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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)	OMB No 1545-0047 <div> <div>2012</div> <div>Open to Public Inspection</div> </div>
	▶ The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization AMERICAN HOTEL & LODGING ASSOCIATION		D Employer identification number 13-0432130
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 1201 NEW YORK AVENUE NW NO 600	Room/suite	E Telephone number (202) 289-3100
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005		G Gross receipts \$ 9,716,628
	F Name and address of principal officer KATHERINE LUGAR 1201 NEW YORK AVENUE NW NO 600 WASHINGTON, DC 20005		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.AHLA.COM			




K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <input type="checkbox"/>	L Year of formation 1937	M State of legal domicile NY
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Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE ASSOCIATION IS THE VOICE OF THE LODGING INDUSTRY, AN ADVOCATE, AND RESOURCE FOR THE SECTOR		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	76
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	75
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	32
	6 Total number of volunteers (estimate if necessary)	6	76
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	289,045	419,837
	9 Program service revenue (Part VIII, line 2g)	7,908,399	8,191,142
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	133,976	128,294
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	151,602	179,806
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,483,022	8,919,079
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,035,589	1,487,120
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,786,659	3,737,776
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,780,715	3,723,596
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	8,602,963	8,948,492
	19 Revenue less expenses Subtract line 18 from line 12	-119,941	-29,413
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	6,558,563	6,514,408
	21 Total liabilities (Part X, line 26)	2,942,682	2,797,073
	22 Net assets or fund balances Subtract line 21 from line 20	3,615,881	3,717,335

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	*****			2013-11-12	
	Signature of officer			Date	
	KATHERINE LUGAR PRESIDENT & CEO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name KAREN GRIES		Preparer's signature		Date
	Check <input type="checkbox"/> if self-employed			PTIN P00078514	
	Firm's name  CLIFTONLARSONALLEN LLP			Firm's EIN  41-0746749	
	Firm's address  4250 N FAIRFAX DRIVE SUITE 1020 ARLINGTON, VA 22203			Phone no (571) 227-9500	

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ ☒

1 Briefly describe the organization's mission

TO SERVE THE LODGING INDUSTRY BY PROVIDING REPRESENTATION AT THE NATIONAL LEVEL IN GOVERNMENTAL AFFAIRS, EDUCATION, RESEARCH, COMMUNICATION, DIVERSITY AND VALUE-ADDED SERVICES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ **Yes** ☒ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ **Yes** ☒ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

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

GOVERNMENT AFFAIRS KEY ISSUES THE ASSOCIATION FOCUSED ON DURING THE YEAR INCLUDE PASSING THE TRAVEL PROMOTION ACT, ADA, H2B VISA RELIEF, AND POSSIBLE ONLINE TRAVEL LEGISLATION, AND INCREASING NUMBER OF VISA WAIVER COUNTRIES

4b

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

INDUSTRY RELATIONS IN ADDITION TO A COMPREHENSIVE ONLINE GREEN RESOURCE AREA, AH&LA COORDINATED AN INDUSTRY CHALLENGE TO GREEN OPERATIONS, EXPANDED AND ADDED TO THE AH&LA GREEN GUIDELINES, AND SECURED A MEMBER DISCOUNT FOR GREEN KEY GLOBAL IT ALSO COORDINATED BEDBUG, ADA AND HEALTHCARE SEMINARS

4c

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

UNDER 30 GATEWAY THE UNDER 30 GATEWAY IS AH&LA'S FIRST-EVER PROGRAM DEDICATED TO ADDRESSING THE PERSONAL AND PROFESSIONAL NEEDS OF YOUNG HOSPITALITY PROFESSIONALS GATEWAY MEMBERSHIP IS OPEN TO ALL HOSPITALITY PROFESSIONALS WORKING IN ANY CAPACITY

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

COMMITTEES AND CONTRIBUTIONS THE ASSOCIATION CONTINUED TO MAKE SIGNIFICANT FINANCIAL CONTRIBUTIONS IN THE AMOUNT OF \$1.1M FOR INDUSTRY RELATED SCHOLARSHIPS, RESEARCH AND EDUCATION RELATED PUBLICATION DEVELOPMENT WOMEN IN LODGING (WIL) CONNECT WIL CONNECT IS EXCLUSIVELY FOR FEMALE HOSPITALITY PROFESSIONALS TO CONNECT WITH THE INDUSTRY'S TOP PROFESSIONALS AND GAIN CAREER MOMENTUM WIL FUELS THE MISSION TO PROMOTE WOMEN'S LEADERSHIP INTO EXECUTIVE POSITIONS WITHIN THE LODGING INDUSTRY AND CONTRIBUTE TO BUSINESS DEVELOPMENT EFFORTS, INCLUDING WOMEN'S MARKETS MEMBERSHIP IS FREE TO ALL WOMEN EMPLOYED AT AH&LA MEMBER ORGANIZATIONS IT WORKED TOWARD CREATING WIL CHAPTERS IN EVERY PARTNER STATE STUDENT CHAPTERS LAUNCHED IN 2009, THERE ARE NOW 14 OFFICIAL CHAPTERS

4d

Other program services (Describe in Schedule O)

















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

4e

Total program service expenses ▶

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	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 		No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		
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 	Yes	
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 		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 		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 		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 V 		No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	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 		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 		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 	Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	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 	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		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, Parts I and IV		No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		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		No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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? <i>If "Yes," complete Schedule L, Part I</i>	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	44
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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	32
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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.

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	76	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	75	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	Yes
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
10b	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 purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	No
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
16b	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	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
19	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 during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization THE ORGANIZATION 1201 NEW YORK AVENUE NW 600 WASHINGTON, DC (202) 289-3100

Check if Schedule O contains a response to any question in this Part VII ☐

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** 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 organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							1,973,400	0	349,710	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶10

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
OUTSOURCE PARTNERS INTERNATIONAL 280 PARK AVENUE 38TH FLOOR NEW YORK NY 10017	ACCOUNTING/FINANCE	659,640
BURSON - MARSTELLER PO BOX 101880 ATLANTA GA 30392	LEGAL	280,605
MCDERMOTT WILL & EMERY PO BOX 7247-6755 PHILADELPHIA PA 19170	LEGAL	168,777
SEYFARTH SHAW LLP 3807 COLLECTIONS CENTER DRIVE CHICAGO IL 60693	LEGAL	135,886
KORN & FERRY INTERNATIONAL 1700 K STREET NW SUITE 700 WASHINGTON DC 20006	RECRUITING	101,975

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►5

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues	1b			
	c	Fundraising events	1c			
	d	Related organizations	1d			
	e	Government grants (contributions)	1e			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	419,837		
	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f		419,837		
Program Service Revenue	2a	MEMBERSHIP DUES	Business Code 900099	4,842,315	4,842,315	
	b	CONFERENCES	900099	2,411,678	2,411,678	
	c	GOVERNMENT AFFIARS	900099	538,245	538,245	
	d	CONFERENCE SPONSORSHIP	900099	290,875	290,875	
	e	LEGISLATIVE READINESS	900099	108,029	108,029	
	f	All other program service revenue				
	g	Total. Add lines 2a-2f		8,191,142		
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		105,447	
4		Income from investment of tax-exempt bond proceeds . .				
5		Royalties		175,862		175,862
6a		(i) Real				
		(ii) Personal				
		Gross rents				
		Less rental expenses				
b		339,834				
c		Rental income or (loss)				
d		Net rental income or (loss)		3,912		3,912
7a		(i) Securities				
		(ii) Other				
		Gross amount from sales of assets other than inventory				
		Less cost or other basis and sales expenses				
b		457,715		0		
c		Gain or (loss)				
d		Net gain or (loss)		22,847		22,847
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18				
a						
b		Less direct expenses				
c	Net income or (loss) from fundraising events . .					
9a	Gross income from gaming activities See Part IV, line 19					
a						
b	Less direct expenses					
c	Net income or (loss) from gaming activities . .					
10a	Gross sales of inventory, less returns and allowances .					
a						
b	Less cost of goods sold					
c	Net income or (loss) from sales of inventory . .					
	Miscellaneous Revenue	Business Code				
11a	MISCELLANEOUS	900099	32		32	
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d		32			
12	Total revenue. See Instructions		8,919,079	8,191,142	0	308,100

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).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 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.	1,487,120			
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.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	1,431,070			
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.	1,862,018			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	98,035			
9	Other employee benefits.	154,555			
10	Payroll taxes.	192,098			
11	Fees for services (non-employees):				
a	Management.	80,000			
b	Legal.	156,624			
c	Accounting.	26,913			
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	20,704			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	231,419			
12	Advertising and promotion.	73,478			
13	Office expenses.	294,507			
14	Information technology.				
15	Royalties.				
16	Occupancy.	839,401			
17	Travel.	284,607			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	658,592			
20	Interest.	2,242			
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	58,762			
23	Insurance.	45,619			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	GOVERNMENT AFFAIRS	685,079			
b	TEMP AGENCY	437,521			
c	SUBSCRIPTION AND DUES	51,551			
d	REPAIRS AND MAINTENANCE	33,352			
e	All other expenses	-256,775			
25	Total functional expenses. Add lines 1 through 24e.	8,948,492			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X ☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		220,459	1	425,792
	2	Savings and temporary cash investments		1,946,186	2	1,435,832
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		910,025	4	1,078,064
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		73,103	9	127,273
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,222,829		
	b	Less accumulated depreciation	10b	1,098,622	10c	124,207
	11	Investments—publicly traded securities		2,820,576	11	2,863,483
	12	Investments—other securities See Part IV, line 11		26,366	12	26,366
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		385,001	15	433,391
	16	Total assets. Add lines 1 through 15 (must equal line 34)		6,558,563	16	6,514,408
Liabilities	17	Accounts payable and accrued expenses		837,538	17	887,081
	18	Grants payable			18	
	19	Deferred revenue		1,573,120	19	1,430,806
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties		24,391	24	9,969
	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 D		507,633	25	469,217
	26	Total liabilities. Add lines 17 through 25		2,942,682	26	2,797,073
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets		3,350,446	27	3,472,078
	28	Temporarily restricted net assets		265,435	28	245,257
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		3,615,881	33	3,717,335
	34	Total liabilities and net assets/fund balances		6,558,563	34	6,514,408

Part XI Reconciliation of Net Assets

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	8,919,079
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,948,492
3	Revenue less expenses Subtract line 2 from line 1	3	-29,413
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,615,881
5	Net unrealized gains (losses) on investments	5	130,867
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,717,335

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 13-0432130

Name: AMERICAN HOTEL & LODGING ASSOCIATION

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH A MCINERNEY PRESIDENT & CHIEF EXECUTIVE OFFICER	26 00 14 00	X		X				448,552	0	52,375
NANCY JOHNSON CHA CHAIR OF THE BOARD	1 00 2 00	X		X				0	0	0
RONALD L VLASIC VICE-CHAIR	1 00 0 00	X		X				0	0	0
JOHN FITZPATRICK SECRETARY/TREASURER	1 00 0 00	X		X				0	0	0
JOHN R CAMPBELL IMMEDIATE PAST CHAIR	1 00 2 00	X		X				0	0	0
PENNIE BEACH CHA DIRECTOR	1 00 0 00	X						0	0	0
RENE BOSKOFF DIRECTOR	1 00 0 00	X						0	0	0
SHANNON BOWLES DIRECTOR	1 00 0 00	X						0	0	0
BANKS BROWN ESQ DIRECTOR	1 00 0 00	X						0	0	0
JEFFERY BROWN DIRECTOR	1 00 0 00	X						0	0	0
MARK BURDEN DIRECTOR	1 00 0 00	X						0	0	0
MAYUR CHHEDA CPA CHA CHO DIRECTOR	1 00 0 00	X						0	0	0
PATTI COLLEY IOM CMP DIRECTOR	1 00 0 00	X						0	0	0
BRUCE CRAUL DIRECTOR	1 00 0 00	X						0	0	0
JON DAVIDSON CHA DIRECTOR	1 00 0 00	X						0	0	0
VIJAY DANDAPANI DIRECTOR	1 00 0 00	X						0	0	0
KATIE DOHERTY DIRECTOR	1 00 0 00	X						0	0	0
LYNNE DOUGHTERY DIRECTOR	1 00 0 00	X						0	0	0
MICHAEL DOWNING CHA DIRECTOR	1 00 0 00	X						0	0	0
RENEE DRAVES DIRECTOR	1 00 0 00	X						0	0	0
JOHN EASTMAN DIRECTOR	1 00 0 00	X						0	0	0
GEOFF FEINGOLD MHS DIRECTOR	1 00 0 00	X						0	0	0
GEORGE FISCHER DIRECTOR	1 00 0 00	X						0	0	0
WILLIAM BILL FOLKERTS DIRECTOR	1 00 0 00	X						0	0	0
ROBERT GILBERT CHME CHA DIRECTOR	1 00 0 00	X						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 per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RAMESH GOKAL DIRECTOR	1 00 0 00	X						0	0	0
TAMMY GRIFFIN DIRECTOR	1 00 0 00	X						0	0	0
K WILLIAM GUNTHER MS CHA DIRECTOR	1 00 0 00	X						0	0	0
TERRI HAACK DIRECTOR	1 00 0 00	X						0	0	0
ROBERT HABEEB DIRECTOR	1 00 0 00	X						0	0	0
DALE HANEY CHA DIRECTOR	1 00 0 00	X						0	0	0
PHIL HICKEY DIRECTOR	1 00 0 00	X						0	0	0
ALEXANDRA JARITZ DIRECTOR	1 00 0 00	X						0	0	0
BRIAN JOHNSON DIRECTOR	1 00 0 00	X						0	0	0
SCOTT JOSLOVE DIRECTOR	1 00 0 00	X						0	0	0
MO KENNEDY MHS DIRECTOR	1 00 0 00	X						0	0	0
PAUL KIRWIN DIRECTOR	1 00 0 00	X						0	0	0
JEFF KMIEC DIRECTOR	1 00 0 00	X						0	0	0
BILL KOHL DIRECTOR	1 00 0 00	X						0	0	0
SCOTT KRAUSE DIRECTOR	1 00 0 00	X						0	0	0
BILL LIEDHOLM DIRECTOR	1 00 0 00	X						0	0	0
THOMAS J LOUGHLIN DIRECTOR	1 00 0 00	X						0	0	0
SCOTT LUNT CHA DIRECTOR	1 00 0 00	X						0	0	0
ANN MALETZKE DIRECTOR	1 00 0 00	X						0	0	0
PEDRO MANDOKI DIRECTOR	1 00 0 00	X						0	0	0
PETER MASON CHA DIRECTOR	1 00 0 00	X						0	0	0
LYNN MOHRFELD CAE IOM DIRECTOR	1 00 0 00	X						0	0	0
PEGGY MOSLEY DIRECTOR	1 00 0 00	X						0	0	0
JOHN MUNRO DIRECTOR	1 00 0 00	X						0	0	0
DAN NADEAU DIRECTOR	1 00 0 00	X						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 per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GLENN NAKAMURA CHA DIRECTOR	1 00 0 00	X						0	0	0
AMAR PANDEY DIRECTOR	1 00 0 00	X						0	0	0
PERRY PATEL DIRECTOR	1 00 0 00	X						0	0	0
PRAT PATEL DIRECTOR	1 00 0 00	X						0	0	0
VIJAY PATEL DIRECTOR	1 00 0 00	X						0	0	0
JOHN PHARR DIRECTOR	1 00 0 00	X						0	0	0
KEITH PIERCE CHA DIRECTOR	1 00 0 00	X						0	0	0
RON PINCUS DIRECTOR	1 00 0 00	X						0	0	0
DAN PIRRALLO DIRECTOR	1 00 0 00	X						0	0	0
TRISHA PUGAL CAE DIRECTOR	1 00 0 00	X						0	0	0
LORI E RALEIGH DIRECTOR	1 00 0 00	X						0	0	0
BETH B RISINGER DIRECTOR	1 00 0 00	X						0	0	0
STEVE ROBERTS DIRECTOR	1 00 0 00	X						0	0	0
MARK RUCKER DIRECTOR	1 00 0 00	X						0	0	0
GENE RUPNIK DIRECTOR	1 00 0 00	X						0	0	0
TED SCHROEDER DIRECTOR	1 00 0 00	X						0	0	0
JOHN SHAKE CHA DIRECTOR	1 00 0 00	X						0	0	0
ROBERT E SLATER CHA DIRECTOR	1 00 0 00	X						0	0	0
BOB SMITH DIRECTOR	1 00 0 00	X						0	0	0
JIM SPROUSE CAE DIRECTOR	1 00 0 00	X						0	0	0
STEVE WAHRlich DIRECTOR	1 00 0 00	X						0	0	0
ROBERT WATSON DIRECTOR	1 00 0 00	X						0	0	0
FRANK J WELTON DIRECTOR	1 00 0 00	X						0	0	0
CHANDLER WIENS-THAYER DIRECTOR	1 00 0 00	X						0	0	0
RICK WINN DIRECTOR	1 00 0 00	X						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 per week (list any hours for related organizations below dotted line)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRANK I WOLFE CAE DIRECTOR	1 00 0 00	X						0	0	0
ROBERT WOOLRIDGE DIRECTOR	1 00 0 00	X						0	0	0
MARLENE M COLUCCI EXECUTIVE VICE PRESIDENT FOR PUBLIC POLICY	40 00 0 00			X				312,903	0	34,714
PAM INMAN EXECUTIVE VICE PRESIDENT	40 00 0 00			X				252,977	0	28,674
JOORI JEON EXECUTIVE VICE PRESIDENT & CHIEF FINANCIAL OFFICER	26 00 14 00			X				252,993	0	47,881
LISA GREENHAUS VICE PRESIDENT, GOVT AFFAIRS	40 00 0 00					X		122,989	0	38,420
KEVIN L MAHER SENIOR VICE PRESIDENT, GOVT AFFAIRS	40 00 0 00					X		138,612	0	39,644
SHAWN MCBURNEY SENIOR VICE PRESIDENT, GOVT AFFAIRS	40 00 0 00					X		175,138	0	42,641
SUSAN K MILES SENIOR VICE PRESIDENT, INDUSTRY RELATIONS	40 00 0 00					X		136,695	0	26,167
KATHRYN C POTTER SENIOR VICE PRESIDENT, MKTNG & COMMUN	40 00 0 00					X		132,541	0	39,194

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

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

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

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

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

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

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

Name of the organization AMERICAN HOTEL & LODGING ASSOCIATION	Employer identification number 13-0432130
--	--

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

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ 0
3	Volunteer hours	0

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

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

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

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

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i.			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912.			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

1	Dues, assessments and similar amounts from members	1	4,842,315
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	828,892
b	Carryover from last year	2b	
c	Total	2c	828,892
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	677,924
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	150,968
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
AMERICAN HOTEL & LODGING ASSOCIATION

Employer identification number
13-0432130

Part I

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶_____

4

Number of states where property subject to conservation easement is located ▶_____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶_____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b

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

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		368,255	299,224	69,031
d Equipment		854,574	799,398	55,176
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				124,207

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b		4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	AH&LA IS EXEMPT FROM THE PAYMENT OF INCOME TAXES ON ITS EXEMPT ACTIVITIES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE. THE AMERICAN HOTEL ASSOCIATION DIRECTORY CORPORATION IS A FOR-PROFIT CORPORATION SUBJECT TO FEDERAL AND STATE INCOME TAX. AH&LA EVALUATED ITS TAX POSITION AND DETERMINED THAT ITS POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED ON EXAMINATION. AH&LA'S 2009 THROUGH 2011 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS.

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DLN: 93493318028753

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
AMERICAN HOTEL & LODGING ASSOCIATION

Employer identification number
13-0432130

Part I

General Information on Grants and Assistance

1

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 the grants or assistance?

Yes

No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION 1201 NEW YORK AVENUE NW SUITE 600 WASHINGTON,DC 20005	13-6095316	501(C)(3)	664,699		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(2) EDUCATIONAL INSTITUTE OF THE AMERICAN HOTEL & LODGING ASSOCIATION 800 NORTH MAGNOLIA AVENUE SUITE 300 300 ORLANDO,FL 32803	38-1557821	501(C)(3)	664,699		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(3) DEMOCRATIC GOVERNORS ASSOCIATION 1401 K STREET NW WASHINGTON,DC 20005	52-1304889	527	22,500		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(4) COALITION FOR DEMOCRATIC WORKFORCEASSOCIATED BUILDERS AND CONTRACTORS 4250 NORTH FAIRFAX DRIVE NINTH FLOOR ARLINGTON,VA 22203	52-0579380	501(C)(6)	50,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(5) IMMIGRATIONWORKS USA 737 EIGHTH STREET SE SUITE 201 WASHINGTON,DC 20003	26-2033929	501(C)(3)	6,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(6) INTERNATIONAL SOCIETY OF HOTEL ASSOCIATION EXECUTIVES 374 MARLBOROUGH STREET BOSTON,MA 02115	52-1228591	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(7) NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS 1325 G STREET NW SUITE 1000 WASHINGTON,DC 20005	53-0188893	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(8) NEW YORK UNIVERSITY 7 EAST 12TH STREET FOURTH FLOOR NEW YORK,NY 10003	13-5562308	501(C)(3)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(9) US CHAMBER OF COMMERCE 1615 H STREET NW WASHINGTON,DC 20062	53-0456720	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(10) CAPITAL HILL PUBLISHING CORPORATION 1625 K STREET NW SUITE 900 WASHINGTON,DC 20006	11-3217916		30,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
(11) TEXAS HOTEL AND LODGING ASSOCIATION 1701 WEST AVENUE AUSTIN,TX 787011036	74-2543670	501(C)(6)	5,000				GENERAL PROGRAMS AND INITIATIVES
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							4
3 Enter total number of other organizations listed in the line 1 table							7

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

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

Part IV Supplemental Information.		
Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information		
Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE ORGANIZATION'S CFO IS ALSO PRESIDENT OF AH&LEF AND CFO OF AH&LEI AND THEREFORE IS ABLE TO MONITOR HOW AND WHERE SUCH GRANTS ARE DISBURSED THROUGH EACH OF THE RELATED ORGANIZATIONS' PROGRAMS EACH OF THE RECIPIENT ORGANIZATIONS BUDGET THE AH&LA GRANT FUNDING WHICH DETAILS HOW THE FUNDS ARE TO BE USED

Software ID:

Software Version:

EIN: 13-0432130

Name: AMERICAN HOTEL & LODGING ASSOCIATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION1201 NEW YORK AVENUE NW SUITE 600 WASHINGTON,DC 20005	13-6095316	501(C)(3)	664,699		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
EDUCATIONAL INSTITUTE OF THE AMERICAN HOTEL & LODGING ASSOCIATION800 NORTH MAGNOLIA AVENUE SUITE 300 300 ORLANDO,FL 32803	38-1557821	501(C)(3)	664,699		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
DEMOCRATIC GOVERNORS ASSOCIATION1401 K STREET NW WASHINGTON,DC 20005	52-1304889	527	22,500		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
COALITION FOR DEMOCRATIC WORKFORCEASSOCIATED BUILDERS AND CONTRACTORS4250 NORTH FAIRFAX DRIVE NINTH FLOOR ARLINGTON,VA 22203	52-0579380	501(C)(6)	50,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
IMMIGRATIONWORKS USA 737 EIGHTH STREET SE SUITE 201 WASHINGTON,DC 20003	26-2033929	501(C)(3)	6,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
INTERNATIONAL SOCIETY OF HOTEL ASSOCIATION EXECUTIVES374 MARLBOROUGH STREET BOSTON,MA 02115	52-1228591	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS1325 G STREET NW SUITE 1000 WASHINGTON,DC 20005	53-0188893	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
NEW YORK UNIVERSITY7 EAST 12TH STREET FOURTH FLOOR NEW YORK,NY 10003	13-5562308	501(C)(3)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
US CHAMBER OF COMMERCE 1615 H STREET NW WASHINGTON,DC 20062	53-0456720	501(C)(6)	5,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
CAPITAL HILL PUBLISHING CORPORATION1625 K STREET NW SUITE 900 WASHINGTON,DC 20006	11-3217916		30,000		N/A	N/A	GENERAL PROGRAMS AND INITIATIVES
TEXAS HOTEL AND LODGING ASSOCIATION 1701 WEST AVENUE AUSTIN,TX 787011036	74-2543670	501(C)(6)	5,000				GENERAL PROGRAMS AND INITIATIVES

Schedule J (Form 990) <div>Department of the Treasury Internal Revenue Service</div>	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.	OMB No 1545-0047
		2012
		Open to Public Inspection

Name of the organization AMERICAN HOTEL & LODGING ASSOCIATION	Employer identification number 13-0432130
--	--

Part I	Questions Regarding Compensation		Yes	No	
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items				
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>				
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III				
	<div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>				
	4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
	<div>a Receive a severance payment or change-of-control payment?</div> <div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div> <div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div>	4a		No	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4b		No	
		4c		No	
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.				
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of	5a			
	<div>a The organization?</div> <div>b Any related organization?</div>	5b			
6	If "Yes," to line 5a or 5b, describe in Part III				
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of	6a			
	<div>a The organization?</div> <div>b Any related organization?</div>	6b			
7	If "Yes," to line 6a or 6b, describe in Part III				
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7			
8	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III				
	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9			

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)JOSEPH A MCINERNEY PRESIDENT & CHIEF EXECUTIVE OFFICER	(i) (ii)	372,330 0	55,849 0	20,373 0	15,000 0	37,375 0	500,927 0	0 0
(2)MARLENE M COLUCCI EXECUTIVE VICE PRESIDENT FOR PUBLIC	(i) (ii)	312,603 0	0 0	300 0	15,000 0	19,714 0	347,617 0	0 0
(3)PAM INMAN EXECUTIVE VICE PRESIDENT	(i) (ii)	250,585 0	0 0	2,392 0	11,702 0	16,972 0	281,651 0	0 0
(4)JOORI JEON EXECUTIVE VICE PRESIDENT & CHIEF FIN	(i) (ii)	252,585 0	0 0	408 0	15,000 0	32,881 0	300,874 0	0 0
(5)LISA GREENHAUS VICE PRESIDENT, GOVT AFFAIRS	(i) (ii)	122,689 0	0 0	300 0	7,361 0	31,059 0	161,409 0	0 0
(6)KEVIN L MAHER SENIOR VICE PRESIDENT, GOVT AFFAIRS	(i) (ii)	136,312 0	0 0	2,300 0	8,299 0	31,345 0	178,256 0	0 0
(7)SHAWN MCBURNEY SENIOR VICE PRESIDENT, GOVT AFFAIRS	(i) (ii)	174,838 0	0 0	300 0	10,490 0	32,151 0	217,779 0	0 0
(8)SUSAN K MILES SENIOR VICE PRESIDENT, INDUSTRY RELA	(i) (ii)	136,395 0	0 0	300 0	8,184 0	17,983 0	162,862 0	0 0
(9)KATHRYN C POTTER SENIOR VICE PRESIDENT, MKTNG & COMMU	(i) (ii)	132,241 0	0 0	300 0	7,934 0	31,260 0	171,735 0	0 0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	TRAVEL FOR COMPANIONS JOSEPH A MCINERNEY - \$6,844 - INCLUDED IN TAXABLE INCOME JOORI JEON - \$108 - INCLUDED IN TAXABLE INCOME HEALTH OR SOCIAL CLUB DUES JOSEPH A MCINERNEY - \$4,530 - INCLUDED IN TAXABLE INCOME

Software ID:
Software Version:
EIN: 13-0432130
Name: AMERICAN HOTEL & LODGING ASSOCIATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOSEPH A MCINERNEY	(i)	372,330	55,849	20,373	15,000	37,375	500,927	0
	(ii)	0	0	0	0	0	0	0
MARLENE M COLUCCI	(i)	312,603	0	300	15,000	19,714	347,617	0
	(ii)	0	0	0	0	0	0	0
PAM INMAN	(i)	250,585	0	2,392	11,702	16,972	281,651	0
	(ii)	0	0	0	0	0	0	0
JOORI JEON	(i)	252,585	0	408	15,000	32,881	300,874	0
	(ii)	0	0	0	0	0	0	0
LISA GREENHAUS	(i)	122,689	0	300	7,361	31,059	161,409	0
	(ii)	0	0	0	0	0	0	0
KEVIN L MAHER	(i)	136,312	0	2,300	8,299	31,345	178,256	0
	(ii)	0	0	0	0	0	0	0
SHAWN MCBURNEY	(i)	174,838	0	300	10,490	32,151	217,779	0
	(ii)	0	0	0	0	0	0	0
SUSAN K MILES	(i)	136,395	0	300	8,184	17,983	162,862	0
	(ii)	0	0	0	0	0	0	0
KATHRYN C POTTER	(i)	132,241	0	300	7,934	31,260	171,735	0
	(ii)	0	0	0	0	0	0	0

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.

OMB No 1545-0047

2012

**Open to Public
Inspection**

Name of the organization AMERICAN HOTEL & LODGING ASSOCIATION	Employer identification number 13-0432130
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE OF THE BOARD IS COMPOSED OF 11 INDIVIDUALS WHICH INCLUDES FOUR CURRENT ELECTED OFFICERS, PRESIDENT OF THE ASSOCIATION, ONE REPRESENTATIVE FROM THE PROPERTIES, ALLIED, AND HOTEL COMPANIES MEMBERS, TWO REPRESENTATIVES FROM THE PARTNER STATE LODGING ASSOCIATIONS, AND ONE REPRESENTATIVE FROM THE AUDIT COMMITTEE. THE EXECUTIVE COMMITTEE SHALL CONDUCT THE NECESSARY BUSINESS OF THE ORGANIZATION BETWEEN MEETINGS OF THE BOARD OF DIRECTORS INCLUDING REGULAR OVERSIGHT OF ALL THE ORGANIZATIONS ENTITIES. ALL ACTIONS OF THE EXECUTIVE COMMITTEE MUST BE REVIEWED AND RATIFIED BY THE BOARD BY THE NEXT MEETING. AS THE PRESIDENT AND CEO OF THE ORGANIZATION ALSO SERVES ON THE BOARD, AH&LA DOES NOT CONSIDER HIM TO BE INDEPENDENT.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE MEMBER TYPES OF THE ASSOCIATION INCLUDE PARTNER STATE, PROPERTY OWNER, CORPORATE/MULTI-UNIT OWNER, INTERNATIONAL, FACULTY, STUDENT, ALLIED, AND UNDER 30 GATEWAY MEMBERS HOTELS, HOTEL COMPANIES, ALLIED COMPANIES AND INDIVIDUALS CAN BE MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	EACH MEMBER OF THE ASSOCIATION HAS A VOICE IN THE GOVERNANCE OF THE ORGANIZATION BY VIRTUE OF BEING ENTITLED TO VOTE AT THE MEETINGS OF THE MEMBERS MEMBERS GENERALLY VOTE ON OFFICERS, BOARD MEMBERS AND BYLAW CHANGES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OF DIRECTORS IS PROVIDED ACCESS TO A DRAFT COPY OF FORM 990 BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE. THE BOARD OF DIRECTORS DELEGATED THE REVIEW OF FORM 990 TO THE AUDIT AND CERTIFICATION & CREDENTIALS COMMITTEE (ACC) BEFORE FILING. A DRAFT OF FORM 990 IS POSTED ON A SECURED WEBSITE MADE AVAILABLE TO THE ACC FOR REVIEW. THE ACC REVIEWS THE ENTIRE RETURN AND DIRECTS ANY QUESTIONS TO THE CFO OF THE ASSOCIATION. QUESTIONS ARE COMMUNICATED TO THE CFO OF THE ASSOCIATION THAT MAY LEAD TO REVISIONS TO THE RETURN BEFORE IT IS FINALIZED AND FILED WITH THE INTERNAL REVENUE SERVICE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS ALL EMPLOYEES ARE GIVEN THE CONFLICT OF INTEREST POLICY AND ARE REQUIRED TO SIGN THE ACKNOWLEDGEMENT FORM INDICATING THAT THEY HAVE READ AND UNDERSTAND THE POLICY AND GUIDELINES. ADDITIONALLY, THE POLICY IS IN THE EMPLOYEE HANDBOOK THAT THEY, ON AN ANNUAL BASIS, MUST REVIEW AND SIGN. SHOULD A CONFLICT OF INTEREST BE BROUGHT TO THE ASSOCIATION'S ATTENTION, ALL LEGAL GUIDELINES WILL BE FOLLOWED ACCORDING TO THE POLICY SET FORTH IN THE EMPLOYEE HANDBOOK. BOARD MEMBERS ARE REQUIRED TO SIGN ACKNOWLEDGEMENT OF THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. THIS PROCESS INCLUDES REVIEWING AND COMPLETING A DISCLOSURE STATEMENT. ADDITIONALLY, THE DUTY TO DISCLOSE CONFLICTS OF INTEREST IS AN ONGOING ONE, AND ANY NEW INFORMATION SHOULD BE REPORTED PROMPTLY TO THE PRESIDENT/CEO AND/OR THE BOARD OF DIRECTORS AND DISCUSSED WITH AH&LA LEGAL COUNSEL. THE POLICY IS ALSO INCLUDED IN THE BOARD AGENDA ALONG WITH THE ANTI-TRUST LAW AS A REMINDER OF THE POLICY.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	A COMMITTEE MADE UP OF THE CHAIR, VICE CHAIR, IMMEDIATE PAST CHAIR, AND TREASURER/SECRETARY OF AH&LA REVIEWS THE "ASSOCIATION EXECUTIVE COMPENSATION & BENEFITS STUDY" PUBLISHED BY THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES. THIS STUDY EXAMINES THE SALARIES AND EMPLOYMENT BENEFITS OF CHIEF EXECUTIVE OFFICERS ON NON-PROFIT ORGANIZATIONS, AS WELL AS OTHER KEY POSITIONS. THE STUDY IS BROKEN DOWN INTO GEOGRAPHIC LOCATION OF NON-PROFIT ORGANIZATIONS AND BUDGET SIZE. THE COMPENSATION AND BENEFITS OF THE PRESIDENT & CEO ARE MEASURED AGAINST THE RESULTS OF THE STUDY. ADDITIONALLY, THE BOARD OF DIRECTORS GIVES ITS FINAL APPROVAL IN HIRING THE PRESIDENT & CEO AND DETERMINES HIS/HER COMPENSATION. WITH RESPECT TO THE OTHER OFFICERS OF AH&LA, THE PRESIDENT & CEO SETS THE COMPENSATION FOR THESE POSITIONS. THE OTHER OFFICERS OF AH&LA RECEIVE THE SAME BENEFITS AS THE ENTIRE STAFF. THIS PROCESS WAS LAST COMPLETED IN 2012.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE AMERICAN HOTEL & LODGING ASSOCIATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public Inspection

Name of the organization
AMERICAN HOTEL & LODGING ASSOCIATION

Employer identification number
13-0432130

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION INC 1201 NEW YORK AVENUE NW SUITE 600 WASHINGTON, DC 20005 13-6095316	CREATE AND GRANT AWARDS FOR HOSPITALITY INDUSTRY	NY	501(C)(3)	LINE 11A, I	N/A		No
(2) AMERICAN HOTEL & LODGING EDUCATIONAL INSTITUTE 800 NORTH MAGNOLIA AVENUE SUITE 300 ORLANDO, FL 32803 38-1557821	DEVELOP INSTRUCTIONAL MATERIAL FOR HOSPITALITY INDUSTRY	MI	501(C)(3)	LINE 11A, I	N/A		No

Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) AMERICAS LODGING INVESTMENT SUMMIT LLC 2900 BRISTOL STREET SUITE D1010 COSTA MESA, CA 92626 52-2313996	INDUSTRY RELATED CONFERENCING	CA	N/A	RELATED	2,412,838	2,162,082		No			No	50 000 %

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) AMERICAN HOTEL & LODGING ASSOCIATION DIRECTORY CORPORATION 1201 NEW YORK AVENUE NW SUITE 600 WASHINGTON, DC 20005 13-0432100	PUBLISHER	NY	AMERICAN HOTEL & LODGING ASSOCIATION	C	-1,136	9,536	100 000 %		No

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

Lease of facilities, equipment, or other assets from related organization(s)

l

Performance of services or membership or fundraising solicitations for related organization(s)

m

Performance of services or membership or fundraising solicitations by related organization(s)

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

No

1b

Yes

1c

Yes

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

Yes

1n

Yes

1o

Yes

1p

Yes

1q

Yes

1r

Yes

1s

Yes

2

If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

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.

[illegible]

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Software ID:

Software Version:

EIN: 13-0432130

Name: AMERICAN HOTEL & LODGING ASSOCIATION

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION	B	664,699	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL INSTITUTE	B	664,699	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION	O	733,000	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION	R	341,000	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL FOUNDATION	Q	390,000	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL INSTITUTE	O	294,000	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL INSTITUTE	Q	289,000	CASH
AMERICAN HOTEL AND LODGING EDUCATIONAL INSTITUTE	R	321,000	CASH