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DLN: 93493043016234

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public

	the 20		 endar year, or tax year beginning	07-01-2012 , 2012, and ending 06	-30-2013			Inspection
_	ck if app ress cha		C Name of organization American Advertising Federation Inc				yer identi 581875	fication number
— Nam	ne chang	је	Doing Business As				301073	
_	al return nınated	1	Number and street (or P O box if m 1101 Vermont Avenue NW	ail is not delivered to street address) Room/	suite	E Teleph	one numbe	r
- Ame	ended re	turn	City or town, state or country, and Z	IP + 4		(202)	898-00	89
- Appl	lication p	pending	Washington, DC 20005			G Gross r	receipts \$ 5	,953,298
			F Name and address of prin	cıpal officer	H(a) Is	s this a group	return fo	ır
			John Osborn 1101 Vermont Ave NW 500		af	ffiliates?		┌ Yes 🗸 No
			Washington, DC 20005		I			ed?
Tax	-exemp	t status	「 501(c)(3)	insert no) 4947(a)(1) or 527				
We	ebsite:	► ww	w aaf org		H(c) (Group exempt	tion numb	er 🕶
Form	of orga	nızatıon	Corporation Trust Association	n	L Year	of formation 19	967 M St	ate of legal domicile N
Par	t I	Sum	mary		•			
	Α	merica	escribe the organization's mission of Advertising Federation, Inc. was mation on issues involving and a	as established to provide leadership	and cultivat	e, promote, a	nd disser	minate knowledge
	2 C	heck tl	nis box 析 if the organization dis	continued its operations or disposed	d of more tha	an 25% of its	net asse	ets
.	3 N	umber	of voting members of the govern	ng body (Part VI, line 1a)			3	10!
				of the governing body (Part VI, line 1			4	10
				calendar year 2012 (Part V, line 2a)			5	2
			•	ecessary)			6 7a	1,00 83,50
				om Form 990-T, line 34			7a 7b	-42,81
						Prior Year	1 7 1	Current Year
	8	Contr	butions and grants (Part VIII, lir	ne 1h)		1,894,	591	1,882,373
	9	Progra	ogram service revenue (Part VIII, line 2g)			3,853,2		4,067,540
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)					5,169		3,385
-	11		, , , , , , , , , , , , , , , , , , , ,	lines 5, 6d, 8c, 9c, 10c, and 11e)				(
	12			(must equal Part VIII, column (A), l	ne	5,753,	023	5,953,298
	13			IX, column (A), lines 1–3)		218,	186	161,000
	14		,	X, column (A), line 4)				C
e l	15	Saları 5–10		e benefits (Part IX, column (A), lines	·	2,068,	712	2,243,950
Caparises 	16a		sional fundraising fees (Part IX,				(
품	b	Total fu	indraising expenses (Part IX, column (D)	, line 25) ► 0				
_	17			ines 11a-11d, 11f-24e)		3,361,491		3,515,960
	18		expenses Add lines 13-17 (mus		5,648,		5,920,910	
(2)	19	Reven	ue less expenses Subtract line	18 from line 12		104,		32,388
) 1					Begin	ning of Curre Year	nt	End of Year
age	20	Total	assets (Part X, line 16)			2,581,	719	3,045,893
Fund Balances						1,736,	779	2,168,565
	22			line 21 from line 20		844,	940	877,328
nder y kn repai	owledg rer has	ties of ge and sany k	belief, it is true, correct, and comnowledge ** ature of officer	mined this return, including accompa plete Declaration of preparer (other				
lere	·		el Penhale CFO or print name and title					
		<u>, </u>	Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN	
aid	l	1	Mario A Lopez CPA	-		self-employed	P0063780)4
	oare r		Firm's name 🕨 Berry Group CPAS			Firm's EIN 🟲		
	Only		Firm's address 🟲 3139 Mount Vernon Ave	enue		Phone no (703	3) 838-761	1

Alexandria, VA 22305

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

✓ Yes No

Form	1990 (2012)				Page
Par		ent of Program Service chedule O contains a response	Accomplishments e to any question in this Part III		
1	Briefly describe	the organization's mission			
		Federation, Inc was establishen was establishen wolving and affecting advertis	ed to provide leadership and cultiving	vate, promote, and disseminate	knowledge and
2		ion undertake any significant p 0 or 990-EZ?	program services during the year v	which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Sched	ule O		
3		ion cease conducting, or make	significant changes in how it con	ducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule C)		
4	expenses Sectio		complishments for each of its thre ganizations are required to report to n program service reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	media companies, s		a, brought together representatives from s workshops were offered on a wide rang d innovation in business solutions		
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	ADDY Awards-AAF's	Addy Awards program recognized the	e creative excellence in all forms of adver	rtising by all sizes of companies and b	y all types of entrants
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
			lership of extraordinary men and women ssionalism in the industry, while inspiring a		ons to advertising and
4d	Other program s (Expenses \$	services (Describe in Schedule includin	eO) g grants of\$) (Revenue \$)

Total program service expenses ▶

Part IV Checklist of Required Schedule
--

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	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	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Раг	t 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? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000			
	as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A female was the second of the			
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	MGT	28b 28c		No No
c 29	complete Schedule L, Part IV			
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29 30	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	28c 29		No No
29 30	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	28c 29 30		No No
29 30 31	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	28c 29 30 31		No No No
29 30 31 32 33	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	28c 29 30 31 32		No No No No
29 30 31 32 33	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part II. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,	28c 29 30 31 32 33		No No No No
29 30 31 32 33 34 35a	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29 30 31 32 33		No No No No No No
29 30 31 32 33 34 35a	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29 30 31 32 33 34 35a		No No No No No No No
29 30 31 32 33 34 35a b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I. Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	28c 29 30 31 32 33 34 35a 35b		No No No No No No No No No

Par		ents Regarding Other IRS Filings and Tax Compliance				_
	Check if S	Schedule O contains a response to any question in this Part V	<u> </u>		Yes	 No
1a	Enter the numbe	r reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a]	24	† <u> </u>	<u> </u>
b	Enter the numbe	r of Forms W-2G included in line 1a Enter -0- if not applicable		0		
С		tion comply with backup withholding rules for reportable payments to ver	ndors and reportable			
2a		g) winnings to prize winners?		1c	Yes	
	Tax Statements,	, filed for the calendar year ending with or within the year covered		2 3		
b		reported on line $2a$, did the organization file all required federal employmof lines $1a$ and $2a$ is greater than 250 , you may be required to e-file (se		2b	Yes	
За	Did the organiza	tion have unrelated business gross income of \$1,000 or more during the	year?	3a	Yes	
	=	led a Form 990-T for this year? <i>If "No," provide an explanation in Schedule</i>	· ·	3b		
4a	over, a financial	ng the calendar year, did the organization have an interest in, or a signat account in a foreign country (such as a bank account, securities accoun	t, or other financial	4a		No
b						110
	See instructions	ne name of the foreign country	nd Financial Accounts			
	_	ation a party to a prohibited tax shelter transaction at any time during the	•	5a		No
b	Did any taxable	party notify the organization that it was or is a party to a prohibited tax s	helter transaction?	5b		No
C	If "Yes," to line 5	5a or 5b, did the organization file Form 8886-T?		5c		
6a		zation have annual gross receipts that are normally greater than \$100,0		6a		No
b	If "Yes," did the	cit any contributions that were not tax deductible as charitable contribut organization include with every solicitation an express statement that su				
7		uctible?		6b		
	Did the organiza	tion receive a payment in excess of \$75 made partly as a contribution at the tothe payor?		7a		
b	•	organization notify the donor of the value of the goods or services provid		7b		
		tion sell, exchange, or otherwise dispose of tangible personal property fo		to		
а	file Form 8282?	the number of Forms 8282 filed during the year		. 7c		
u	ir res, maicate	the number of Forms 6262 med during the year				
e	Did the organization tract?	tion receive any funds, directly or indirectly, to pay premiums on a perso	nal benefit	7e		
f	Did the organiza	tion, during the year, pay premiums, directly or indirectly, on a personal	penefit contract?	7f		
g	_	on received a contribution of qualified intellectual property, did the organ	zation file Form 8899	as 7g		
h	If the organization form 1098-C?	on received a contribution of cars, boats, airplanes, or other vehicles, did	the organization file a	7h		
8	the supporting o	nizations maintaining donor advised funds and section 509(a)(3) support rganization, or a donor advised fund maintained by a sponsoring organiza is at any time during the year?	tion, have excess			
_	_	•		8	<u> </u>	No
9		nizations maintaining donor advised funds.		0-		,
	-	tion make any taxable distributions under section 4966? tion make a distribution to a donor, donor advisor, or related person? .		9a 9b	\vdash	No No
	-	7) organizations. Enter		30		INO
		nd capital contributions included on Part VIII, line 12 10a				
		included on Form 990, Part VIII, line 12, for public use of club				
1	Section 501(c)(1	1.2) organizations. Enter				
		om members or shareholders	<u> </u>			
b		om other sources (Do not net amounts due or paid to other sources due or received from them)				
2a	Section 4947(a)	(1) non-exempt charitable trusts. Is the organization filing Form 990 in I	ieu of Form 1041?	12a		No
	If "Yes," enter th	ne amount of tax-exempt interest received or accrued during the				
3	•	29) qualified nonprofit health insurance issuers.	•			
а	_	on licensed to issue qualified health plans in more than one state? structions for additional information the organization must report on Scho	edule O	13a		No
b		t of reserves the organization is required to maintain by the states				
c	=	anization is licensed to issue qualified health plans				
4a	Did the organiza	tion receive any payments for indoor tanning services during the tax yea	r?	14a	<u> </u>	No
b	If "Yes." has it fi	iled a Form 720 to report these payments? If "No," provide an explanation	ın Schedule O	14b		

Section A. Governing Body and Management

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.

## A Did the organization have members or stockholders? ## A Did the organization become aware during the year of a significant diversion of the organization's assets? ## A Did the organization become aware during the year of a significant diversion of the organization's assets? ## A Did the organization have members or stockholders? ## A Did the organization have members or stockholders? ## A 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? ## A Press or persons other than the governing body? ## A Press or persons other than the governing body? ## B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following ## The governing body? ## B Each committee with authority to act on behalf of the governing body? ## B 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 ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) ## Section B. Policies (This Section B requests information about policies not required by the Interna					_		Yes	No
body, or if the governing body delegated broad authority to an executive committee or similar committee, graph in Schedule 0 b. Eher the number of voting members included in line 1a, above, who are independent 101 2. Did any officer, director, trustee, or key employee? 3. Did the organization delegate control over management duties customanily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4. Did the organization make any significant changes to its governing documents since the prior form 990 was line? 5. Did the organization become aware during the year of a significant diversion of the organization have members or stockholders? 6. Did the organization have members or stockholders? 7. Did the organization have members or stockholders? 8. Did the organization have members or stockholders? 9. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 9. The governing body? 8. Did the organization have any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organizations maning address? If Yes, Provide the names and addresses in Schedule O. 8. Describe in Schedule O the process, if any, used by the organization to required by the Internal Revenue Code.) 10. Did the organization have a written polices and procedures governing the activities of such labeters, affiliates, and branches to ensure their organization to review this promises of the governing body before filing the form? 10. Did the organization have a written polices and procedures governing the activities of such labeters, affiliates, and branches to ensure their operations are consistent with the organization provided a complete copy of this form 990 tail members of its gov	1a		1a		105			
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? 3 Did the organization delegate control over management duties customanly performed by or under their direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to election approval by members, stockholders, or other persons who had the power to elect on appoint one or more members of the governing body? 5 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Bid Yes 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or more members of the director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization or smalling address? If Yes, "provide the names and addresses in Schedule O. 5 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have included a complete consistent with the organization's exempt purposes? 10 Did the organization have a written policies and procedures governing the activities of such chapters, and we will be a such as a such approval by independent persons, or trustees, an		body, or if the governing body delegated broad authority to an executive committee						
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- 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
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Laurel Penhale CFO 1101 Vermont Ave NW 500 Washington, DC (202) 898-0089

Form	990	(2012
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han d n is	one l both	oox, an	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-		(F) Estima mount of compens from t	other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizatio relate organiza	d
1b c	Sub-Total	sto Part VII. S	 ection A	١.	•			+					
d	Total (add lines 1b and 1c) .	-			٠.			Þ	1,057,546				112,695
2	Total number of individuals (in \$100,000 of reportable compo						d abov	e) w	ho received more th	an	•		
												Yes	No
3	Did the organization list any f o on line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on lin organization and related organ individual										4	Yes	
5	Did any person listed on line 1									or individual for	-		
	services rendered to the organ	nization? <i>If "Yes</i>	," compl	ete S	ched	ule 3	l for su	ch pe	erson	[5		No
Se	ection B. Independent Co	ntractors		_									
1	Complete this table for your five									' '		-av vear	

(A) Name and business address	(B) Description of services	(C) Compensation
Spectrum Group , 10319 Westlake Drive Bethesda MD 20817	Media Prod/Consultg	203,661
Waldorf Astoria 301 Park Avenue New York NY 10022	Banquet	377,185
Hilton Hotel 500 East 4th Street Austin TX 78701	Banquet, Eqpt, Rooms	334,272
Arizona Biltmore 2400 E Missouri Ave Phoenix AZ 85016	Ad Merica	472,712
1101 Vermont Ave Investores LLC 560 Herndon Pkwy Herndon VA 20170	Office Space	620,710
Total number of independent contractors (including but not limited to the	an line and a bassa \ suba manages and manage than	

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 ► 11

art VIII	Statement of Revenue Check if Schedule O contains a response to any question in	n this Part VIII	<u> </u>	<u></u>	
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
<u>د</u> يو يو	Federated campaigns 1a				
Contributions, 6mts, 6rants and Other Similar Amounts	b Membership dues 1b 1,882,373				
֓֞֞֞֞֞֞֞֓֓֓֓֓֓֓֓֓֓֓֡֓֞֡֞֡֓֓֡֓֡֞֡֞֡֓֡֓֡֞֡֞֡֓֡֡֡֞֡֡֓֡֡֞֡֡֓֡֡֡֓֡֡	c Fundraising events 1c				
a is	d Related organizations 1d				
ءَ≝ٍ ا	e Government grants (contributions)				
Si ii	f All other contributions, gifts, grants, and 1f				
<u> </u>	similar amounts not included above				
울풍	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f	1,882,373			
	Business Code				
Program Service Revenue	2a Other programs & affinity	45,931	45,931		
e .	b Fulfillment and Other	153,225	69,725	83,500	
ъ Н	C Conference & Sponsorships	3,868,384	3,868,384	,	
ž.	d	, ,	, ,		
क्र <u>्</u>	e				
la l	f All other program service revenue				
<u>چ</u>	g Total. Add lines 2a-2f	4,067,540			
		4,067,340			
	and other similar amounts)	3,385			3,38
4	· · · · · · · · · · · · · · · · · · ·	0			
5	·	0			
	(1) Real (11) Personal				
	b Less rental				
	expenses c Rental income				
	or (loss)	0			
d	Net rental income or (loss)	0			
,	a Gross amount				
	from sales of assets other				
	than inventory b Less cost or				
	other basis and sales expenses				
	c Gain or (loss)				
d	Net gain or (loss)	0			
	Gross income from fundraising events (not including \$				
Omer Revenue	of contributions reported on line 1c) See Part IV, line 18 a				
⊕	b Less direct expenses b				
5 0	Net income or (loss) from fundraising events 🕨	0			
٩	Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				
6		О			
10	Gross sales of inventory, less returns and allowances .				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory	0			
	Miscellaneous Revenue Business Code				
11	a				
	ь				
	с				
	d All other revenue				
	e Total. Add lines 11a-11d	0			
12	Total revenue. See Instructions	5,953,298	3,984,040	83,500	3,38
		2,933,290	3,304,040	03,300	ع, عو

	IX Statement of Functional Expenses				
ectio	n 501(c)(3) and 501(c)(4) organizations must complete all columns All		·		
	Check if Schedule O contains a response to any question in this Pa	rt IX			· · · · · · · · · · · · · · · · · · ·
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	144,000			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	17,000			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	483,752			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	1,200,293			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	37,695			
9	Other employee benefits	403,691			
0	Payroll taxes	118,519			
1	Fees for services (non-employees)				
а	Management	0			
b	Legal	109,252			
c	Accounting	17,951			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	165,506			
2	Advertising and promotion	474,534			
	Office expenses	14,401			
į	Information technology	493,826			
5	Royalties	493,820			
5	Occupancy	620,670			
,	Travel	,			
, B	Payments of travel or entertainment expenses for any federal, state, or local public officials	409,361			
9	Conferences, conventions, and meetings	913,277			
)	Interest	0			
Ĺ	Payments to affiliates	0			
2	Depreciation, depletion, and amortization	53,417			
3	Insurance	29,342			
4	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)				
а	Dues and subscriptions	30,048			
b	Service charges and fees	31,039			
С	Printing and Publications	51,210			
d	Coalitions and councils	73,998			
e	All other expenses	28,128			
5	Total functional expenses. Add lines 1 through 24e	5,920,910	0	0	
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			_
		eneck if Senedale 6 contains a response to any question in this rate X 1 1 1 1	(A) Beginning of year	•	(B) End of year
	1	Cash—non-interest-bearing	1,352,077	1	2,027,033
	2	Savings and temporary cash investments	638,276	2	387,271
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net	185,079	4	100,295
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
ss.	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		5	0
ळू				6	0
Assets	7	Notes and loans receivable, net		7	0
	8	Inventories for sale or use	74,469	8	48,149
	9	Prepaid expenses and deferred charges	98,804	9	241,502
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 557,081			
	ь	Less accumulated depreciation 10b 372,438	181,014	10 c	184,643
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11	52,000	15	57,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,581,719	16	3,045,893
	17	Accounts payable and accrued expenses	560,888	17	848,387
	18	Grants payable		18	
	19	Deferred revenue	842,009	19	925,662
	20	Tax-exempt bond liabilities		20	
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	333,882	25	394,516
	26	Total liabilities. Add lines 17 through 25	1,736,779	26	2,168,565
ses		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
g G	27	Unrestricted net assets	844,940	27	877,328
<u> </u>	28	Temporarily restricted net assets		28	
몯	29	Permanently restricted net assets		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Ř	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	844,940	33	877,328
Z	34	Total liabilities and net assets/fund balances	2,581,719	34	3,045,893
	ı				<u> </u>

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,9	53,298
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,9	20,910
3	Revenue less expenses Subtract line 2 from line 1	3			32,388
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			344,940
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8	377,328
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	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	rate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equire	3b		

Software ID: 12000229 **Software Version:** 2012v2.0

EIN: 13-2581875

Name: American Advertising Federation Inc

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

Compensated Employees, and Independent			,, , , , ,	ust	e e s	, ney	, EN	iipioyees, nighe	ı	1	
(A) Name and Title	(B) Average hours per week (list any	(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	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations	
Frank Cooper III Chair's Adv Co	1 00 0 00	х						0	0	0	
Krystal Profitt Ad 2 Natl Chair	1 00 0 00	х						0	0	0	
Lorelle Burke Div II Chair	1 00 0 00	х						0	0	0	
Jeffry Perlman Board Member	1 00 0 00	х						0	0	0	
James M Norton Assist Sec	1 00 0 00	х		х				0	0	0	
Greg D'Alba Secretary	1 00 0 00	х		х				0	0	0	
Christal Gammill District 11	1 00 0 00	х						0	0	0	
Carlo Vittorini Chair's Adv Co	1 00 0 00	х						0	0	0	
William Sharp Chair's Adv Co	1 00 0 00	х						0	0	0	
Gerı Wang Corp Mem-Media	1 00 0 00	х						0	0	0	
Kathy Mitchell District 14	1 00 0 00	х						0	0	0	
Paul Lam District 13	1 00 0 00	х						0	0	0	
Janet Robinson Chair's Adv Co	1 00 0 00	х						0	0	0	
Joseph Sica Corp Mem-Adv	1 00 0 00	х						0	0	0	
Joe Kelly District 12	1 00 0 00	х						0	0	0	
Sandra H Utt PhD NEEC Chair	1 00 0 00	х						0	0	0	
Alta Stark District 1	1 00 0 00	х						0	0	0	
David Park Chair's Adv Co	1 00 0 00	х						0	0	0	
Lisa King District 5	1 00 0 00	х						0	0	0	
Brian Wall District 10	1 00 0 00	х						0	0	0	
Wallace Snyder President-Emer	2 00 0 00	х						6,813	0	0	
Tiffany Warren Mosaic Co-VCh	1 00 0 00	х						0	0	0	
Brett Wilson Corp - At-Large	1 00 0 00	х						0	0	0	
Carla Michelotti Gov Aff Chair	1 00 0 00	х						0	0	0	
John McMennamın Chair's Adv Co	1 00 0 00	х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director hours organizations stitutional emplo) for related organizations trustaa below 8 Trustee dotted line) 1 00 Patricia Martin Х 0 0 0 Chair's Adv Co 0 00 1 00 Rick Segal 0 0 0 Gov Aff VChair 0 00 1 00 Arthur Bud Liebler 0 0 0 Х Chair's Adv Co 0 00 1 00 Denise Warren Х Х 0 0 0 Assist Treas 0 00 1 00 Pio Schunker 0 0 0 Corp Mem-Adv 0 00 1 00 David Keith 0 0 0 Х Chair's Adv Co 0 00 1 00 Kathleen Riessen 0 0 0 Х District 9 0 00 1 00 Robert Hilton 0 0 0 Х Chair's Adv Co 0 00 1 00 Michele Thornton Χ 0 0 Mosaic Co Chair 0 00 1 00 Philip Guarascio 0 0 X 0 Chair's Adv Co 0 00 1 00 Chester Green Х 0 0 0 Chair's Adv Co 0 00 1 00 Mary Baglivo 0 0 Corp Mem-Agency 0 00 1 00 Bernard Flanagan 0 0 0 Х Chair's Adv Co 0 00 1 00 Peyton Lewis Х 0 0 0 E Reg Chair 0 00 1 00 Mark Dacey 0 0 0 Chair's Adv Co 0 00 1 00 0 0 0 Х Corp - At-Large 0 00 1 00 Allison Robbins 0 0 0 Х COGS VChair 0 00 1 00 Cory Hollenhurst Χ 0 0 0 District 8 0 00 1 00 Robert Blackmore 0 0 0 Chair's Adv Co 0 00 1 00 Andy Narrai 0 0 0 Χ Х Treasurer 0 00 1 00 William Houck Х 0 0 0 District 15 0 00 1 00 Andrea Alstrup 0 0 0 Board Member 0 00 1 00 0 0 0 Х Board Member 0 00 1 00 Peggy Conlon 0 0 Х 0 Board Member 0 00 2 00 Howard Bell 22,941 0 President-Emer 0 00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director hours organizations stitutional employ for related organizations trustaa below 8 Trustee dotted line) 1 00 William Hagelstein Х 0 0 0 Corp - At-Large 0 00 1 00 AJ Buse 0 0 0 District 7 0 00 1 00 Toby Byrne 0 0 0 Х Corp - At-Large 0 00 1 00 Chris McDonald Х 0 0 0 District 6 0 00 1 00 David Bell 0 0 0 Chair's Adv Co 0 00 1 00 Blake Goldston 0 0 0 Х COG VChair 0 00 1 00 Rık Shiiki 0 0 0 Х W Reg Chair 0 00 1 00 Shelley Magee 0 0 0 Х District 3 0 00 1 00 John Durham Χ 0 0 0 Corp - At-Large 0 00 1 00 Richard Porter 0 0 X 0 Corp - At-Large 0 00 1 00 Jodi Allen Х 0 0 0 Corp Mem-Adv 0 00 1 00 Jack Rooney 0 0 Corp Mem-Agency 0 00 1 00 Maria Lucas 0 0 0 Х District 4 0 00 1 00 Gordon Lee Jones Х 0 0 0 Corp - At-Large 0 00 1 00 Barb Scherer 0 0 0 Div III Chair 0 00 1 00 Kımberly Kadlec 0 0 0 Х Corp Mem-Adv 0 00 1 00 John McCafferty 0 0 0 Х COG Sec/Treas 0 00 1 00 Jacki Kelley Χ 0 0 0 Corp Mem-Agency 0 00 1 00 John Osborn 0 0 0 Chairman 0 00 1 00 Sherri Anne Green 0 0 0 Х Dıv I Chair 0 00 1 00 Madhu Malhan Х 0 0 0 District 2 0 00 1 00 Kımberly Kelleher 0 0 0 Corp Mem-Media 0 00 1 00 Steve Pacheco Х 0 0 0 Х Imm Past Chair 0 00 1 00 Lisa Weinstein 0 0 Х 0 Corp Mem-Agency 0 00 1 00 Wilder Baker 0 0 Chair's Adv Co 0 00

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Reportable Estimated amount Average hours more than one box, compensation compensation of other unless person is both per from the from related compensation organization (Worganizations (Wan officer and a from the week (lıst director/trustee) 2/1099-MISC) 2/1099-MISC) organization and related any Former Highest compensated employee Individual 1 or director hours organizations stitutional emplo) for related organizations trustaa below 8 Trustee dotted line) 1 00 Leo Armatis Х 0 0 0 Chair's Adv Co 0 00 1 00 Sean Finnegan 0 0 0 Digital Chair 0 00 1 00 Laurence Boschetto 0 0 0 Х Corp Mem-Agency 0 00 1 00 George Riddell Х 0 0 0 ADDY Chair 0 00 1 00 Erik Lohmeier 0 0 0 Know Ctr Chair 0 00 1 00 Alison Fahey 0 0 0 Х Corp Mem-Media 0 00 1 00 Jack Griffin 0 0 0 Х Chair's Adv Co 0 00 1 00 Wendy Clark Х 0 0 0 Х Vice Chair 0 00 1 00 Beth-Ann Eason Χ 0 0 0 Corp Mem-Media 0 00 1 00 Rich Stoddart 0 0 X 0 Corp Com-VChair 0 00 1 00 lo Muse Х 0 0 0 Corp Com-VChair 0 00 1 00 Heidi Browning Pearson 0 0 Χ Corp Mem-Media 0 00 1 00 McGhee Williams Osse 0 0 0 Х Corp - At-Large 0 00 1 00 Michael J Kelly Х 0 0 0 Corp Com-VChair 0 00 1 00 Jeff Levick 0 0 0 Corp - At-Large 0 00 1 00 Chris Collins 0 0 0 Х Corp Mem-Media 0 00 1 00 Murray Gaylord 0 0 0 Х Chair's Adv Co 0 00 1 00 Andy Jung Χ 0 0 0 Chair's Adv Co 0 00 1 00 Nancy Rabstejnek Nichols 0 0 0 Corp Mem-Agency 0 00 1 00 Greg Branch 0 0 0 Х COG I P Chair 0 00 1 00 Jim Heekin Х 0 0 0 Corp Mem-Agency 0 00 1 00 Nick Pahade 0 0 0 Corp Mem-Agency 0 00 1 00 Daryl Evans 0 0 0 Х Corp Mem-Adv 0 00 1 00 Anton Vincent 0 0 Х 0 Corp Mem-Adv 0 00 1 00 Allison Arden 0 Corp Mem-Media 0 00

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

(A) Name and Title	(B) A verage hours per week (list any hours for	unless person is both an officer and a or director/trustee) 2		(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				
	related organizations below dotted line)	Individual trustee or director	Institutional Trustee		nployee	Highest compensated employee				
Ray Chelstowski Corp - At-Large	1 00 0 00	х						0	0	0
Tim Armstrong Corp Mem-Media	1 00 0 00	х						0	0	0
Anne Condran C Reg Chair	1 00 0 00	Х						0	0	0
Linda Thomas Brooks Corp Com-Chair	1 00 0 00	х						0	0	0
James E Datrı President & CEO	60 00 0 00			х				454,463	0	20,353
Constance Frazier C O O	45 00 0 00					х		236,729	0	19,870
Joanne Schecter EVP-Club Svcs	35 00 0 00					х		102,765	0	23,009
Laurel Penhale CFO	35 00 0 00					х		122,621	0	21,684
Clark Rector EVP-Govt Rel	35 00 0 00					х		111,214	0	27,779
			-			•	'		·	

DLN: 93493043016234

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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 **Employer identification number** American Advertising Federation Inc 13-2581875 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	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 nontavable amount					

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	ОТ			1 0	ige e
		(a	1)		(b)	
ror e activ	rach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying rity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
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	O ther 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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c))(5), o	rse	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		Νo
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."				t III-	·A,
1	Dues, assessments and similar amounts from members	1			1,882	2,37
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).					
а	Current year	2a			132	2 ,7 1
b	Carryover from last year	2b				
C	Total	2c				2,71
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			189	9 ,7 3
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Tayable 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

art II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Reference Explanation

DLN: 93493043016234

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public Inspection

	me of the organization erican Advertising Federation Inc		Employer identification number				
MIII	encan Advertishing Federation IIIC	13-2581875					
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	inds or Accounts. Complete if the				
		(a) Donor advised funds	(b) Funds and other accounts				
L	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
1	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		radvised Yes No				
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?						
Рa	rt III Conservation Easements. Complete if	the organization answered "Yes" to	Form 990, Part IV, line 7.				
L 2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	or education) Preservation of an Preservation of a contraction	ertified historic structure				
	easement on the last day of the tax year	Г	Held at the End of the Year				
а	Total number of conservation easements	<u> </u>	2a				
ь	Total acreage restricted by conservation easements	<u> </u>	2b				
c	Number of conservation easements on a certified histo	uric structure included in (a)	2c				
d	Number of conservation easements included in (c) acq	` ' -					
u	historic structure listed in the National Register	aned diter 6,17,000, and not on a	2d				
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated	d by the organization during				
	the tax year 🛌						
1	Number of states where property subject to conservat	on easement is located b					
5	Does the organization have a written policy regarding t		— ling of violations, and				
,	enforcement of the conservation easements it holds?		☐ Yes ☐ No				
5	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year				
			duma a blassica a				
7	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easements	during the year				
3	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	(ion 170(h)(4)(B)(i)				
•	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the	e footnote to the organization's financial :	expense statement, and				
ar	the organization's accounting for conservation easement IIII Organizations Maintaining Collection	s of Art, Historical Treasures, o	or Other Similar Assets.				
1a	Complete if the organization answered "Y If the organization elected, as permitted under SFAS 1	16 (ASC 958), not to report in its reven					
	works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	o its financial statements that describes	these items				
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, o					
	(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, histor following amounts required to be reported under SFAS		· -				
а	Revenues included in Form 990, Part VIII, line 1		► \$				
	·						

b Assets included in Form 990, Part X

Part	UTU Organizations Maintaining Co	<u>llections of Ar</u>	t, His	<u>stori</u>	<u>caı ı</u>	<u>reasui</u>	res, or O	tne	r Similar As	ssets (c	ontinued)
	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	heck	any of	the follo	wing that a	are a	significant us	e of its	
а	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
b	Scholarly research		e	\vdash	Othe	r					
c	Preservation for future generations										
	Provide a description of the organization's co	ollections and expl	aın hov	w the	y furth	er the o	rganızatıon	's ex	empt purpose	ın	
_	Part XIII										
	During the year, did the organization solicit or assets to be sold to raise funds rather than t	o be maintained as	part	of the	organ	ızatıon's	collection	1?		┌ Yes	┌ No
Part	Escrow and Custodial Arrange Part IV, line 9, or reported an am						answere	d "Y	es" to Form	990,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	forc	ontrib	utions o	r other ass	ets r	not	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	wing t	able		_				
									Aı	mount	
C	Beginning balance						_	1 c			
d	Additions during the year						-	1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	•						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	n has	been pr	ovided in P	art >	KIII		Γ
Par	t V Endowment Funds. Complete										
		(a)Current year	(b) Prior	year	b (c) Tw	o years back	(d)	Three years back	(e) Four y	years back
1a	Beginning of year balance										
Ь	Contributions							-			
С	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 curr	ent year end balan	ice (lir	ne 1 a	. colun	nn (a)) h	eld as				
	Board designated or quasi-endowment	•	•	_							
	Permanent endowment ►										
	Temporarily restricted endowment										
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
	Are there endowment funds not in the posses organization by	_	zatıon	that	are hel	d and a	dministered	d for	the	Yes	No
	(i) unrelated organizations							•	3a	_	
	(ii) related organizations							•	<u>3</u> a	_	<u> </u>
	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of th							•	3	b	<u> </u>
	VI Land, Buildings, and Equipme					10					
	Description of property	THE SECTION S	30,10	(6) Cost	or other	(b)Cost or o		(c) Accumulate	ed (d) E	Book value
				ba	sis (inve	stment)	basıs (oth	er)	depreciation		
1a L	and			\top							
b E	uildings										
	easehold improvements									1	
	quipment						557	,081	372,4	138	184,643
				\vdash					l		
e C	ther										

Part VII I	nvestments-Other Securities. See F	Form 990, Part X, line 12	2.	
(a)	Description of security or category	(b) Book value		d of valuation
	(including name of security)		Cost or end-of	-year market value
(1)Financial d				
Other	eld equity interests			
Other				
	(b) must equal Form 990, Part X, col (B) line 12)			
	Investments—Program Related. See			
(a) Description of investment type	(b) Book value		d of valuation -year market value
			COST OF CHA OF	year market value
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)			
	Other Assets. See Form 990, Part X, lin	e 15.		
	(a) Descrip	tion		(b) Book value
	n (b) must equal Form 990, Part X, col.(B) line 15.			
Part X	Other Liabilities. See Form 990, Part X			
1	(a) Description of liability	(b) Book value		
Federal incom	ne taxes			
Deferred rent	expense	394,516		
	(b) must equal Form 990, Part X, col (B) line 25)	394,516		
2 Eun 49 /AC	740) Footpote In Part XIII provide the text			

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Identifier

Per	Reconciliation of Revenue per Audited Financial Statements with Revenue	регн	eturn
1	Total revenue, gains, and other support per audited financial statements	1	5,953,298
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,953,298
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
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	5,953,298
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return
1	Total expenses and losses per audited financial statements	1	5,920,910
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	5,920,910
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part 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	5,920,910
Part	XIII Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, I V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part t		•

Return Reference

Explanation

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

American Advertising Federation Inc

DLN: 93493043016234 OMB No 1545-0047

Employer identification number

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

Open to Public Inspection

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	∀Yes ⊤
the selection criteria used to award the grants or assistance?	
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 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 or grant cash valuation non-cash assistance or government (book, FMV, appraisal, other) (1) The Ghetto Film School 13-4127229 501(c)(3) 15,000 0 Annual 79 Alexander Avenue	
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 or government (b) EIN (c) IRC Code section if applicable grant (d) Amount of cash cash valuation non-cash assistance or assistance (book, FMV, appraisal, other) (1) The Ghetto Film School 79 Alexander A venue	to
organization or government or government grant cash valuation non-cash assistance or associated or government assistance (book, FMV, appraisal, other) (1) The Ghetto Film School 13-4127229 501(c)(3) 15,000 0 Annual 79 Alexander Avenue	
79 Alexander Avenue	urpose of grant sistance
	Benefit
(2) The Advertising Council 13-0417693 501(c)(3) 28,000 0 Sponso 815 Second Avenue New York, NY 10017	rship
(-γ-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-ν-	Awards and competition
(4) Childrens Hospital-LA 95-1690977 501(c)(3) 10,000 0 Donatic 4650 Sunset Blvd Los Angeles, CA 90027	ın
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistanc
) Educational assistance	8	17,000			

DLN: 93493043016234

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Compensation Information

Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization American Advertising Federation Inc **Employer identification number**

13-2581875

Pa	rt I Questions Regarding Compensati	on				
					Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> - </u>	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, and the CEO/Executive Directors					
	directors, trustees, and the CEO/Executive Direc	tor, regard	and the items checked in line 14?	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all used by a related organization to establish compe	that apply				
	Compensation committee	▽	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	F	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization), Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contr	ol paymen	nt?	4a		No
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only r	must comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,			7		
8	Were any amounts reported in Form 990, Part VII					
	subject to the initial contract exception described in Part III	ın Regula	itions section 53 4958-4(a)(3)? If "Yes," describe			
				8		
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutta	able presumption procedure described in Regulations	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)(1)-(111) 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 co		· · · · · · · · · · · · · · · · · · ·	``		(E) Total of columns	• •	
		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)James E Datri President & CEO	(i) (ii)	329,103	125,000	360	12,500	7,853	474,816		
(2)Constance Frazier C O O	(i) (ii)	169,003	66,694	1,032	12,067	7,803	256,599		

Schedule J (Form 990) 2012

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
, ,	in regards to selections on 1a	AAF travel reimbursement policies meet the requirements of the Internal Revenue Service to protect both AAF and participating individuals from violation of the tax regulations. The core of the AAF expense reporting system is the travel expense voucher. The voucher is designed to provide relevant information on the total cost of a trip. A general rule for completing the expense report is to provide complete information on all expenses. There cannot be too much documentation. Each person traveling or attending meeting on AAF business should be budget and expense control minded.

Schedule J (Form 990) 2012

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DLN: 93493043016234

Schedule L Transactions with Interested Persons

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization	
American Advertising Federation	Inc

Employer identification number

	of disqualified per	son (b) Rel	ationship l	between disc	qualified	(c) Descrip	otion o	ftrans	saction		(d) Cor	rected	
			person and	l organizatio	n						Yes	No	
												-	
												-	
												_	
												_	
												_	
												-	
	mount of tax incurr	ed by organiza	tion mana	gers or dısqı	ualified perso	ns during the	yearu	ınder s	_				
4958								•	F \$				
3 Enter the ar	mount of tax, if any	, on line 2 , abo	ove, reimbi	ursed by the	organization				F \$				
	ans to and/or I												
	nplete if the organiz					ne 38a, or Fo	rm 991	o, Par	t IV, lin	e 26,	or if the		
	anization reported a					(6)Dalamas	(-)	T			(=>)4/	lui be a u	
a) Name of Interested	(b) Relationship with organization	1 ' '	(d) Loan or from t		(e)Original principal	(f)Balance due	(g) defa	In udt?	Appro	-		ritten ment?	
person	With organization	i orroun	organizati	1 '	amount	l uue	1			board or		agreement	
									by boa	ara or			
									commi				
			То	From	-		Yes	No	1 '		Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
			То	From			Yes	No	commi	ttee?	Yes	No	
tal				From			Yes	No	commi	ttee?	Yes	No	
tal Gra	nts or Assistan	oce Renefit	▶ \$				Yes	No	commi	ttee?	Yes	No	
art IIII Gra	nts or Assistar	nce Benefit	► \$ ting Inte	erested Po	ersons.	TV line 27		No	commi	ttee?	Yes	No	
Gra Com	nplete if the orga	nızatıon ans	► \$ ting Inte	erested Po	ersons. m 990, Part				Yes	No No			
Com (a) Name of Int	nplete if the orga terested (b) Re	nization ans lationship bet	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part	IV, line 27. (d) Type of			Yes	No No	Yes		
Gra Com	nplete if the orga terested (b) Re	nızatıon ans	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part				Yes	No No			
Com (a) Name of Int	nplete if the orga terested (b) Re	nization ans lationship bet sted person ar	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part				Yes	No No			
Com (a) Name of Int	nplete if the orga terested (b) Re	nization ans lationship bet sted person ar	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part				Yes	No No			
Com (a) Name of Int	nplete if the orga terested (b) Re	nization ans lationship bet sted person ar	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part				Yes	No No			
Com (a) Name of Int	nplete if the orga terested (b) Re	nization ans lationship bet sted person ar	► \$ ting Inte wered "Y ween (c	erested Po	ersons. m 990, Part				Yes	No No			

Part IV Business Transactions Complete if the organizati			e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's
				Yes	No
(1) Stacy McCullough	Board of Director	117,514	Prof svc-place advertising		No

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanation
		Schedule I (Form 990 or 990-F7) 2012

Schedule L (Form 990 or 990-EZ) 2012

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Name of the organization American Advertising Federation Inc **Employer identification number**

13-2581875

Identifier	Return Reference	Explanation
	Schedule I Part III	Educational assistance granted to deserving minority students majoring in advertising, marketing or communications
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The organization will provide a copy of its governing documents, policies and financial statements, upon receipt of the request, within the time frame allowed by regulation
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The compensation of the Federation's CEO is determined by the Compensation Committee. The Committee's deliberations include comparability data from an independent compensation consultant and an evaluation of the CEO's performance. The Committee furnishes contemporaneous substantiation of the deliberations and decision.
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	There is no formal process in place for the Board of Directors to review the Form 990. A draft of the Form 990 is reviewed internally by management before it is finalized and submitted to the regulatory agency.
Form 990, Part VI, Line 7b	Form 990, Part VI, Line 7b Describe Decisions of Governing Body Approval by Members or Shareholders	The members have the right to approve amendments to the Bylaws
Form 990, Part VI, Line 7a	Form 990, Part VI, Line 7a How Members or Shareholders Elect Governing Body	The governing body has both elected directors and ex-officio directors. The Nominating Committee meet on a regular basis to prepare a list of candidates for election to the Board of Directors. The elected directors are elected by the members from (A) candidates put forward by the Nominating Committee for election and/or (2) candidates nominated from the floor at the member meeting.
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	Membership is comprised of a) Duly organized advertising clubs or federations, regardless of official name, so long as a primary purpose relates to the advancement of the advertising profession b) Companies which buy, sell, use or provide advertising services c) Duly organized Ad 2 clubs or federations, regardless of official name, so long as a primary purpose relates to the advancement of the advertising profession d) Duly organized national or regional associations representing special areas of interest in advertising e) Duly organized student advertising chapters on college or university campuses f) Duly organized advertising entities located outside the boundaries of the United States
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	The American Advertising Federation is the only national advertising trade association representing all facets of the advertising industry. Our membership is comprised of nearly 100 corporate members comprising the nation's leading advertisers, advertising agencies, and media companies, additionally, our members participate in a national network of nearly 200 local federations and more than 200 college chapters. In addition, our Board of Directors consists of approximately 100 Board members. Given the large number of members, chapters and Board members, there are a small number of situations where the officers and directors of the AAF have business relationships (as defined in the Form 990 Instructions) with one another and perhaps have family relationships as well