year ▶		
4	Number of states where property subject to conserve	ation easement is located ►	<u> </u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	· · · · · · · · · · · · · · · · · · ·	dling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents during the year ►
7	A mount of expenses incurred in monitoring, inspection	ng, and enforcing conservation easements	s during the year ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of sec	rtion Yes No
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial	
Par	Complete if the organization answered '		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA	•	or financial gain, provide the
a	Revenues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

ng the organization's accession and other ns (check all that apply) Public exhibition Scholarly research Preservation for future generations vide a description of the organization's conting the year, did the organization solicity of the sold to raise funds rather than the solicity of t	ollections and expla or receive donations to be maintained as ements. Comple nount on Form 99 lian or other interme	d e in how for of an part of the left of t	w the t, his of the the art X	Loan Othe y furth torica organ organ , line	er the o	nange prog rganization res or othe s collection	rams n's exe r sımı n?	empt purpose in lar	Yes	Г No
Scholarly research Preservation for future generations vide a description of the organization's conting the year, did the organization solicit of ets to be sold to raise funds rather than the secretary and Custodial Arrang Part IV, line 9, or reported an another organization an agent, trustee, custodial ded on Form 990, Part X?	or receive donations to be maintained as ements. Comple nount on Form 99 lian or other interme	e in how of are part of ete if	t, his of the the art X	Othe y furth torica organ orgar , line	er the o I treasu nization's	rganızatıor res or othe s collectioi	ı's exe r sımı ı?	lar		Г No
Preservation for future generations vide a description of the organization's continuous trial to the programment of the second to the organization solicity of the year, did the organization solicity of the year, did the organization and Custodial Arrang Part IV, line 9, or reported an anothe organization an agent, trustee, custodial did on Form 990, Part X?	or receive donations to be maintained as ements. Comple nount on Form 99 lian or other interme	of ar part of the period of th	t, his of the the art X	y furth torica organ orgar , line	er the o I treasu nization's	res or othe s collection	rsımı 1 [?]	lar		┌ No
vide a description of the organization's continuous triang the year, did the organization solicition ets to be sold to raise funds rather than the secretary and Custodial Arrang Part IV, line 9, or reported an another organization an agent, trustee, custodial ded on Form 990, Part X?	or receive donations to be maintained as ements. Comple nount on Form 99 lian or other interme	of ar part o ete if 90, Pa	t, his of the the art X	torica organ orgar , line	l treasu nization's	res or othe s collection	rsımı 1 [?]	lar		_ No
t XIV ring the year, did the organization solicit of ets to be sold to raise funds rather than the state of the solicit of th	or receive donations to be maintained as ements. Comple nount on Form 99 lian or other interme	of ar part o ete if 90, Pa	t, his of the the art X	torica organ orgar , line	l treasu nization's	res or othe s collection	rsımı 1 [?]	lar		┌ No
ets to be sold to raise funds rather than to Escrow and Custodial Arrang Part IV, line 9, or reported an anothe organization an agent, trustee, custod uded on Form 990, Part X?	o be maintained as ements. Comple nount on Form 99 lian or other interme	part of ete if 90, Pa	the the art X	organ orgar , line	nization's nization	s collectioi	۱?			┌ No
Part IV, line 9, or reported an anothe organization an agent, trustee, custod uded on Form 990, Part X?	ements. Comple nount on Form 99 lian or other interme	ete ıf 90, Pa	the art X	orgar , line	nization			s" to Form 99	0,	
uded on Form 990, Part X?		ediary	forc	ontrib						
Yes," explain the arrangement in Part XI\	/ and complete the			OHLHD	utions o	or other ass	ets n	ot 「	Yes	┌ No
	•	follow	ving t	able		Г				
						F	_	Amo	unt	
ginning balance							1c			
ditions during the year						-	1d			
-						-	 -			
						L	1f			
the organization include an amount on Fo	orm 990, Part X, line	e 21?						Γ	Yes	┌ No
Endowment Funds. Complete									1 1	
supplied of year halande	(a)Current Year	(b)Prior	Year	(c)IW	o Years Back	(a)1	hree Years Back (e)Four Y	ears Back
							-			
·										
ministrative expenses										
d of year balance										
vide the estimated percentage of the yea	r end balance held a	as			<u> </u>			•		
ırd designated or quasi-endowment 🕨										
manent endowment 🕨										
m endowment 🕨										
	ssion of the organiza	atıon	that	are hel	ld and a	dmınıstere	d for t	he		
									Yes	No
unrelated organizations			•				•			
<u> </u>									'	
. ,,	•				· · ·		•	<u>3b</u>		<u> </u>
					200 Da	rt V line	10			
<u> </u>	s, and Equipme	III. S				'		(-) (-)	\top	
Description of investment								depreciation	(d) E	Book value
ıngs		•							4_	
ehold improvements							16,696	14,95	6	1,740
oment						7.	26,227	695,79	1	30,436
						1,30	07,120	1,248,05	6	59,064
d lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	nn (B), line	10(c).)			 		91,240
	ithe organization include an amount on Fores," explain the arrangement in Part XIV Endowment Funds. Complete ginning of year balance intributions vestment earnings or losses intributions inter expenditures for facilities inter expenditures for facilities intributive expenses intributions intributions vestment earnings or losses intributions intributions vestment earnings or losses intributions vestment earnings or losses intributions intributions vestment earnings or losses intributions intri	Ithe organization include an amount on Form 990, Part X, line Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization ginning of year balance intributions in the expenditures for facilities diprograms in the expenditures for facilities diprograms in the estimated percentage of the year end balance held and designated or quasi-endowment funds not in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organizations in the possession of the organization by unrelated organization by unrelated organization by unrelated	Ithe organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization and (a)Current Year (b) ginning of year balance (a)Current Year (b) ginning of year balance (a)Current Year (b) ginning of year balance (b) greatment earnings or losses (c) gants or scholarships (c) gants or sc	Ithe organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answere (a)Current Year (b)Prior ginning of year balance (b)Current Year (b)Prior ginning of year balance (a)Current Year (b)Prior ginning of year balance (b)Current Year (b)Prior ginning of year balance (c)Current Year (b)Prior ginning of year balance (c)Current Year (b)Prior ginning of year balance (c)Current Year (b)Prior (c)Current Year	ding balance If the organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes," explain the arrangement in Part XIV [a) Current Year (b) Prior Year ginning of year balance	ding balance It the organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to I (a)Current Year (b)Pnor Year (c)Tw ginning of year balance Intributions Vestment earnings or losses Intributions Intributions	ding balance Ithe organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, ginning of year balance Intributions Intribution answered "Yes" to Form 990, Part X, line Intribution answered "Yes" to Form 990, Part X, l	Ite organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part (a)Current Year (b)Pnor Year (c)Two Years Back (d)T (a)Current Year (c)Two Years Back (d)T (d)Two Years Back (d)T (d)Two Years Back (d	Ite organization include an amount on Form 990, Part X, line 21? Ves, "explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current Year (b)Pnor Year (c)Two Years Back (d)Three Years Back (restment earnings or losses and of year balance of the expenditures for facilities of programs and designated or quasi-endowment learnings or losses are designated or quasi-endowment learning that are held and administered for the anization by unrelated organizations is ted as required on Schedule R? Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. (a) Cost or other basis (other) (b) Scot or other basis (other) (c) Two Years Back (d) Three	the organization include an amount on Form 990, Part X, line 21? Yes," explain the arrangement in Part XIV Indowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current Year (b)Pnor Year (c)Two Years Back (d)Thine Years Back (e)Four Years explain the arrangement in Part XIV (a)Current Year (b)Pnor Year (c)Two Years Back (d)Thine Years Back (e)Four Years expenditures or scholarships . (b) Find a programs . (c) Find a programs . (d) Find a program . (d) Find a program . (d) Find a program . (e) Find a program . (d) Find a program . (e) Find a program . (d) Find a program . (e) Find a program . (e) Find a program . (f) Find a program . (g) Find a program . (h) Find a program . (

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	, ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, Irr		
(a) Descrip	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
DEFERRED COMPENSATION	128,821	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	128,821	
2 Fin 49 (ASC 740) Footpote In Bart VIV provide the toy		aization's financial statements that reports the

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,119,671
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,724,897
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	2,394,774
4	Net unrealized gains (losses) on investments	4	1,225,150
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	1,225,150
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,619,924
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	16,344,821
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,225,150
3	Subtract line 2e from line 1	3	15,119,671
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	15,119,671
Pari		s per Re	
1	Total expenses and losses per audited financial statements	1	12,724,897
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
е	Add lines 2a through 2d	2e	C
3	Subtract line 2e from line 1	3	12,724,897
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	12,724,897
Pai	rt XIV Supplemental Information		

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

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 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
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE ASSOCIATION HAS BEEN GRANTED EXEMPTION BY THE INTERNAL REVENUE SERVICE (IRS) FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE (IRC) THE ASSOCIATION IS REQUIRED TO REPORT UNRELATED BUSINESS INCOME TO THE IRS THE ASSOCIATION ADOPTED THE INCOME TAX STANDARD FOR UNCERTAIN TAX POSITIONS ON JULY 1, 2009 THE ASSOCIATION EVALUATED ITS TAX POSITIONS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED ON EXAMINATION THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL, STATE, AND LOCAL AUTHORITIES THE TAX RETURNS FOR THE FISCAL YEARS ENDED 2008 THROUGH 2010 ARE OPEN FOR EXAMINATION BY FEDERAL, STATE, AND LOCAL AUTHORITIES

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Schedule I (Form 990)

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

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

► Attach to Form 990

OMB No 1545-0047

DLN: 93493135018072

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

AUTOMOTIVE AFTERMARKET	INDUSTRY ASSOCI	ATION				52-2172219)
Part I General Inform 1 Does the organization mathe selection criteria used		tantiate the amount of th					. ▼Yes 「N
2 Describe in Part IV the or Part II Grants and Oth Form 990, Part I	rganization's procedur ner Assistance to V, line 21 for any r		of grant funds in the U Organizations in more than \$5,000.	Inited States the United States Check this box if no	. Complete if the coorning one recipient rec	organization answer elived more than \$!	red "Yes" to
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description o non-cash assistan	
(1) CAR CARE COUNCIL 7101 WISCONSIN AVE SUITE 1300 BETHESDA, MD 20814	52-1250966	501(C)(3)	389,667	65,341		STAFFING	GENERAL SUPPORT
(2) THE AFTERMARKET FOUNDATIONPO BOX 3889 TEQUESTA, FL 33469	23-6392256	501(C)(3)	34,083				GENERAL SUPPORT
(3) NATIONAL AUTOMOTIVE TECHNICIANS EDUCATION FUND101 BLUE SEAL DRIVE SUITE 101 LEESBURG, VA 20175	36-2957357	501(C)(3)	10,000				GENERAL SUPPORT
(4) NORTHWOOD UNIVERSITY4000 WHITING DRIVE MIDLAND,MI 48640	38-1624684	501(C)(3)	7,940				GENERAL SUPPORT
2 Enter total number of sec	tion 501(c)(3) and gov	vernment organizations .					> 4

Enter total number of other organizations

Part III	Grants and Other Assistance to Individuals in the United States	. Complete ıf	f the organization	answered	"Yes" to	Form 990,	Part IV, I	ine 22.
	Use Schedule I-1 (Form 990) if additional space is needed.							

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	· '	SCHEDULE I, PART I, LINE 2 AAIA REQUIRES MONTHLY REPORTING FROM ENTITIES, COPIES OF SOURCE DOCUMENTS AND CONTINUOUS UPDATES FROM RESPECTIVE COMMITTEE LEADERSHIP

DLN: 93493135018072

OMB No 1545-0047

Open to Public Inspection

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Name of the organization AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

Employer identification number 52-2172219

Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or fo 990, Part VII, Section A, line 1a Complete Part III to provide any relevant informat			
	First-class or charter travel Housing allowance or re	sidence for personal use		
	□ Travel for companions □ Payments for business to the payment of th	use of personal residence		
	▼ Tax idemnification and gross-up payments	es or initiation fees		
	☐ Discretionary spending account ☐ Personal services (e.g.,	maid, chauffeur, chef)		
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy reimbursement orprovision of all the expenses described above? If "No," complete P		Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses officers, directors, trustees, and the CEO/Executive Director, regarding the items ch		Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensorganization's CEO/Executive Director Check all that apply Compensation committee Written employment cor			
	☐ Independent compensation consultant ☐ Compensation survey o			
		r compensation committee		
		·		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with or a related organization	respect to the filing organization		
а	a Receive a severance payment or change-of-control payment from the organization or	a related organization?		No
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	c Participate in, or receive payment from, an equity-based compensation arrangement	? 40		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		or accrue any		
	compensation contingent on the revenues of	,		
а	a The organization?	5a		
ь	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 compensation contingent on the net earnings of	or accrue any		
а	a The organization?	6a		
b	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 pro-	vide 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 accured pursuant to a con subject to the initial contract exception described in Regs section 53 4958-4(a)(3) in Part III			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedu		+	
-	section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the 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	reakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) KATHLEEN SCHMATZ	(I) (II)	352,125 0	70,623 0	26,807 0	24,500 0	10,714 0	484,769 0		
(2) SUSAN MEDICK	(I) (II)	152,476 0	8,000 0	7,466 0	16,319 0	10,464 0	194,725 0		
(3) RICHARD WHITE	(I) (II)	178,906 0	8,000 0	1,728 0	18,809 0	12,087 0	219,530 0		
(4) AARON LOWE	(I) (II)	141,493 0	4,500 0	1,518 0	14,663 0	22,325 0	184,499 0		
(5) SCOTT LUCKETT	(ı) (ıı)	130,925	5,000 0	1,402 0	13,993 0	3,757 0	155,077 0		
(6) LEE KADRICH	(I) (II)	128,253 0	4,000 0	1,785 0	13,488 0	10,156 0	157,682 0		
(7) MICHAEL BARRATT	(I) (II)	112,706 0	7,000 0	14,922 0	12,158 0	18,363 0	165,149 0		
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

Ident if ier	Return Reference	Explanation
	1A ,	THE ORGANIZATION GROSSES UP TAXABLE FRINGE BENEFITS FOR THE PRESIDENT AND OTHER SENIOR LEVEL POSITIONS THE BENEFITS THAT ARE GROSSED UP WERE DOMESTIC HEALTH INSURANCE FOR THE SRVP OF MEETINGS AND EVENTS AND A CAR ALLOWANCE FOR BOTH THE PRESIDENT AND THE CFO/COO THE ORGANIZATION PAID \$2,400 FOR THE CFO/COO'S PERSONAL TRAINER

Schedule J (Form 990) 2010

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DLN: 93493135018072

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2010

Open to Public Inspection

Name	of th	ne orga	nizatio	on		
MOTUA	OTIVE	AFTERN	1ARKET	INDUSTRY	ASSOCIATIO	N

Employer identification number

52-2172219

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1		AAIA'S EXECUTIVE COMMITTEE CONSISTS OF NINE MEMBERS OF THE BOARD THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO ACT ON BEHALF OF THE BOARD

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		REGULAR MEMBERS - ANY FIRM OR CORPORATION ENGAGED IN THE AUTOMOTIVE AFTERMARKET INDUSTRY IS ELIGIBLE TO BECOME A VOTING REGULAR MEMBER OF THE ASSOCIATION PUBLICATIONS/EDUCATIONAL INSTITUTIONS - ANY PUBLICATION OR EDUCATIONAL INSTITUTION WHICH IS SIGNIFICANTLY AUTOMOTIVE IN CONTENT SHALL BE ELIGIBLE FOR VOTING MEMBERSHIP IN THE ASSOCIATION ASSOCIATE MEMBERSHIP - COMPANIES OR INDIVIDUALS REGULARLY ENGAGED IN A BUSINESS THAT PROVIDES SERVICES TO COMPANIES ENGAGED IN THE AUTOMOTIVE AFTERMARKET INDUSTRY, BUT WHO ARE NOT DEFINED IN ANY OTHER MEMBERSHIP CLASSIFICATION SHALL BE ELIGIBLE FOR VOTING MEMBERSHIP IN OF THE ASSOCIATION INDIVIDUAL MEMBERS - THE BOARD OF DIRECTORS SHALL HAVE THE AUTHORITY TO PROVIDE FOR ADDITIONAL NON-VOTING MEMBERS WHO HAVE SUCH QUALIFICATIONS AS IN THE OPINION OF THE BOARD OF DIRECTORS ARE DESIRABLE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		ALL MEMBERS, WITH THE EXCEPTION OF INDIVIDUAL MEMBERS, MAY ELECT THOSE WHO SERVE AS THE GOVERNING BODY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		MEMBERS MAY APPROVE THE ELECTION OF OFFICERS AND DIRECTORS EACH MEMBER COMPANY OF THE ASSOCIATION IS ENTITLED TO ONE VOTE, WHICH MAY BE BY PROXY OR IN PERSON TEN PERCENT (10%) OF THE VOTING MEMBERS OF THE ASSOCIATION, IN GOOD STANDING, IN PERSON OR REPRESENTED BY PROXY, SHALL CONSTITUTE A QUORUM AT ALL MEETINGS OF THE MEMBERS OF THE ASSOCIATION FOR THE TRANSACTION OF BUSINESS PERTAINING TO THE ASSOCIATION, EXCEPT AS OTHERWISE PROVIDED BY LAW, BY THE ARTICLES OF INCORPORATION, OR THESE BYLAWS EACH MEMBER OF THE ASSOCIATION, IN PERSON OR REPRESENTED BY PROXY, SHALL BE ENTITLED TO ONE VOTE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE CFO/COO WILL REVIEW THE PREPARED FORM 990 BY TRACING ALL NUMBERS TO THE GENERAL LEDGER AND READING OVER THE QUESTIONS TO ENSURE ALL ARE ANSWERED CORRECTLY THE FORM 990 WILL BE MADE AVAILABLE ELECTRONICALLY TO THE EXECUTIVE COMMITTEE PRIOR TO THE FILING WITH THE IRS

Identifier Retu		Explanation
FORMS PART V SECTIO LINE 12	VI, DN B,	ALL BOARD MEMBERS ARE REQUIRED TO SIGN A STATEMENT PROIOR TO ALL MEETINGS NOTING THAT ANY AND ALL CONFLICT OF INTERESTS HAVE BEEN REPORTED TO THE BOARD OR TO THE ASSOCIATION'S GENERAL COUNSEL AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT

Identifier	Return Reference	Explanation					
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE CEO IS REVIEWED BY THE COMPENSATION COMMITTEE, WHICH IS MADE UP OF THE EXECUTIVE COMMITTEE MEMBERS ALL SENIOR STAFF POSITIONS ARE REVIEWED BY THE CEO ALL SALARIES ARE COMPARED TO INDUSTRY SALARY SURVERYS ON AN ANNUAL BASIS BOTH OF THESE PROCESSES WERE CONDUCTED IN FISCAL YEAR 2011					

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	AAIA COMPLIES WITH THE PUBLIC INSPECTION REQUIREMENTS OF INTERNAL REVENUE CODE SECTION 6104 BY MAKING ITS FORM 1024, APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(A), DETERMINATION LETTER FROM THE IRS, AND THE FORMS 990 FOR ITS THREE MOST RECENTLY COMPLETED TAX PERIODS AVAILABLE TO THE PUBLIC UPON REQUEST HOWEVER, AS SECTION 6104 DOES NOT REQUIRE ORGANIZATIONS EXEMPT UNDER SECTION 501(C)(6) TO DISCLOSE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICIES, OR FINANCIAL STATEMENTS, AAIA HAS DECIDED NOT TO MAKE SUCH INFORMATION AVAILABLE FOR PUBLIC INSPECTION

ldentifier	Return Reference	Explanation
HOURS FOR RELATED ORGANIZATIONS	PART VII	THE LISTING BELOW DESCRIBES THE AVERAGE NUMBER OF HOURS PER WEEK THAT THE INDIVIDUALS WORKED ON CAR CARE COUNCIL, A RELATED ORGANIZATION KATHLEEN SCHMATZ - 1 HOUR GARY PERMAN - 1 HOUR JERRY O'PRY - 1 HOUR DAVID W SCHEER - 1 HOUR MICHAEL KLEIN - 1 HOUR LISA KRANC - 1 HOUR RICK JAGO - 1 HOUR IRA DAVIS - 1 HOUR RICH WHITE - 25 HOURS SUSAN MEDICK - 5 HOURS TIMOTHY LEE - 1 HOUR ROBERT EGAN - 1 HOUR

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,225,150

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

DLN: 93493135018072

2010

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2010

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

MOTIVE AFTERMARKET INDUSTRY ASSOCIATION		6.1			52-2172219			
Identification of Disregarded Entities (Co	omplete	if the organizatio	n answered "Yes"	on Form 990, Par	t IV, line 33.) I	T		
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Potal income	(e) End-of-year assets	(f) Direct controlling entity		
rt II Identification of Related Tax-Exempt Or or more related tax-exempt organizations dur	ganizat	i ons (Complete ı tax year.)	f the organization	answered "Yes" c	n Form 990, Part	I IV, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 51 contr organi	olled
							Yes	No
FAIR (CAR CARE COUNCIL) 1 WISCONSIN AVENUE STE 1300 HESDA, MD 20814 1250966	RAIS	CARE CAMPAIGN - ING CONSUMER RENESS	MD	501(C)(3)	509(A)(3)	AAIA	Yes	
AUTOMOBILE AFTERMARKET POLITICAL ACTION COMMITTEE 1 WISCONSIN AVENUE STE 1300	РОЦ	TICAL ACTION	MD	527		AAIA	Yes	
HESDA, MD 20814 8756801								
AUTOMOBILE AFTERMARKET POLITICAL EDUCATION COMMITTEE 1 WISCONSIN AVENUE STE 1300 HESDA, MD 20814	РОЦ	TICAL EDUCATION	MD	527		AAIA	Yes	
								i

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)

				•		· · · · · · · · · · · · · · · · · · ·						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocai	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana	j) eral or aging ener?	(k) Percentage ownership
							Yes	No		Yes	No	
ORLAND PARK, IL60467 36-4257968	TRADE SHOW	IL	AAIA	RELATED	6,821,048	920,404		No		Yes		60 000 %
(2) HDAW 10729 W 163RD ST ORLAND PARK, IL60467 16-1724561	TRADE SHOW	IL	AAIA	RELATED	554,991	7,602		No		Yes		33 330 %
Part IV Identif	fication of Rela	ted Or	ganizations Tax	able as a Corpo	ration or Trust ((Complete if the o	organ	ızatıor	answered "Yes"	on Fo	orm 9°	90, Part IV,

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ISC 7101 WISCONSIN AVENUE BETHESDA, MD20814 38-3657088	NONE	MD	AAIA	С			100 000 %

chedule R (Form 990) 2010				Р	'age 3
Part V Transactions With Related Organizations (Complete if the organization answered "	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	s No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organization	ganizations listed in Par	ts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to other organization(s)			1b	Yes	,
c Gift, grant, or capital contribution from other organization(s)			10	Yes	,
d Loans or loan guarantees to or for other organization(s)			1d		No
e Loans or loan guarantees by other organization(s)			1e	:	No
f Sale of assets to other organization(s)			1f		No
g Purchase of assets from other organization(s)			1 g		No
h Exchange of assets			1h	ı	No
i Lease of facilities, equipment, or other assets to other organization(s)			11		No
j Lease of facilities, equipment, or other assets from other organization(s)			1 j		No
k Performance of services or membership or fundraising solicitations for other organization(s)			1k	Yes	;
I Performance of services or membership or fundraising solicitations by other organization(s)			11		No
m Sharing of facilities, equipment, mailing lists, or other assets			1n	n Yes	;
n Sharing of paid employees			1n	Yes	-
Reimbursement paid to other organization for expenses			10	Yes	<u> </u>
p Reimbursement paid by other organization for expenses			1 p	Yes	•
q Other transfer of cash or property to other organization(s)			19	1	No
r Other transfer of cash or property from other organization(s)			1r	•	No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line	, including covered relat	cionships and transact	ıon thresholds		
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ involve		mount
1) FAIR (CAR CARE COUNCIL)	Р	65,341	COST		

(a) Name of other organization	(D) Transaction type(a-r)	(c) Amount involved	(a) Method of determining amount involved
(1) FAIR (CAR CARE COUNCIL)	Р	65,341	COST
(2) FAIR (CAR CARE COUNCIL)	В	425,000	FMV
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(a) ess, and EIN of entity Primary activity Legal domicile (state or foreign country)		(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	assets) ns?		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	h) eral or laging tner?
			Yes	No		Yes	No		Yes	No
									+	-
							\vdash		+	╁
									-	-
									+	-
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										1

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010

Software ID: Software Version:

EIN: 52-2172219

Name: AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che					(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
GARY D PERMAN VICE PRESIDENT	3 00	Х		х				0	0	0
JERRY O'PRY PAST CHAIRMAN	4 00	Х						0	0	0
TIMOTHY A LEE TREASURER	5 00	Х		Х				0	0	0
LARRY ALLAN EASTERLIN DIRECTOR	2 00	Х						0	0	0
JOHN WASHBISH AAP DIRECTOR	2 00	Х						0	0	0
RODNEY K PIERINI DIRECTOR	2 00	Х						0	0	0
PAMELA A KREBS DIRECTOR	2 00	Х						0	0	0
MICHAEL LAMBERT DIRECTOR	2 00	Х						0	0	0
RICHARD J JAGO VICE CHAIRMAN	3 00	Х		Х				0	0	0
MARTIN T GOLD DIRECTOR	2 00	Х						0	0	0
MANNY GRIJALVA DIRECTOR	2 00	Х						0	0	0
LISA R KRANC VICE PRESIDENT	3 00	Х		х				0	0	0
ODIS LLOYD AAP DIRECTOR	2 00	Х						0	0	0
DAVID BARBEAU DIRECTOR	2 00	Х						0	0	0
CURTIS DRAPER DIRECTOR	2 00	Х						0	0	0
ROBERT F EGAN AAP CHAIRMAN	7 00	Х		Х				0	0	0
F SCOTT PLETZ DIRECTOR	2 00	Х						0	0	0
TONY ZANDERS DIRECTOR	2 00	Х						0	0	0
MICHAEL KLEIN VICE PRESIDENT	3 00	Х		Х				0	0	0
JOHN SEAL DIRECTOR	2 00	Х						0	0	0
CAL WILKINS DIRECTOR	2 00	Х						0	0	0
DAVID SEGAL AAP DIRECTOR	2 00	Х						0	0	0
MICHAEL KAMAL AAP DIRECTOR	2 00	Х						0	0	0
RICHARD MEZADURIAN DIRECTOR	2 00	Х						0	0	0
RUSTY BISHOP AAP DIRECTOR	2 00	Х						0	0	0
J220101			ı		<u> </u>	ı	ı			1

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	that apply)				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DAVID SCHEER SECRETARY	4 00	Х		х				0	0	0
IRA DAVIS VICE PRESIDENT	3 00	Х		х				0	0	0
PATRICIA LAW DIRECTOR	2 00	Х						0	0	0
SHERRI RAINS DIRECTOR	2 00	Х						0	0	0
WILLIAM MAGGS DIRECTOR	2 00	Х						0	0	0
TIMOTHY TRUDOWSKI DIRECTOR	2 00	Х						0	0	0
KATHLEEN SCHMATZ PRESIDENT & CEO	50 00			х				449,555	0	35,214
SUSAN MEDICK CFO/COO	50 00			х				167,942	0	26,783
RICHARD WHITE SR VICE PRESIDENT	50 00				Х			188,634	0	30,896
AARON LOWE VICE PRESIDENT - GOVT AFFAIRS	50 00					Х		147,511	0	36,988
SCOTT LUCKETT VICE PRESIDENT - TECHNOLOGY	50 00					Х		137,327	0	17,750
LEE KADRICH VICE PRESIDENT - INTERNATIONAL TRADE	50 00					Х		134,038	0	23,644
MICHAEL BARRATT SR VP - MEETINGS	50 00					Х		134,628	0	30,521
SUSAN KALISH SENIOR DIRECTOR - EDUCATION	50 00					Х		117,344	0	24,002

Form 990, Part I	III - 4 Program Service Ac	complishments (See the Instru	ictions)								
4d. Other program services											
(Code) (Expenses \$	including grants of \$) (Revenue \$)							
PARTICIPATED IN SHOW THE NUMBE	THE NOVEMBER 2010 EVENT A	DUSTRY-ONLY TRADE SHOW IN THE ND OVER 51,000 DOMESTIC AND IN 20459 DURNG THE SHOW, THERE VICIPATE	TERNATIONAL BUYERS ATTE	ENDED THE							
AFTERMARKET BY THESE KEEP THE N	COMMUNICATING ON THE BEH	including grants of \$ ENSURES THAT THE ASSOCIATION ALF OF MEMBERS THROUGH PERIOD ERALL AFTERMARKET INDUSTRY, TH	IC NEWSLETTERS AND MAGA	ZINES							