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DLN: 93493117005202

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)

2011

OMB No 1545-0047

nen to Public

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

Open to Public Inspection

Add	i the z	011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2013	L			
	ck ıf ap	plicable C Name of organization  AAA FOUNDATION FOR TRAFFIC SAFETY		D Employer ide	ntification number	
	ress cha			52-079436 E Telephone nu		
Nan	ne chan	ge				
— Inıtı	al returi	Number and street (or P O box if mail is not delivered to street address) Room/su	te	(202)638-5		
Terr	mınated	607 14TH STREET NW ROOM/SUITE 201		<b>G</b> Gross receipts :	\$ 7,306,361	
— Ame	ended re	eturn City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005	<u> </u>			
— App	lication	pending				
		<b>F</b> Name and address of principal officer	<b>H(a)</b> Is th	■ ıs a group return	ıfor	
		JOHN P KISSINGER 607 14TH STREET NW SUITE 201		ates?	⊤Yes 🔽 No	
		WASHINGTON, DC 20005	H(b) Are a	ll affiliates include	ed?	
					(see instructions)	
<b>I</b> Tax	r-exem	ot status	H(c) Grou	ıp exemption nui	mber 🟲	
J W	ebsite:	:► WWW AAAFTS ORG				
<b>K</b> Form	n of orga	anization 🔽 Corporation Trust Association Other ►	<b>L</b> Year of fo	rmation 1947 <b>M</b>	State of legal domicile DC	
Pai	rt I	Summary				
Governance	Т	riefly describe the organization's mission or most significant activities HE FOUNDATION CONDUCTS OR FUNDS RESEARCH AND DEVELOPS ED RAFFIC STUDY	UCATIONAL	. MATERIALS T	O ENHANCE	
를	_				_	
ĝ J		heck this box 🔭 if the organization discontinued its operations or disposed o		1 1	ssets	
×6		umber of voting members of the governing body (Part VI, line 1a)		3	38	
Activities &		umber of independent voting members of the governing body (Part VI, line 1b)			38	
		otal number of individuals employed in calendar year 2011 (Part V, line 2a) otal number of volunteers (estimate if necessary)	• •	6	10	
<b>ā</b>		otal unrelated business revenue from Part VIII, column (C), line 12		7a	0	
		et unrelated business taxable income from Form 990-T, line 34		7b		
			Pric	or Year	Current Year	
	8	Contributions and grants (Part VIII, line 1h)		2,546,696	2,343,062	
흴	9	Program service revenue (Part VIII, line 2g)			0	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		328,303	708,619	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		136,231	26,781	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	•	3,011,230	3,078,462	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		483,718	273,039	
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0	
ω,	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines		963,524	1 124 277	
Expenses	16a	5-10) Professional fundraising fees (Part IX, column (A), line 11e)		903,324	1,124,277	
क ≘	b	Total fundraising expenses (Part IX, column (D), line 25) ▶96,572				
y	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		1,366,150	1,549,154	
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		2,813,392	2,946,470	
	19	Revenue less expenses Subtract line 18 from line 12		197,838	131,992	
<u>የ</u> 8			_	g of Current	End of Year	
9 mg	20	Tabel peach (Darb V. Irrand C.)	<u> </u>	/ear		
48 B	20 21	Total assets (Part X, line 16)		13,526,900 357,294	12,748,228	
Not Assets or Fund Balances	21	Net assets or fund balances Subtract line 21 from line 20		13,169,606	12,103,389	
	t II	Signature Block		13/103/000	12,100,000	
Under	penalt edge a	ies of perjury, I declare that I have examined this return, including accompanying so nd belief, it is true, correct, and complete. Declaration of preparer (other than office	r) is based on			
Sign		Signature of officer  JOHN P KISSINGER PRESIDENT CEO				
knowl ——— Sign		JOHN P KISSINGER PRESIDENT CEO  Type or print name and title				
Sign Here		JOHN P KISSINGER PRESIDENT CEO Type or print name and title  Preparer's signature ALLEN P DELEON CPA  Date 2012-04-26 S	Check if elf-	Preparer's taxpa (see instructions)	yer identification number	
Sign Here Paid Prepa	e arer's	JOHN P KISSINGER PRESIDENT CEO Type or print name and title  Preparer's signature ALLEN P DELEON CPA  Date 2012-04-26 see	elf-			
Sign Here	e arer's	JOHN P KISSINGER PRESIDENT CEO Type or print name and title  Preparer's signature  ALLEN P DELEON CPA  Date 2012-04-26	elf-	(see instructions)		

	990 (	<u> </u>
Par	• • • • • • • • • • • • • • • • • • • •	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Brief	describe the organization's mission
THE	FOUN	ATION CONDUCTS OR FUNDS RESEARCH AND DEVELOPS EDUCATIONAL MATERIALS TO ENHANCE TRAFFIC STUDY
2	the p	organization undertake any significant program services during the year which were not listed on r Form 990 or 990-EZ?
	If "Ye	describe these new services on Schedule O
3	servi	organization cease conducting, or make significant changes in how it conducts, any program s?
	If "Ye	describe these changes on Schedule O
4	exper	e the organization's program service accomplishments for each of its three largest program services, as measured by es Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Cod	) (Expenses \$ 1,762,491 including grants of \$ 260,939 ) (Revenue \$ )
	EDUC REPC SPEE DRIV AAA F UNSL OF TI TRAF ROW TRAM WITH NATIC COMI	C SAFETY RESEARCH - THE AAA FOUNDATION FOR TRAFFIC SAFETY AIMS TO SAVE LIVES AND REDUCE INJURIES ON OUR ROADS THROUGH RESEARCH AND ION PROGRAMS THAT IMMEDIATELY BENEFIT THE GENERAL PUBLIC IN 2011, THE FOUNDATION PUBLISHED 10 MAJOR TRAFFIC SAFETY RESEARCH SAND INITIATED 5 NEW RESEARCH PROJECTS HIGHLIGHTS FROM THE FOUNDATION'S 2011 WORK INCLUDE COMPLETED 5 IN-HOUSE STUDIES IMPACT IND A PEDESTRIAN'S RISK OF SEVERE INJURY OR DEATH, 2011 TRAFFIC SAFETY CULTURE INDEX, UNLICENSED TO KILL AND EVALUATION OF BASIC ONLINE EDUCATION PROGRAMS FINDINGS FROM THESE STUDIES WERE USED TO SUPPORT OUR THIRD HEADS UP DRIVING WEEK (HUDW) CAMPAIGN, AAA AND UNDATION MATERIALS, AND WERE FEATURED ON A NUMBER OF NATIONAL MEDIA ORGANIZATIONS RELEASED TWO TEEN STUDIES TRANSITION TO RIVISED DRIVING AND MEASURING CHANGES IN TEENAGE DRIVER CRASH CHARACTERISTICS DURING THE EARLY MONTHS OF DRIVING IN RECOGNITION A DRIVER SAFETY WEEK PARTNERED WITH THE NATIONAL SLEEP FOUNDATION TO RELEASE A STUDY TO BRING GREATER AWARENESS TO THIS IMPORTANT CONTRAINS OF A SAFETY ISSUE DURING DROWSY DRIVING PREVENTION WEEK PARTNERED WITH WESTERN TRANSPORTATION INSTITUTE FOR THE THIRD YEAR IN A CO-HOST THE NATIONAL RURAL SUMMIT ON TRAFFIC SAFETY CULTURE THE SUMMIT AGAIN BROUGHT TOGETHER A CROSS SECTION OF THE ORTATION COMMUNITY TO DISCUSS THE IMPACT TRAFFIC SAFETY HAS ON PUBLIC ATTITUDES AND BEHAVIORS WITH REGARD TO SAFETY COLLABORATED OF AND THE TRAFFIC SAFETY COMMUNITY ON SUCH INITIATIVES AS A NATIONAL STRATEGIC HIGHWAY SAFETY PLAN TOWARD ZERO DEATHS, THE UNITED SECADE OF ACTION FOR ROAD SAFETY, AND THE NEW TRB SUB-COMMITTEE ON SAFETY CULTURE CONTINUED TO DEVELOP USRAP, NOTABLY, TING THE TRAINING AND CERTIFICATION OF UTAH AND COMPLETING A PROJECT IN KANE COUNTY, IL THAT WILL FUTTHER DEMONSTRATE THE UTILITY PROGRAM'S "SAFETY INVESTMENT PLANS" TO COUNTY GOVERNMENTS INITIATED A STUDY TO VALIDATE THE UTILITY OF BRAIN RETRAINING SOFTWARE DULD BE USED TO REDUCE THE CRASH RISKS FOR YOUNG DRIVERS DURING THEIR FIRST SIX MONTHS OF INDEPENDENT DRIVING
4b	(Cod	) (Expenses \$ 668,821 including grants of \$ 12,100 ) (Revenue \$ )
	PUBL TRAF THES THIS WOR 2011 PUBL YOUT DISC WHIG	C SAFETY EDUCATION - ALL RESEARCH REPORTS AND FINDINGS PRODUCED BY THE AAA FOUNDATION FOR TRAFFIC SAFETY ARE MADE AVAILABLE TO THE THROUGH ITS WEBSITE(S), AND THOSE DOCUMENTS CAN BE DOWNLOADED FOR FREE LAST YEAR THE AAA FOUNDATION DISTRIBUTED OVER 250,000 C SAFETY EDUCATIONAL MATERIALS AT NO COST TO THE GENERAL PUBLIC LOCAL AAA CLUBS HAVE ALSO CHOSEN TO CUSTOMIZE AND/OR DISTRIBUTE REE MATERIALS TO THEIR MEMBERS THROUGH LOCAL SAFETY EVENTS THE FOUNDATION ALSO DEVOTES CONSIDERABLE RESOURCES TO DISSEMINATE AFETY INFORMATION" TO KEY STAKEHOLDERS AND THE GENERAL PUBLIC SO THAT RESEARCH CAN BE UTILIZED AND IMPLEMENTED TO BRING ABOUT REAL CHANGE TO THAT END, THE FOUNDATION'S PRESIDENT MADE OVER 17 PRESENTATIONS TO EVENTS ORGANIZED BY THE TRAFFIC SAFETY COMMUNITY IN THE FOUNDATION RECEIVED COVERAGE IN OVER 2,750 ARTICLES AND REACHED AN AUDIENCE OF MORE THAN 1 2 BILLION PEOPLE AS AN ADDITIONAL SERVICE, THE AAA FOUNDATION HAS CONTINUED TO PROMOTE THE IMPORTANCE OF VARIOUS TRAFFIC SAFETY ISSUES VIA SOCIAL MEDIA, INCLUDING SE, FACEBOOK, AND TWITTER THE FOUNDATION ALSO CONTINUES TO HOST A BLOG WITH THE GOAL OF PROMOTING INCREASED AWARENESS AND SION ABOUT TRAFFIC SAFETY ISSUES ON OUR ROADS THE FOUNDATION CONTINUED TO OFFER A FREE ONLINE SCREENING TOOL, ROADWISE REVIEW, ALLOWS SENIORS TO TEST THEIR DRIVING SKILLS IN THE PRIVACY OF THEIR OWN HOME, AND EXPANDED THE OLDER DRIVER LICENSING POLICIES AND CARD DATABASE TO INCLUDE CANADIAN PROVINCES OVERALL THE FOUNDATION MAINTAINS 5 WEBSITES WHOSE PAGES RECEIVED OVER 640,000 VIEWS ARE
	(6-1	V. Company of A
<b>4</b> c	KEEP DVD'S TO C VOLU	) (Expenses \$ 56,659 including grants of \$ ) (Revenue \$ )  C SAFETY EDUCATIONAL MATERIALS SALES - IN ADDITION TO SERVING AS A RELIABLE RESOURCE FOR RESEARCH AND EDUCATIONAL INFORMATION THAT ROAD USERS SAFE, THE FOUNDATION SELLS NUMEROUS TRAFFIC SAFETY EDUCATION MATERIALS AS WELL AS OTHER DRIVER TRAINING INSTRUCTIONAL IN 2011, THE FOUNDATION FULFILLED OVER 13,530 ORDERS OF EDUCATIONAL MATERIALS, INCLUDING BROCHURES AND DVD'S THE GOAL IS PRIMARILY ERE EXPENSES AS OPPOSED TO MAKING A PROFIT TO THAT END, AN "INTRODUCTORY PACKET OF MATERIALS" IS GIVEN AWAY FOR FREE TO SATISFY LOW-  REQUEST AND PROMOTE DISSEMINATION OF GREATER VOLUMES OF MATERIALS THE FOUNDATION USES AN EXTERNAL FULFILLMENT CENTER THAT IZES IN SERVING ASSOCIATIONS TO MEET CONSUMER REQUESTS, AND PRICES ITS PRODUCTS WELL BELOW THE FOR-PROFIT MARKET FOR SIMILAR ALS
	Oth	program services (Describe in Schedule O )
		nses \$ including grants of \$ ) (Revenue \$ )
4e	Tota	program service expenses►\$ 2,487,971

Part IV	Checklist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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	<b>Section 501(c)(3) organizations.</b> 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		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
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
е	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		No
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	Yes	
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		No
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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III 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	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? <i>If</i> "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? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	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	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 questions 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		No
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		No
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			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? <i>If</i> "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	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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?	38	Yes	

	,
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V	<u> </u>	•1	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	<b>1a</b> 6			
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 gaming (gambling) winnings to prize winners?	1c		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b		
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
)	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
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
0	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
ь	organization solicit any contributions that were not tax deductible?			
-	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?	, a	165	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		
t	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
F	contract?	7e 7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	$\vdash$		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
	Sponsoring organizations maintaining donor advised funds.	8		
3	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  Instruction food and constal contributions uncluded on Bart VIII. Inc. 12			
	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			
	Gross income from members or shareholders			
	sources 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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
Ξ	Enter the aggregate amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

AAA FNDN FOR TRAFFIC SFTY

607 14TH STREET NW

WASHINGTON, DC 20005

**SUITE 201** 

(202) 638-5944

Form 990 (2011) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax 1a 38 Enter the number of voting members included in line 1a, above, who are 1b 38 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . Νo Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Nο filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo 6 6 Νo  $\hbox{Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or appoint one or a property of the power to elect or a property of the power to e$ 7a 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Νo or persons other than the governing body? . . . . . . . . . . . . Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes Each committee with authority to act on behalf of the governing body? . . . . . . Yes 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 Yes Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a 10a Did the organization have local chapters, branches, or affiliates? . Nο **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes the form? **b** Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . 12a Yes b Were officers, directors or trustees, and key employees required to disclose annually interests that could give Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 Yes 13 14 Did the organization have a written document retention and destruction policy? . . . . . . . . 14 Yes 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 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) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure 17 List the States with which a copy of this Form 990 is required to be filed AL, AR, AZ, CA, CT, DC, FL, GA, HI, IL, KS, KY, LA,  $\mbox{MA}\,,\mbox{MD}\,,\mbox{ME}\,,\mbox{MI}\,,\mbox{MN}\,,\mbox{MO}\,,\mbox{MS}\,,\mbox{NC}\,,\mbox{OK}\,,\mbox{OR}\,,\mbox{PA}\,,\mbox{RI}\,,$ SC, TN, TX, UT, VA, WA, WI, WV 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 made these available. Check all that apply Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table State the name, physical address, and telephone number of the person who possesses the books and records of the organization

# 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, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				$\vdash$			_			

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

	(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e tha	n on son er a	e bo is b nd a stee	x, oth )		(D) Reportable compensatio from the organization ( 2/1099-MIS	on compens from rel W- organiza	able ation ated tions 099-	(F) Estimated amount of other compensation from the organization and related		
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		14130	- )	organiza		
See A	dditional Data Table													
								_						
1b	Sub-Total							•						
	Total from continuation sheets		tion A		•	•		<b>P</b>	231,:	100			22,000	
2	Total (add lines 1b and 1c) .  Total number of individuals (incl \$100,000 of reportable compen					ted	<u>.</u> above	) who					22,000	
												Yes	No	
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sci						mploy •		or highest comp	ensated emplo	ŀ	3	No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual								1 Yes					
5	<u>-</u>							for	1 1 1 1 1 1 1	No				
<u>S</u>	Complete this table for your five \$100,000 of compensation from	highest comper												
	or within the organization's tax y	ear							· 			1 (6	<u> </u>	
	Nar	(A) ne and business add	dress							<b>(B)</b> Description of servi	ces	(C Comper		
_	Total number of independent cont \$100,000 of compensation from	•	_	ot lır	nıted	l to	those	liste	d above) who re	ceived more th	an			

Form 9								Page <b>9</b>
Part \	VIII	Statement o	of Revenue		(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated cam	paigns 1a					
<u> </u>	b	Membership du	es 1b					
چ. ∰	C		ents <b>1c</b>					
<u>ਜ਼</u> ੂਰਾ	d		zations 1d					
S.E.	e	Government grants						
美	f	sımılar amounts no		2,343,062				
きま	g		ibutions included in					
Contributions, gifts, grants and other similar amounts	h		s 1a-1f	▶	2,343,062			
				Business Code				
en.	2a							
æ	b							
958	C							
38	d	_						
Ē	e	^ II othor program						
Program Service Revenue	f		am service revenue					
	д 3		s 2a-2f					
			ar amounts)		422,226			422,226
	4		stment of tax-exempt bond	F				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	, c	expenses Rental income						
		or (loss)		<u> </u>				
	ď	Net rental incol	me or (loss)  (i) Securities	(II) Other				
	7a	Gross amount	4,426,810	(ii) o tiici				
		from sales of assets other						
	ь	than inventory Less cost or	4,140,417					
		other basis and sales expenses						
	c	Gain or (loss)	286,393		206 202	206 202		
	d 8a	Net gain or (los Gross income f		▶	286,393	286,393		
Other Revenue		events (not inc \$ of contributions	luding s reported on line 1c)					
æ		See Part IV, lin	a a					
her	b	Less direct ex	penses b					
ᅙ	c		(loss) from fundraising	events 🟲				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	b		penses b					
	10a	Net income or ( Gross sales of	(loss) from gaming acti inventory, less	vities				
		returns and allo	owances . a	107,574				
	b c		oods sold <b> b</b> (loss) from sales of inv	87,482 entory ►	20,092	20,092		
		Miscellaneous		Business Code	,	· .		
	11a	AMORT OF DI	SCOUNT ON		6,689	6,689		
	Ь	PLEDGES						
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		6,689			
	12	Total revenue.	See Instructions .	▶				
	1				3,078,462	313,174		422,226

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, p, 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 United States See Part IV, line 21	12,100	12,100	,	<u> </u>
2	Grants and other assistance to individuals in the United States See Part IV, line 22		,		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	260,939	260,939		
4	Benefits paid to or for members	,	,		
5	Compensation of current officers, directors, trustees, and key employees	231,199	201,178	16,379	13,642
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	463,984	403,733	32,871	27,380
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	158,820	,	158,820	
9	Other employee benefits	221,255	192,525	15,675	13,055
10	Payroll taxes	49,019	42,654	3,473	2,892
11	Fees for services (non-employees)				· · · · · · · · · · · · · · · · · · ·
а	Management				
b	Legal	15,074		15,074	
С	Accounting	89,467		89,467	
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	9,896	8,108	1,321	467
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	55,915	47,026	7,493	1,396
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,009	808	101	100
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	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)				
a	COGNITIVE DISTRACTION	295,104	295,104		
b	DE EVALUATION PHASE II	251,559	251,559		
c	POSIT SCIENCE	200,000	200,000		
d	PROJECT OUTREACH	182,903	182,903		
e					
f	All other expenses	448,227	389,334	21,253	37,640
25	<b>Total functional expenses.</b> Add lines 1 through 24f	2,946,470	2,487,971	361,927	96,572
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				rm <b>990</b> (2011)

Pa	irt X	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	369,231	1	304,629
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,321,709	3	337,000
	4	Accounts receivable, net	308,622	4	337,010
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
Assets		Schedule L		6	
	7	Notes and loans receivable, net		7	
88	8	Inventories for sale or use	65,490	8	47,784
•	9	Prepaid expenses and deferred charges	38,415	9	24,309
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  205,350			
	ь	Less accumulated depreciation 10b 182,845	37,171	10c	22,505
	11	Investments—publicly traded securities	11,386,262	11	11,674,991
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	13,526,900	16	12,748,228
	17	Accounts payable and accrued expenses .	159,507	17	394,921
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ر. م	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Эę		persons Complete Part II of Schedule L		22	
Ξ	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 (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	197,787	25	249,918
	36	D	357,294	26	644,839
	26	Total liabilities. Add lines 17 through 25	337,294	26	044,039
φ		through 29, and lines 33 and 34.			
änc	27	Unrestricted net assets	6,368,368	27	5,308,999
<u> </u>	28	Temporarily restricted net assets	269,280	28	255,743
	29	Permanently restricted net assets	6,531,958		6,538,647
r Fund Balance		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.	, ,		<u> </u>
s or	30	Capital stock or trust principal, or current funds		30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ass	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	13,169,606		12,103,389
Ž	34	Total liabilities and net assets/fund balances	13 526 900	-	12 748 228

Pa	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,0	078,46	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,946,47		
3	Revenue less expenses Subtract line 2 from line 1	3		1	131,99	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,1	169,60	
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-1,1	198,20	
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		12,103,38		
Pai	TEXII 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	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		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 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		2c	Yes		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i	cenad	ZC	165		
u	on a separate basis, consolidated basis, or both	33ueu				
	Separate basis Consolidated 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 th Single Audit Act and OMB Circular A-133?	e	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b			

**Employer identification number** 

### OMB No 1545-0047

Inspection

# **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

**Public Charity Status and Public Support** 

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

AAA FOUNDATION FOR TRAFFIC SAFETY Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II ) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN		(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi)  Is the organization in col (i) organized in the US?		(vii) A mount of support?
			Yes	No	Yes	No	Yes	No	
Total									

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify

	under Part III. If the	e organization i	fails to qualify u	inder the tests	<u>listed below, ple</u>	ase co	mplete I	Part III.)	
	ection A. Public Support	1	1	1 1					
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 20	011	<b>(f)</b> Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,717,84	4 4,281,818	3,908,956	2,547,196	2	,349,751	17,805,565	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities								
,	furnished by a governmental unit to the organization without charge								
4	<b>Total.</b> Add lines 1 through 3	4,717,84	4 4,281,818	3,908,956	2,547,196	2	,349,751	17,805,565	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							2,536,979	
6	(f) <b>Public Support.</b> Subtract line 5						+	15.252.525	
	from line 4							15,268,586	
	ection B. Total Support								
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 20	11	(f) Total	
7	A mounts from line 4	4,717,844	4,281,818	3,908,956	2,547,196	2	349,751	17,805,565	
8	Gross income from interest,							_	
	dividends, payments received on securities loans, rents, royalties and income from similar sources	164,258	265,590	330,932	330,775	422,226		1,513,781	
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets	545,619	-407,941		-2,472		286,393	421,599	
11	Total support (Add lines 7 through 10)							19,740,945	
12	Gross receipts from related activiti	es, etc (See inst	tructions )			12		114,263	
13	First Five Years If the Form 990 is check this box and stop here		· 	, thırd, fourth, or f	Ifth tax year as a 5	501(c)(3	i) organız	ration, ▶┌	
<u> </u>	ection C. Computation of Pul Public Support Percentage for 201			11 column (f))		14		77 340 %	
15	Public Support Percentage for 201	-		('))		$\vdash$			
	33 1/3% support test—2011. If the	•	•	von line 12 and l	ine 14 ie 22 1/20/-	15 or more	check +	76 010 %	
b	and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization medorganization	alifies as a public organization did n qualifies as a p — <b>2011.</b> If the org tion meets the "f	ly supported orga not check the bo ublicly supported anization did not o acts and circums	nization x on line 13 or 16 organization check a box on lin tances" test, chec	a, and line 15 is 3 e 13, 16a, or 16b ck this box and <b>st</b> e	3 1/3% and line	or more, 14 Explain	►/ check this ►/	
b 18									

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								
Explanation									

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493117005202

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

**Supplemental Financial Statements** 

Open to Public Inspection

Internal Revenue Service

Name of the organization AAA FOUNDATION FOR TRAFFIC SAFETY	Emp	Employer identification number							
TWO TO REALITION FOR TRAITIE SALETT		52-	52-0794368						
Part I Organizations Maintaining Donor Acordanization answered "Yes" to Form 99	0, Part IV, line 6.								
	(a) Donor advised funds		( <b>b)</b> Funds and c	ther accoun	ts				
Total number at end of year									
Aggregate contributions to (during year)									
Aggregate grants from (during year)									
Aggregate value at end of year									
Did the organization inform all donors and donor advi- funds are the organization's property, subject to the o			ısed	┌ Yes	√ No				
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				┌ Yes	√ No				
art II Conservation Easements. Complete	ıf the organızatıon answered	"Yes" to Forr	n 990, Part I\	/, line 7.					
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 qualic easement on the last day of the tax year	on or pleasure)	ion of a certifie	ically important d historic struc onservation						
easement on the last day of the tax year			Hold at the	End of the	Voar				
a Total number of conservation easements		2a	rield at the	LIIG OF THE	i Cai				
• Total acreage restricted by conservation easements		2b							
Number of conservation easements on a certified his	toric structure included in (a)	2c							
Number of conservation easements included in (c) ac	• •	2d							
Number of conservation easements modified, transfe the taxable year ▶	rred, released, extinguished, or to	erminated by th	ne organization	during					
Number of states where property subject to conserva	ition easement is located ►								
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ion, handling of	f violations, and	│ │ Yes	√ No				
Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservatio	n easements d	uring the year l	<u> </u>					
A mount of expenses incurred in monitoring, inspectings	ng, and enforcing conservation ea	isements durin	g the year						
Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirement	ts of section		┌ Yes	√ No				
In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's f								
Organizations Maintaining Collectio Complete if the organization answered			her Similar	Assets.					
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 of	r research in fu			,				
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p provide the following amounts relating to these items	public exhibition, education, or re								
(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$						
(ii) Assets included in Form 990, Part X			<b>F</b> -\$						
If the organization received or held works of art, histofollowing amounts required to be reported under SFA:		assets for finan							
Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$						

Assets included in Form 990, Part X

Part	<b>III</b> Organizations Maintaining Co	llections of Art,	, His	<u>tori</u>	cal Tre	easur	es, or C	<u> the</u>	<sup>-</sup> Simila	ır Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	_		_		se of its o	collection	 1	
а	Public exhibition		d	Γ	Loan o	rexch	ange prog	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and explai	n hov	v they	/ further	the or	ganızatıoı	n's ex	empt pur	pose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to								ılar	Г	Yes	√ No
Par	ESCROW and Custodial Arrang Part IV, line 9, or reported an ar	•			_		answere	ed "Y	es" to Fo	orm 990	),	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	dıary	for c	ontributi	ions oi	rotherass	sets r	iot	Г	Yes	√ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the f	follow	ing ta	able		_					
										Amou	ınt	
C	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year						ļ	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?							Γ	Yes	▼ No
b	If "Yes," explain the arrangement in Part XI\	•										
Par	t V Endowment Funds. Complete											
_		(a)Current Year	(b	Prior \		<b>(c)</b> Tw	o Years Bac		Three Yea	rs Back (e	e)Four Y	ears Back
1a	Beginning of year balance	9,562,258		9	,494,290		9,470,4					
b	Contributions	6,689			67,668		23,8	55				
с	Investment earnings or losses							-				
d	Grants or scholarships							-				
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	9,568,947		9	,561,958		9,494,2	90				
2	Provide the estimated percentage of the year	r end balance held a	s									
а	Board designated or quasi-endowment											
b	Permanent endowment >											
с За	Term endowment ► Are there endowment funds not in the posse	ssion of the organiza	ition f	hat a	re held	and ad	lministere	d for	the			
	organization by	· · · · · · · · · · · · · · · · · ·									Yes	No
	(i) unrelated organizations									3a(i)		No
	(ii) related organizations					•				3a(ii)		No
	If "Yes" to 3a(II), are the related organizatio	•						•		3b		No
4	Describe in Part XIV the intended uses of th											
Раг	Land, Buildings, and Equipme	ent. See Form 99	о, Ра				I		l		1	
	Description of property				ı) Cost or sıs (ınvest		( <b>b)</b> Cost or basis (ot			ımulated cıatıon	( <b>d</b> ) B	ook value
<b>1a</b> l	and										1	
b E	Buildings		•								1	
c 1	easehold improvements		•									
	quipment		•				20	)5,350		182,845		22,505
d E	quipment							·		182,845		22,505

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(D)Book value	Cost or end-of-year market value	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
o their			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	-		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		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, II	ne 15.		
(a) Descri	ption	<b>(b)</b> Book value	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15 )		
Part X Other Liabilities. See Form 990, Part X	K, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
ACCRUED PENSIONS AND OTHER LIABILITY	249,918		
UNAMORTIZED ENDOWMENT CONTRIBUTION			
		1	
	i	1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶	249,918		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,078,462
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,946,470
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	131,992
4	Net unrealized gains (losses) on investments	4	-1,198,209
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	-1,198,209
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,066,217
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	urn
1	Total revenue, gains, and other support per audited financial statements	1	2,194,935
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	-883,527
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,078,462
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)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	3,078,462
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	
1	Total expenses and losses per audited financial statements	1 1	3,261,152
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	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	]	
e	Add lines <b>2a</b> through <b>2d</b>	2e	314,682
3	Subtract line <b>2e</b> from line <b>1</b>	3	2,946,470
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)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	2,946,470
Pai	t 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 X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
RECONCILIATION OF CHANGES - OTHER	SCHEDULE D, PAGE 4, PART XI, LINE 8	COST OF SALES 87,482 COST OF SALES -87,482
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	COST OF SALES 87,482
EXPENSE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XIII, LINE 2D	COST OF SALES 87,482

DLN: 93493117005202

**Employer identification number** 

OMB No 1545-0047

Open to Public **Inspection** 

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

► Attach to Form 990. ► See separate instructions.

Name of the organization AAA FOUNDATION FOR TRAFFIC SAFETY

52-0794368

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Part V if additional space is needed ) (a) Region (d) Activities conducted in (e) If activity listed in (d) is (b) Number of (c) Number of (f) Total offices in the employees or region (by type) (e g, a program service, describe expenditures for region agents in region or fundraising, program specific type of region/investments ındependent services, investments, grants service(s) in region ın region to recipients located in the contractors region) 3a Sub-total **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b)

Par	Part IV,	line 15, for an		nizations or Entitie eived more than \$5,0					
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	TRAFFIC RESEARCH	98,003	WHEN RECEIVED			
			NORTH AMERICA	TRAFFIC RESEARCH	153,556	WHEN RECEIVED			
				1					
2	Enter total nu tax-exempt b	mber of recipions by the IRS, or f	ent organizations li or which the grante	sted above that are re ee or counsel has pro	ecognized as charit vided a section 503	l ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as . ►	
3	Enter total nu	mber of other	organizations or ei	ntities					: (Farma 000) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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		+			+		
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						1	dula E (Earry 000) 2011

# Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	Γ	Yes	Γ	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	Γ	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	Γ	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Γ	Yes	Γ	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	Г	No

Schedule F (Form 990) 2011

#### Part V Supplemental Information

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

information.		
Identifier	ReturnReference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE THE UNITED STATES	2	THE AAA FOUNDATION FOR TRAFFIC SAFETY HAS CONTRACTS FOR TRAFFIC SAFETY RESEARCH WITH ORGANIZATIONS OUTSIDE THE US DURING 2011 WE HAD CONTRACTS WITH RACC, SPEIER ROAD SAFETY SOLUTIONS, PRA AND WITH TIRF, A CANADIAN COMPANY FOR WORK ON A RESEARCH PROJECT IN CANADA AND THE US ALL OF THESE CONTRACTS WERE AWARDED ON MERIT AND WERE CLOSELY MONITORED EXPENSES FOR SERVICES
		RENDERED UP TO CONTRACTUAL LIMITS ARE PAID PERIODICALLY
-		

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DLN: 93493117005202

OMB No 1545-0047

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.

Internal Revenue Service			Attach to Form 990				Inspection
Name of the organization	CAFETY					Employer identification	on number
AAA FOUNDATION FOR TRAFFIC	SAFETY					52-0794368	
Part I General Informati	on on Grants and	l Assistance				•	
<ul> <li>Does the organization maintain the selection criteria used to a</li> <li>Describe in Part IV the organi</li> </ul>	ward the grants or as	sıstance <sup>?</sup>					<b>∀</b> Yes <b>⊢</b>
Part II Grants and Other A Form 990, Part IV, II	ne 21 for any recip	ient that received n	rganizations in the nore than \$5,000. Che needed	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
							_
<ul><li>Enter total number of section !</li><li>Enter total number of other org</li></ul>		_				<b>.</b> _	

(a)Type of grant or assistance	( <b>b)</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 assistanc

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

Schedule I (Form 990) 2011

DLN: 93493117005202

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

AAA FOUNDATION FOR TRAFFIC SAFETY

# **Compensation Information**

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

			52-0794368			
Pa	rt I Questions Regarding Compensation		·			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	$\sqcap$	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ			1b		
2	Did the organization require substantiation prior to reli officers, directors, trustees, and the CEO/Executive D			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that		У			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	<u> </u>	, ,			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art V I	I, Section A, line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymei	nt?	4a		No
b	Participate in, or receive payment from, a supplementa	al nor	nqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-bas	ed co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	/ıde tl	he applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	t com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of	ne 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, lir compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			7		No
8	Were any amounts reported in Form 990, Part VII, pai					
	subject to the initial contract exception described in R	Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the r	rebutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits (B)(ı)-(D)		reported in prior Form 990 or Form 990-EZ	
(1) JOHN P KISSINGER	(I) (II)	231,199			22,000		253,199		
	•	•		•	•		•		

Schedule J (Form 990) 2011 Page **3** 

#### Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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DLN: 93493117005202

OMB No 1545-0047

2011

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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.

Name of the organization
AAA FOUNDATION FOR TRAFFIC SAFETY

52-0794368

ldentifier	Return Reference	Explanation
ADDITIONAL INFORMATION	FORM 990	AAA NATIONAL PROVIDES THE FOUNDATION FREE OFFICE SPACE THAT IS REPORTED ON THE FOUNDATION'S FINANCIALS IN THE AMOUNT OF 227,200 00 PRIME BUCHHOLZ PROVIDES FREE (PROBONO) FINANCIAL ADVICE AND GUIDANCE

ldentifier	Return Reference	Explanation
	· '	NUMEROUS INDIVIDUALS VOLUNTEER THEIR TIME TO THE FOUNDATION TO SERVE ON FOUNDATION GOVERNANCE COMMITTEES AND TECHNICAL PROJECT OVERSIGHT COMMITTEES OR PANELS

ldentifier	Return Reference	Explanation
FIRST ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4A	FROM THESE STUDIES WERE USED TO SUPPORT OUR THIRD HEADS UP DRIVING WEEK (HUDW) CAMPAIGN, AAA AND AAA FOUNDATION MATERIALS, AND WERE FEATURED ON A NUMBER OF NATIONAL MEDIA ORGANIZATIONS RELEASED TWO TEEN STUDIES TRANSITION TO UNSUPERVISED DRIVING AND MEASURING CHANGES IN TEENAGE DRIVER CRASH CHARACTERISTICS DURING THE EARLY MONTHS OF DRIVING IN RECOGNITION OF TEEN DRIVER SAFETY WEEK PARTNERED WITH THE NATIONAL SLEEP FOUNDATION TO RELEASE A STUDY TO BRING GREATER AWARENESS TO THIS IMPORTANT TRAFFIC SAFETY ISSUE DURING DROWSY DRIVING PREVENTION WEEK PARTNERED WITH WESTERN TRANSPORTATION INSTITUTE FOR THE THIRD YEAR IN A ROW TO CO-HOST THE NATIONAL RURAL SUMMIT ON TRAFFIC SAFETY CULTURE THE SUMMIT AGAIN BROUGHT TOGETHER A CROSS SECTION OF THE TRANSPORTATION COMMUNITY TO DISCUSS THE IMPACT TRAFFIC SAFETY HAS ON PUBLIC ATTITUDES AND BEHAVIORS WITH REGARD TO SAFETY COLLABORATED WITH DOT AND THE TRAFFIC SAFETY COMMUNITY ON SUCH INITIATIVES AS A NATIONAL STRATEGIC HIGHWAY SAFETY PLAN TOWARD ZERO DEATHS, THE UNITED NATION'S DECADE OF ACTION FOR ROAD SAFETY, AND THE NEW TRB SUB-COMMITTEE ON SAFETY CULTURE CONTINUED TO DEVELOP USRAP, NOTABLY, COMPLETING THE TRAINING AND CERTIFICATION OF UTAH AND COMPLETING A PROJECT IN KANE COUNTY, IL THAT WILL FURTHER DEMONSTRATE THE UTILITY OF THE PROGRAM'S "SAFETY INVESTMENT PLANS" TO COUNTY GOVERNMENTS INITIATED A STUDY TO VALIDATE THE UTILITY OF BRAIN RETRAINING SOFTWARE THAT COULD BE USED TO REDUCE THE CRASH RISKS FOR YOUNG DRIVERS DURING THEIR FIRST SIX MONTHS OF INDEPENDENT DRIVING

ldentifier	Return Reference	Explanation
SECOND ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4B	FOUNDATION'S PRESIDENT MADE OVER 17 PRESENTATIONS TO EVENTS ORGANIZED BY THE TRAFFIC SAFETY COMMUNITY IN 2011, THE FOUNDATION RECEIVED COVERAGE IN OVER 2,750 ARTICLES AND REACHED AN AUDIENCE OF MORE THAN 1 2 BILLION PEOPLE. AS AN ADDITIONAL PUBLIC SERVICE, THE AAA FOUNDATION HAS CONTINUED TO PROMOTE THE IMPORTANCE OF VARIOUS TRAFFIC SAFETY ISSUES VIA SOCIAL MEDIA, INCLUDING YOUTUBE, FACEBOOK, AND TWITTER THE FOUNDATION ALSO CONTINUES TO HOST A BLOG WITH THE GOAL OF PROMOTING INCREASED AWARENESS AND DISCUSSION ABOUT TRAFFIC SAFETY ISSUES ON OUR ROADS THE FOUNDATION CONTINUED TO OFFER A FREE ONLINE SCREENING TOOL, ROADWISE REVIEW, WHICH ALLOWS SENIORS TO TEST THEIR DRIVING SKILLS IN THE PRIVACY OF THEIR OWN HOME, AND EXPANDED THE OLDER DRIVER LICENSING POLICIES AND PRACTICES DATABASE TO INCLUDE CANADIAN PROVINCES OVERALL THE FOUNDATION MAINTAINS 5 WEBSITES WHOSE PAGES RECEIVED OVER 640,000 VIEWS LAST YEAR

ldentifier	Return Reference	Explanation
THIRD ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4C	MARKET FOR SIMILAR MATERIALS

ldentifier	Return Reference	Explanation
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	IN ACCORDANCE WITH OUR BY-LAWS, THE AAA BOARD MAY APPOINT UP TO 4 TRUSTEES TO THE FOUNDATION'S BOARD OF TRUSTEES EACH YEAR IN ADDITION, AAA HAS TWO EXOFFICIO POSITIONS ON THE ON THE FOUNDATION'S BOARD OF TRUSTEES

	Return Reference	Explanation
WHO PA	ORM 990, AGE 6, ART VI, INE 9	DONALD R GAGNON ONE RIVER PLACE WILMINGTON, DE 19801 CHRIS BAUER 25 WEST MAIN STREET MADISON, WI 53703 AVERY BROWN 3333 FAIRVIEW RD COSTA MESA, CA 92626 MARK BROWN 1000 AAA DRIVE HEATHROW, FL 32746 WAY NE BUDD 53 EXCHANGE STREET BOSTON, MA 02109 H THOMAS CHESTNUT 100 INTERNATIONAL DR BUFFALO, NY 14221 DENNIS J CROSSLEY 1415 KELLUM PL GARDEN CITY, NY 11530 ROBERT DARBELNET 1000 AAA DRIVE HEATHROW, FL 32746 ANTHONY J DENOVELLIS 4100 E ARKANSAS AVENUE DENVER, CO 80222 CAROL H ORMOND 5366 VIRGINIA BEACH BOULEVARD VIRGINIA BEACH, VA 23462 MARSHALL DONEY 1000 AAA DRIVE HEATHROW, FL 32746 JAMES H DORAN 500 MONTGOMERY STREET ALEXANDRIA, VA 22314 TERRY R FARIAS 3750 GUION ROAD INDIANAPOLIS, IN 46222 JAMES PHELPS 112 RAILROAD STREET SCHENECTADY, NY 12305 TIMOTHY R GEORGEOFF 2151 THURSTON DR OTTAWA, CA K1G6C9 FREDERICK L GRUEL 1 HANOVER ROAD FLORHAM PARK, NJ 07932 CAROL A SCOTT 700 LAUREL OAK RD VOORHEES, NJ 08043 RICHARD S HAMILTON 5900 BAUM BLVD PITTSBURGH, PA 15206 KENNETH A JOHNSON 14980 CHATEAU VILLAGE DRIVE CHESTERFIELD, MO 63017 ANTONIA HERNANDEZ 445 S FIFUEROA STREET, SUITE 3400 LOS ANGELES, CA 90071 RICHARD JACOBS 3701 VESTAL PARKWAY EAST, SUITE 9 VESTAL, NY 13850 JOHN TOMLIN 1515 N WESTSHORE BLVD TAMPA, FL 33607 MICHAEL TULLY 3144 N 7TH AVENUE PHOENIX, AZ 85067 CHRIS E MENSING 150 CAPITAL DRIVE WEST SPRINGFIELD, MA 01089 KATHLEEN MARVASO 1000 AAA DRIVE MS DHEATHROW, FL 32746 DAVID E PARSONS 6600 AAA DRIVE CHARLOTTE, NC 28212 PAUL PELLETIER 444 BOUVIER ST QUEBEC, CA G2J1E3 CHARLES H PODOWSKI 1 AUTO CLUB DR DEARBORN, MI 48126 JOHN D PORTER 600 SW MARKET STREET PORTLAND, OR 97201 EARLE B SEELEY 49 ORCHARD HILL ROAD NORTH ANDOVER, MA 01845 MARK A SHAW 1100 ROYAL LITTLE DRIVE PROVIDENCE, RI 02904 MARK H SHAW 90 E WILSON BRIDGE RD WORTHINGTON, OH 43085 TIM SHEARMAN 500-1545 CARLING AVENUE OTTAWA, CA K128P9 FRANCES SMITH 6706 AMHERST DRIVE HOSCHTON, GA 30548 ROBERT SHARP 1515 NORTH WESTSHORE BLVD TAMPA, FL 33607 PAUL PETRILLO 10114 WATERBROOK LANE CHARLOTTE, NC 28277 JOHN SCHAFFER 1000 AAA DRIVE MS 34 HEATHROW, FL 3274

ldentifier	Return Reference	Explanation					
ORGANIZATION'S PROCESS USED TO	FORM 990, PAGE 6, PART	THE FORM WAS REVIEWED BY THE FOUNDATION'S AUDIT COMMITTEE					
REVIEW FORM 990	VI, LINE 11B	AND BOARD OF TRUSTEES PRIOR TO SUBMISSION					

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ANNUALLY, THE BOARD OF TRUSTEES AND AAA FOUNDATION FOR TRAFFIC SAFETY (FOUNDATION) ASSOCIATES ARE ASKED TO READ THE FOUNDATION'S POLICY ON POTENTIAL CONFLICTS OF INTEREST AND EXECUTE A FORM SIGNIFY ING THEY HAVE AND IDENTIFY ING ANY POSSIBLE CONFLICT OF INTEREST THE FOUNDATION'S PRESIDENT AND CEO, AND SENIOR FOUNDATION MANAGERS KEEP THIS POLICY IN MIND WHEN ALL POTENTIAL CONTRACTS ARE BEING NEGOTIATED

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE PRESIDENT AND CEO'S COMPENSATION IS DETERMINED BY THE FOUNDATION CHARIMAN BASED ON INPUT FROM AAA HUMAN RESOURCES AND INDEPENDENT MARKET

ldentifier	Return Reference	Explanation
	l '	OTHER KEY FOUNDATION ASSOCIATES COMPENSATION IS RECOMMENDED BY THE FOUNDATION'S PRESIDENT AND CEO BASED ON INDIVIDUAL POSITION DESCRIPTIONS, MARKET COMPARABILITY DATA PROVIDED BY AAA NATIONAL AND INDEPENDENT SOURCES AND APPROVED BY THE FOUNDATION'S ADMINISTRATIVE COMMITTEE DURING REVIEW OF THE PROPOSED ANNUAL BUDGET

ldentifier	Return Reference	Explanation
STATES WHERE COPY OF RETURN IS FILED		MASSACHUSETTS, MARYLAND, MAINE, MICHIGAN, MINNESOTA, MISSOURI, MISSISSIPPI, NORTH CAROLINA, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, TEXAS, UTAH, VIRGINIA, WASHINGTON, WISCONSIN, WEST VIRGINIA

ldentifier	Return Reference	Explanation					
GOVERNING DOCUMENTS	FORM 990, PAGE 6, PART	GOVERNANCE DOCUMENTS AVAILABILITY IS NOTED ON THE AAA					
DISCLOSURE EXPLANATION	VI, LINE 19	FOUNDATION FOR TRAFFIC SAFETY'S WEBPAGE					

ldentifier	Return Reference	Explanation						
OTHER EXPENSES	FORM 990, PART IX, LINE 24E	PARENT COACHING 98,959 GENERAL OUTREACH 78,164 GENERAL RESEARCH 50,999 SAFETY CULTURE INDEX 49,370 LEARNER STAGE OF GDL 46,515 FUNDRAISING 37,295 EVAL NOTEWORTHY INITIATIV 35,000 PUBLIC EDN & GIVEAWAYS 21,115 DEPRECIATION-FURN & FIXT 16,000 TELEPHONE 6,898 DUES & SUBSRIPTIONS 3,959 AUTO OPERATING EXPENSES 3,662 IRAP PHASE I 1,300 REPAIR & MAINTENANCE 744 LOCAL TAXES 157 BAS DEBT (RECOVERY) -1,910						

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SCHEDULE R (Form 990)

### **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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization AAA FOUNDATION FOR TRAFFIC SAFETY					dentification number		
Part I Identification of Disregarded Entities (Compl	ete ıf the organızatı	on answered "Yes	" on Form 990, Pa	52-07943 art IV, line 33.)	68		
(a)  Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t		ıf the organizatio	n answered "Yes"	on Form 990, P	art IV, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu (if section 501(c)(3)		(g) Section 512(b) controlled organizatio	
(1) AMERICAN AUTOMOBILE ASSOCIATION						Yes	No
1000 AAA DRIVE HEATHROW, FL 32746 53-0025420	BOARD MEMB	FL	501 C		7 N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruction	ons for Form 990.	Cat No 5	0135Y	•	Schedule R (F	orm 990)	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		Disproprtionate allocations? amo		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	<b>(k)</b> Percentage ownership
							Yes	No		Yes	No			
												i		

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>(b)</b> Рптагу activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total Income	(g) Share of end-of-year assets	<b>(h)</b> Percentage ownership

(6)

Part	Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pai	t IV, line 34, 35, 3	35A, or 36.)		
N	ote. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
<b>1</b> Dur	ng the tax year, did the orgranization engage in any of the following transactions with one or more related org	anızatıons lısted ın Part	s II-IV?			
a F	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			<b>1</b> a		No
<b>b</b> (	ift, grant, or capital contribution to related organization(s)			1b		No
<b>c</b> 0	ft, grant, or capital contribution from related organization(s)			1c		No
d L	pans or loan guarantees to or for related organization(s)			1d		No
e L	pans or loan guarantees by related organization(s)			1e		No
f S	ale of assets to related organization(s)			<b>1</b> f		No
g F	urchase of assets from related organization(s)			<b>1</b> g		No
h E	xchange of assets with related organization(s)			1h		No
i L	ase of facilities, equipment, or other assets to related organization(s)			<b>1</b> i		No
j L	ase of facilities, equipment, or other assets from related organization(s)			<b>1</b> j		No
<b>k</b> F	erformance of services or membership or fundraising solicitations for related organization(s)			1k		No
I P	rformance of services or membership or fundraising solicitations by related organization(s)			11		No
m S	naring of facilities, equipment, mailing lists, or other assets with related organization(s)			1m		No
n S	naring of paid employees with related organization(s)			1n		No
<b>o</b> F	eimbursement paid to related organization(s) for expenses			10		No
рΕ	eimbursement paid by related organization(s) for expenses			<b>1</b> p		No
q (	ther transfer of cash or property to related organization(s)			<b>1</b> q		No
r C	ther transfer of cash or property from related organization(s)			1r		No
<b>2</b> I	the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relatı	onships and transact	ion thresholds		
	(a)	(b)	(c)	(d)		
	Name of other organization	Transaction type(a-r)	Amount involved	Method of determi involved		unt
(1)						
2)						
2)						
3)						
4)						
•,						
5)						
,				I		

#### 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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section to 501(c)(3) organizations?		partners section to 501(c)(3) organizations?		Predominant come(related, unrelated, xcluded from tax under sections 512-514)  Are all partners section 501(c)(3) organizations?		(f) Share of total income	partners Share of total income assets amount in 20 of Schedu (Form 10		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	<b>(k)</b> Percentage ownership
			,	Yes	No			Yes	No		Yes	No								
				·																

Schedule R (Form 990) 2011

### Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

# Software ID: Software Version:

**EIN:** 52-0794368

Name: AAA FOUNDATION FOR TRAFFIC SAFETY

### Form 990, Special Condition Description:

### **Special Condition Description**

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

<b>(A)</b> Name and Tıtle	(B) A verage hours	(C) Position (check all that apply)						<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other	
	per week	Individual trustae or director	Institutional Trustee	Office		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	
DONALD R GAGNON TRUSTEE	1 00	Х						0	0	0	
CHRIS BAUER TRUSTEE	1 00	Х						0	0	0	
AVERY BROWN TRUSTEE	1 00	Х						0	0	0	
MARK BROWN TRUSTEE	1 00	Х						0	0	0	
WAYNE BUDD TRUSTEE	1 00	Х						0	0	0	
HTHOMAS CHESTNUT TRUSTEE	1 00	Х						0	0	0	
DENNIS J CROSSLEY TRUSTEE	1 00	Х						0	0	0	
ROBERT DARBELNET TRUSTEE	1 00	Х						0	0	0	
ANTHONY J DENOVELLIS TRUSTEE	1 00	Х						0	0	0	
CAROL H ORMOND TRUSTEE	1 00	Х						0	0	0	
MARSHALL DONEY TRUSTEE	1 00	Х						0	0	0	
JAMES H DORAN TRUSTEE	1 00	Х						0	0	0	
TERRY RFARIAS TRUSTEE	1 00	Х						0	0	0	
JAMES PHELPS TRUSTEE	1 00	Х						0	0	0	
TIMOTHY R GEORGEOFF TRUSTEE	1 00	Х						0	0	0	
FREDERICK LGRUEL TRUSTEE	1 00	Х						0	0	0	
CAROLA SCOTT TRUSTEE	1 00	Х						0	0	0	
RICHARD S HAMILTON TRUSTEE	1 00	Х						0	0	0	
KENNETH AJOHNSON TRUSTEE	1 00	Х						0	0	0	
ANTONIA HERNANDEZ TRUSTEE	1 00	Х						0	0	0	
RICHARD JACOBS TRUSTEE	1 00	Х						0	0	0	
JOHN TOMLIN TRUSTEE	1 00	Х						0	0	0	
MICHAEL TULLY TRUSTEE	1 00	Х						0	0	0	
CHRIS EMENSING TRUSTEE	1 00	Х						0	0	0	
KATHLEEN MARVASO TRUSTEE	1 00	Х						0	0	0	

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> 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
DAVID E PARSONS TRUSTEE	1 00	Х						0	0	0
PAUL PELLETIER TRUSTEE	1 00	Х						0	0	0
CHARLES H PODOWSKI TRUSTEE	1 00	Х						0	0	0
JOHN DPORTER TRUSTEE	1 00	Х						0	0	0
EARLE B SEELEY TRUSTEE	1 00	Х						0	0	0
MARK A SHAW TRUSTEE	1 00	Х						0	0	0
MARK H SHAW TRUSTEE	1 00	Х						0	0	0
TIM SHEARMAN TRUSTEE	1 00	Х						0	0	0
JOHN P KISSINGER PRESIDENT/CE	40 00			х				231,199	0	22,000
FRANCES SMITH SECRETARY	2 00			Х				0	0	0
ROBERT SHARP VICE CHAIRMA	2 00			Х				0	0	0
PAUL PETRILLO CHAIRMAN	2 00			Х				0	0	0
JOHN SCHAFFER TREASURER	2 00			х				0	0	0