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Form <b>990</b>  Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)</b>	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 07-01-2012 , 2012, and ending 06-30-2013**

<b>B</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	<b>C</b> Name of organization AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION		<b>D</b> Employer identification number  52-2172219
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 7101 WISCONSIN AVENUE NO 1300	Room/suite	<b>E</b> Telephone number  (301) 654-6664
	City or town, state or country, and ZIP + 4 BETHESDA, MD 20814		<b>G</b> Gross receipts \$ 34,197,916
	<b>F</b> Name and address of principal officer KATHLEEN SCHMATZ 7101 WISCONSIN AVENUE NO 1300 BETHESDA, MD 20814		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ▶
<b>I</b> 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			
<b>J</b> Website: ▶ WWW.AFTERMARKET.ORG			




**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ☐ **L** Year of formation 1999 **M** State of legal domicile IL

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO SERVE THE AUTOMOTIVE AFTERMARKET BY EXPANDING THE CONSUMER MARKET AND PRESERVING AND ENHANCING THE SALE OF GOODS AND SERVICES IN THE INDUSTRY			
	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) . . . . .	31	
	4	Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	31	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	44	
Activities & Governance	6	Total number of volunteers (estimate if necessary) . . . . .	400	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	12,000	
	7b	Net unrelated business taxable income from Form 990-T, line 34 . . . . .	-3,244	
Revenue	8	Contributions and grants (Part VIII, line 1h) . . . . .	3,500	10,000
	9	Program service revenue (Part VIII, line 2g) . . . . .	14,165,650	14,699,856
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	1,086,549	1,286,606
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	90,021	235,084
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	15,345,720	16,231,546
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	842,913	1,283,127
	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)	4,688,432	4,967,905
	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) . . . . .	8,840,615	8,005,283
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	14,371,960	14,256,315
	19	Revenue less expenses Subtract line 18 from line 12 . . . . .	973,760	1,975,231
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16) . . . . .	23,683,724	26,156,594
	21	Total liabilities (Part X, line 26) . . . . .	6,697,478	6,305,618
	22	Net assets or fund balances Subtract line 21 from line 20 . . . . .	16,986,246	19,850,976

## 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.

<b>Sign Here</b>	***** Signature of officer			2014-05-01 Date	
	KATHLEEN SCHMATZ PRESIDENT & CEO Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name NATHANIEL BARTHOLOMEW		Preparer's signature		Date
	Check <input type="checkbox"/> if self-employed			PTIN P00007511	
	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

AAIA CONNECTS ITS MEMBERS TO EACH OTHER, THE AFTERMARKET INDUSTRY AND CONSUMERS AAIA HELP EMPOWER ITS MEMBERS WITH ACCESS TO THE RIGHT SUPPLIERS, CUSTOMERS, PRODUCTS, PROGRAMS AND RESOURCES TO HELP THEIR BUSINESSES THRIVE AAIA AND ITS MEMBER VOLUNTEERS PROVIDE LEADERSHIP AND A RESPECTED VOICE FOR AND WITHIN THE AFTERMARKET INDUSTRY AAIA DOES ALL THIS BY OFFERING THE INDUSTRY’S HIGHEST-QUALITY PROGRAMS AND SERVICES IN THE AREAS OF GOVERNMENT AFFAIRS, INFORMATION, MARKET RESEARCH, TECHNOLOGY, EDUCATION AND TRAINING, INTERNATIONAL SERVICES AND BUSINESS DEVELOPMENT

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 AAIA'S GOVERNMENT AFFAIRS PROGRAM REPRESENTS THE AUTOMOBILE AFTERMARKET AND ITS MEMBERS' INTERESTS BEFORE FEDERAL AND STATE LEGISLATORS AND REGULATORS TO ENSURE THAT THEIR CONCERNS ARE RECOGNIZED AND UNDERSTOOD BY THE COUNTRY’S DECISION MAKERS AAIA ACTIVELY COMMUNICATES WITH LEGISLATORS AND LOBBIES FOR GOVERNMENT POLICIES THAT ARE FAVORABLE TO AFTERMARKET BUSINESS AAIA IS COMMITTED TO A COMPREHENSIVE PROGRAM THAT CUTS THROUGH THE REGULATORY MAZE AND HELPS RALY ITS MEMBERS FOR KEY INDUSTRY ISSUES AND HAVE THEIR VOICES BE HEARD THROUGH ITS "RIGHT TO REPAIR CAMPAIGN", AAIA IS LEADING THE PROGRESS OF VOICING THE SUPPORT OF THE AFTERMARKET INDUSTRY OF THE RIGHT TO REPAIR LEGISLATION THAT WOULD GIVE CAR OWNERS MORE OPTIONS OUTSIDE OF DEALERSHIPS FOR CAR REPAIRS ITS LEGISLATIVE ACTION CENTER ALLOWS MEMBERS TO CONTACT THEIR FEDERAL AND STATE ELECTED REPRESENTATIVES ABOUT HOT ISSUES IN THE AUTOMOBILE AFTERMARKET INDUSTRY SUCH AS "PROTECT YOUR RIGHT TO REPAIR", OPOSING EFFORTS BY THE NATIONAL LABOR RELATIONS BOARD TO TELL COMPANIES WHERE THEY CAN LOCATE THEIR BUSINESS, FIGHTING A PROPOSAL TO END THE USE OF THE LIFO INVENTORY ACCOUNTING METHOD AND SUPPORTING LEGISLATIVE INITIATIVES AIMED AT REPEALING HEALTH CARE REFORM ENACTED IN 2010 THE LEGISLATIVE SUMMIT PROVIDES AN OPPORTUNITY FOR AFTERMARKET PROFESSIONALS TO VISIT WASHINGTON DC AND MEET WITH CONGRESSIONAL LEADERS ABOUT ISSUES THAT AFFECT AND IMPACT THEIR BUSINESS

4b

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

TECHNOLOGY STANDARDS AAIA'S MISSION IS TO DEVELOP TECHONOLGY STANDARDS AND BEST PRACTICES THAT LOWER COSTS AND INCREASE EFFICIENCIES IN THE VEHICLE AFTERMARKET INDUSTRY AAIA HAS TAKEN A LEADERSHIP ROLE IN DEVELOPING STANDARDS AND BEST PRACTICES IN E-COMMERCE AND TECHNOLOGY TO HELP LOWER THE COST OF BUSINESS AND INCREASE EFFICIENCIES IN THE AFTERMARKET VALUE CHAIN THROUGH THE LEADERSHIP OF THE AAIA TECHNOLOGY STANDARDS AND SOLUTIONS COMMITTEE, THE ASSOCIATION HAS DEVELOPED TOOLS AND PRACTICES THAT HAVE COME TO BE RECOGNIZED AS INDUSTRY STANDARD STANDARDS DEVELOPED SPECIFICALLY FOR THE AFTERMARKET INDUSTRY ACCELERATE THE ADOPTION OF TECHNOLOGY AND LOWER THE COST OF INTEGRATION AAIA SERVES AS A NEUTRAL FACILITATOR ALLOWING COMPETITORS AND TRADING PARTNERS FROM ALL INDUSTRY SEGMENTS TO COLLABORATE ON SOLUTIONS THAT BENEFIT THE ENTIRE AFTERMARKET INDUSTRY CATALOG STANDARDS OR "ACES" DEVELOPED BY AAIA ARE THE INDUSTRY STANDARD FOR THE MANAGEMENT AND EXCHANGE OF THE AUTOMOTIVE CATALOG AND VEHICLE DATA

4c

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

MARKET RESEARCH AAIA'S MARKET RESEARCH PROGRAM COLLECTS, ANALYZES, DISSEMINATES, AND DISTRIBUTES INDUSTRY DATA THAT ADDRESS VARIED INFORMATION NEEDS OF AAIA MEMBERS IT ASSESSES TRENDS THAT ARE RESHAPING THE AFTERMARKET INDUSTRY AND PROVIDES IN-DEPTH AND TIMELY REPORTS TO HELP MEMBERS FROM ALL SEGMENTS OF THE AFTERMARKET STRATEGICALLY POSITION THEIR COMPANY FOR THE FUTURE AAIA'S UNIQUE RESEARCH PROGRAMS OFFER UNPARALLELED INFORMATIONAL EXPERTISE WHERE BENCHMARK RESEARCH TRACKS NEARLY 20 YEARS OF DISTRIBUTION CHANGES AND SALES FORECASTS A FULL RANGE OF PRODUCT OFFERINGS IS PRODUCED TO IMPROVE MEMBER INTELLIGENCE ABOUT THE AFTERMARKET INDUSTRY WHILE IT CONTINUES TO ASSIST ITS MEMBERS WITH THEIR RESEARCH NEEDS BY IDENTIFYING, ORGANIZING, AND ANALYZING FOCUSED INFORMATION IN RESPONSE TO TIME-SENSITIVE INQUIRIES SOME OF THE MOST SUCCESSFUL PRODUCTS AVAILABLE TO AAIA MEMBERS ARE THE AWARD WINNING DIGITAL FACTBOOK - A COMPREHENSIVE AND INTERACTIVE OVERVIEW OF THE AUTOMOBILE AFTERMARKET INDUSTRY

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

AAPEX TRADE SHOW AAPEX IS THE LARGEST, INDUSTRY-ONLY TRADE SHOW IN THE WORLD MORE THAN 114,024 PEOPLE PARTICIPATED IN THE NOVEMBER 2012 EVENT AND 58,119 DOMESTIC AND INTERNATIONAL BUYERS ATTENDED THE SHOW THE NUMBER OF EXHIBITORS IN 2012 WAS 2,324 DURING THE SHOW, THERE WERE 36 EDUCATIONAL SESSIONS OFFERED IN WHICH THE ATTENDEES COULD PARTICIPATE COMMUNICATIONS AAIA'S COMMUNICATIONS ENSURES THAT THE ASSOCIATION IS THE VOICE OF THE AUTOMOTIVE AFTERMARKET BY COMMUNICATING ON THE BEHALF OF MEMBERS THROUGH PERIODIC NEWSLETTERS AND MAGAZINES THESE KEEP THE MEMBERS INFORMED OF THE OVERALL AFTERMARKET INDUSTRY, THEIR INDIVIDUAL SEGMENTS OF THE INDUSTRY, AND ASSOCIATION ACTIVITIES

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)? . . . .		No
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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		No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		No
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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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.	25	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
1c			
2a		44	
2b		Yes	
3a		Yes	
3b		Yes	
4a			No
b			
5a			No
5b			No
5c			
6a			No
6b			
7 Organizations that may receive deductible contributions under section 170(c).			
7a			
7b			
7c			
7d			
7e			No
7f			No
7g			
7h			
8			
9			
9a			
9b			
10			
10a			
10b			
11			
11a			
11b			
12a			
12b			
13			
13a			
13b			
13c			
14a			No
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	1a	31	
	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			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31	
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	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt 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	
b	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	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MD
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 type="checkbox"/> Own website <input 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	SUSAN MEDICK 7101 WISCONSIN AVENUE SUITE 1300 BETHESDA, MD (301) 654-6664

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			
<b>1b Sub-Total . . . . .</b>										
<b>c Total from continuation sheets to Part VII, Section A . . . . .</b>										
<b>d Total (add lines 1b and 1c) . . . . .</b>								1,751,412	0	308,237

**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 **19**

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	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
STRATEGIC MANAGEMENT SERVICES 9 PARK STREET 5TH FLOOR BOSTON MA 02108	PR, GRASSROOTS LOBBYING	393,547
PRICEDEX SOFTWARE INC 1864 HWY 2 EAST BOX 458BROCKVILLEONTARIOCAK6V 5V6	PROJECT MANAGEMENT DATA BASE	376,557
MOTOR INFORMATION SYSTEMS PO BOX 277697 ATLANTA GA 30384	COMPUTER SERVICES	229,500
VENABLE LLP PO BOX 62727 BALTIMORE MD 21264	LEGAL	153,449
MAXIMUM MARKETING SERVICES 833 W JACKSON BLVD STE 300 CHICAGO IL 60607	GRASSROOTS COMMUNICATION	131,642

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	10,000			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f . . . . .		10,000			
Program Service Revenue			Business Code				
	2a	SHOW AND SHOW EVENTS	900099	8,024,592	8,024,592		
	b	MEMBERSHIP DUES	900099	3,675,143	3,675,143		
	c	CONFERENCES	900099	2,007,737	2,007,737		
	d	TECHNOLOGY STANDARDS	990099	877,060	877,060		
	e	PUBLICATIONS	541800	115,324	115,324		
	f	All other program service revenue					
	g	Total. Add lines 2a-2f . . . . .		14,699,856			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		580,452		580,452	
	4	Income from investment of tax-exempt bond proceeds . . .					
	5	Royalties . . . . .		2,882		2,882	
	6a	Gross rents	(i) Real	(ii) Personal			
		b	Less rental expenses				
		c	Rental income or (loss)				
		d	Net rental income or (loss) . . . . .				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
		d	Net gain or (loss) . . . . .		706,154	706,154	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	a				
	b	Less direct expenses . . . . .	b				
	c	Net income or (loss) from fundraising events . . .					
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .	a				
	b	Less direct expenses . . . . .	b				
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances . . . . .	a				
	b	Less cost of goods sold . . . . .	b				
	c	Net income or (loss) from sales of inventory . . .					
	Miscellaneous Revenue		Business Code				
	11a	MISCELLANEOUS	900099	209,937			209,937
	b	MANAGEMENT FEES	900099	12,000		12,000	
c	AIA INDUSTRY AWARDS	900099	10,265			10,265	
d	All other revenue . . . . .						
e	Total. Add lines 11a-11d . . . . .		232,202				
12	Total revenue. See Instructions . . . . .		16,231,546	15,406,010	12,000	803,536	

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.	1,283,127			
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.	954,257			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	2,750,299			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	93,248			
9	Other employee benefits.	916,583			
10	Payroll taxes.	253,518			
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	133,772			
c	Accounting.	52,754			
d	Lobbying.	277,849			
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	158,229			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	1,199,879			
12	Advertising and promotion.	36,103			
13	Office expenses.	478,836			
14	Information technology.	344,206			
15	Royalties.				
16	Occupancy.	521,027			
17	Travel.	382,581			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	4,075,919			
20	Interest.	2,290			
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	92,029			
23	Insurance.	87,455			
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	DUES AND MEMBERSHIPS	92,367			
b	EQUIPMENT REPAIRS	31,425			
c	LICENSES AND TAXES	16,659			
d	SPONSORSHIPS	13,035			
e	All other expenses	8,868			
25	Total functional expenses. Add lines 1 through 24e.	14,256,315			
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		150	1	150
	2	Savings and temporary cash investments		3,139,456	2	4,222,231
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		105,315	4	616,145
	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		1,151,485	9	429,656
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a1,183,619			
	b	Less accumulated depreciation	10b954,414	162,514	10c	229,205
	11	Investments—publicly traded securities		18,951,808	11	20,659,207
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		172,996	15	0
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)		23,683,724	16	26,156,594
Liabilities	17	Accounts payable and accrued expenses		951,782	17	1,045,244
	18	Grants payable			18	
	19	Deferred revenue		5,667,935	19	5,260,374
	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	
	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		77,761	25	0
	26	<b>Total liabilities.</b> Add lines 17 through 25		6,697,478	26	6,305,618
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>					
	27	Unrestricted net assets		16,986,246	27	19,850,976
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>					
	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	<b>Total net assets or fund balances</b>		16,986,246	33	19,850,976
	34	<b>Total liabilities and net assets/fund balances</b>		23,683,724	34	26,156,594

Part XIReconciliation 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	16,231,546
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,256,315
3	Revenue less expenses Subtract line 2 from line 1	3	1,975,231
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,986,246
5	Net unrealized gains (losses) on investments	5	889,499
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	19,850,976

Part XIIFinancial 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	2a	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	2b	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	2c	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?	3a	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	3b	

Additional Data

Software ID:

Software Version:

EIN: 52-2172219

Name: AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

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

(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			
TIMOTHY LEE CHAIRMAN	5 00 1 00	X		X				0	0	0
CAL WILKINS VICE PRESIDENT	5 00 1 00	X		X				0	0	0
CURTIS DRAPER DIRECTOR	1 00	X						0	0	0
DAVID SCHEER SECRETARY	5 00 1 00	X		X				0	0	0
DAVID SEGAL MAAP DIRECTOR	1 00	X						0	0	0
DON REIMONDO DIRECTOR	1 00	X						0	0	0
F SCOTT PLETZ DIRECTOR	1 00	X						0	0	0
GARY D PERMAN DIRECTOR	1 00	X						0	0	0
IRA DAVIS VICE PRESIDENT	5 00 1 00	X		X				0	0	0
JIM DYKSTRA DIRECTOR	1 00	X						0	0	0
JOHN QUIRK DIRECTOR	1 00	X						0	0	0
JOHN WASHBISH AAP VICE PRESIDENT	5 00 1 00	X		X				0	0	0
LISA R KRANC VICE PRESIDENT	1 00 1 00	X		X				0	0	0
MICHAEL KLEIN TREASURER	5 00 1 00	X		X				0	0	0
MIKE CARLET DIRECTOR	1 00	X						0	0	0
MIKE FITZGERALD DIRECTOR	1 00	X						0	0	0
MIKE SWEARENGIN DIRECTOR	1 00	X						0	0	0
PATRICIA LAW DIRECTOR	1 00	X						0	0	0
RANDAL WARD DIRECTOR	1 00	X						0	0	0
RAY POHLMAN VICE PRESIDENT	5 00	X		X				0	0	0
RICHARD J JAGO VICE CHAIRMAN	5 00 1 00	X		X				0	0	0
ROBERT F EGAN MAAP PAST CHAIRMAN	5 00 1 00	X		X				0	0	0
ROGER MCCOLLUM DIRECTOR	1 00	X						0	0	0
SCOTT LEPROHON DIRECTOR	1 00	X						0	0	0
SCOTT WEBB DIRECTOR	1 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			
SHERRI RAINS DIRECTOR	1 00	X						0	0	0
THOMAS BEER DIRECTOR	1 00	X						0	0	0
TIMOTHY TRUDOWSKI DIRECTOR	1 00	X						0	0	0
TODD HACK DIRECTOR	1 00	X						0	0	0
TOM PERRY DIRECTOR	1 00	X						0	0	0
WILLIAM MAGGS DIRECTOR	1 00	X						0	0	0
KATHLEEN SCHMATZ PRESIDENT & CEO	40 00 1 00			X				512,291	0	38,460
SUSAN MEDICK CFO/COO	41 00 1 00			X				188,720	0	31,926
RICHARD WHITE SR VICE PRESIDENT	19 00 25 00				X			203,680	0	43,991
AARON LOWE VICE PRESIDENT - GOVT AFFAIRS	46 00					X		169,051	0	45,338
MICHAEL BARRATT SR VP - MEETINGS	44 00					X		149,769	0	38,726
SCOTT LUCKETT VICE PRESIDENT - TECHNOLOGY	41 00					X		155,096	0	19,646
SUSAN KALISH SENIOR DIRECTOR - EDUCATION	40 00					X		126,583	0	41,102
GLEN NORTHUP SR DIR - MEMBER RELATIONS	47 00					X		123,690	0	39,161
SHERYL WILKERSON SR VICE PRESIDENT - GOVT AFFAIRS	40 00					X		122,532	0	9,887

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 AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION	Employer identification number 52-2172219
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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	▶ \$
3	Volunteer hours	

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

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

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	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	▶ \$
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
<b>1</b>	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			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities?			
<b>j</b>	Total. Add lines 1c through 1i.			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912.			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
<b>d</b>	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
<b>1</b>	Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	No
<b>2</b>	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	No
<b>3</b>	Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	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."**

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	3,675,142
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b>	Current year	<b>2a</b>	1,180,616
<b>b</b>	Carryover from last year	<b>2b</b>	
<b>c</b>	Total	<b>2c</b>	1,180,616
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	1,837,571
<b>4</b>	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?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	-656,955

**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)

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ 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.

Name of the organization AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION	Employer identification number 52-2172219
---	--

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

▶ \$ \_\_\_\_\_

**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

b

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

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

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	19,743	17,382	2,361
d	Equipment	481,668	363,330	118,338
e	Other	682,208	573,702	108,506
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				229,205



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

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

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	

**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	THE ASSOCIATION HAS BEEN GRANTED EXEMPTION BY THE INTERNAL REVENUE SERVICE (IRS) FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE (IRC). THE ASSOCIATION IS REQUIRED TO REPORT UNRELATED BUSINESS INCOME TO THE IRS. THE ASSOCIATION FOLLOWS THE ACCOUNTING STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THE ASSOCIATION EVALUATED ITS TAX POSITIONS AND DETERMINED THAT ITS POSITIONS ARE MORE-LIKELY-THAN-NOT TO BE SUSTAINED ON EXAMINATION. THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES. THE TAX RETURNS FOR THE FISCAL YEARS ENDED JUNE 30, 2010 THROUGH 2012 ARE OPEN TO EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

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As Filed Data -

DLN: 93493126012414

Schedule I  
(Form 990)

Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States  
Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990

OMB No 1545-0047  
  
2012  
  
Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization  
AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

Employer identification number  
52-2172219

Part IGeneral 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) CAR CARE COUNCIL 7101 WISCONSIN AVE STE 1300 BETHESDA, MD 20814	52-1250966	501(C)(3)	450,094				GENERAL SUPPORT
(2) NATIONAL AUTOMOTIVE TECHNICIANS EDUCATION FUND 101 BLUE SEAL DR STE 101 LEESBURG, VA 20175	36-2957357	501(C)(3)	10,000				GENERAL SUPPORT
(3) THE AFTERMARKET FOUNDATION PO BOX 3889 TEQUESTA, FL 33469	23-6392256	501(C)(3)	34,833				GENERAL SUPPORT
(4) AUTOMOTIVE HALL OF FAME 21400 OAKWOOD BLVD DEARBORN, MI 48124	38-3320345	501(C)(3)	7,000				GENERAL SUPPORT
(5) UNIVERSITY OF THE AFTERMARKET FOUNDATION 4000 WHITING DR MIDLAND, MI 48640	38-1624684	501(C)(3)	50,100				GENERAL SUPPORT
(6) CONSUMERS FOR CHOICE CONVENIENCE AND SAVINGS IN AUTOMOBILE REPAIRS (AND MA 9 PARK STREET STE 200 BOSTON, MA 02108	45-3457951	501(C)(6)	700,000				GENERAL SUPPORT
(7) AMERICAN RED CROSS 2025 E ST NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	10,000				GENERAL SUPPORT
(8) GLOBAL SUTOMOTIVE AFTERMARKET SYMPOSIUM 7101 WISCONSIN AVE STE 1300 BETHESDA, MD 20814	26-1458377	501(C)(3)	10,000				GENERAL SUPPORT

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

7

3

Enter total number of other organizations listed in the line 1 table . . . . .

1

**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 AAIA REQUIRES MONTHLY REPORTING FROM ENTITIES, COPIES OF SOURCE DOCUMENTS AND CONTINUOUS UPDATES FROM RESPECTIVE COMMITTEE LEADERSHIP



Software ID:

Software Version:

EIN: 52-2172219

Name: AUTOMOTIVE AFTERMARKET INDUSTRY 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
CAR CARE COUNCIL7101 WISCONSIN AVE STE 1300 BETHESDA,MD 20814	52-1250966	501(C)(3)	450,094				GENERAL SUPPORT
NATIONAL AUTOMOTIVE TECHNICIANS EDUCATION FUND101 BLUE SEAL DR STE 101 LEESBURG,VA 20175	36-2957357	501(C)(3)	10,000				GENERAL SUPPORT

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
THE AFTERMARKET FOUNDATIONPO BOX 3889 TEQUESTA,FL 33469	23-6392256	501(C)(3)	34,833				GENERAL SUPPORT
AUTOMOTIVE HALL OF FAME21400 OAKWOOD BLVD DEARBORN,MI 48124	38-3320345	501(C)(3)	7,000				GENERAL SUPPORT

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
UNIVERSITY OF THE AFTERMARKET FOUNDATION4000 WHITING DR MIDLAND,MI 48640	38-1624684	501(C)(3)	50,100				GENERAL SUPPORT
CONSUMERS FOR CHOICE CONVENIENCE AND SAVINGS IN AUTOMOBILE REPAORS (AND MA9 PARK STREET STE 200 BOSTON,MA 02108	45-3457951	501(C)(6)	700,000				GENERAL SUPPORT

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 RED CROSS 2025 E ST NW WASHINGTON,DC 20006	53-0196605	501(C)(3)	10,000				GENERAL SUPPORT
GLOBAL SUTOMOTIVE AFTERMARKET SYMPOSIUM7101 WISCONSIN AVE STE 1300 BETHESDA,MD 20814	26-1458377	501(C)(3)	10,000				GENERAL SUPPORT

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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  
AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

Employer identification number  
52-2172219

Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input checked="" 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 checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <div><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></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4a	Yes	
		4b		No
		4c		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III.	5a		
		5b		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III.	6a		
		6b		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in 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)KATHLEEN SCHMATZ PRESIDENT & CEO	(i)	367,021	132,922	12,348	25,000	13,460	550,751	0
	(ii)	0	0	0	0	0	0	0
(2)SUSAN MEDICK CFO/COO	(i)	170,488	11,000	7,232	18,764	13,162	220,646	0
	(ii)	0	0	0	0	0	0	0
(3)RICHARD WHITE SR VICE PRESIDENT	(i)	193,424	10,000	256	20,219	23,772	247,671	0
	(ii)	0	0	0	0	0	0	0
(4)AARON LOWE VICE PRESIDENT - GOVT AFFAIRS	(i)	151,781	17,000	270	16,470	28,868	214,389	0
	(ii)	0	0	0	0	0	0	0
(5)MICHAEL BARRATT SR VP - MEETINGS	(i)	125,656	8,000	16,113	14,900	23,826	188,495	0
	(ii)	0	0	0	0	0	0	0
(6)SCOTT LUCKETT VICE PRESIDENT - TECHNOLOGY	(i)	144,837	10,000	259	15,338	4,308	174,742	0
	(ii)	0	0	0	0	0	0	0
(7)SUSAN KALISH SENIOR DIRECTOR - EDUCATION	(i)	120,308	6,000	275	16,302	24,800	167,685	0
	(ii)	0	0	0	0	0	0	0
(8)GLEN NORTHUP SR DIR - MEMBER RELATIONS	(i)	113,431	10,000	259	12,981	26,180	162,851	0
	(ii)	0	0	0	0	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	
	PART I, LINE 4A	

**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  
AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION**Employer identification number**

52-2172219

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE OFFICERS OF THE ASSOCIATION AND AT LEAST ONE DIRECTOR FROM THE AUTOMOTIVE WHOLESALE DISTRIBUTION SEGMENT SHALL BE KNOWN AS THE EXECUTIVE COMMITTEE, WHICH COMMITTEE IN THE INTERIM PERIOD BETWEEN BOARD MEETINGS SHALL HAVE AND MAY EXERCISE THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE ASSOCIATION AND SHALL REPORT ALL SUCH ACTIONS TO THE BOARD AT THE NEXT MEETING FOLLOWING SUCH ACTION. NO MEMBER OF THE EXECUTIVE COMMITTEE SHALL SIT ON ANOTHER AUTOMOTIVE TRADE ASSOCIATION BOARD DURING THE ELECTED TERM AS AN OFFICER. THE INCOMING CHAIRMAN SHALL HAVE HAD EXECUTIVE COMMITTEE EXPERIENCE, AND THERE SHALL BE NO REQUIRED ROTATION OF SEGMENTS. IN ADDITION THE EXECUTIVE COMMITTEE SHALL (A) ACT AS A FINANCE COMMITTEE WHICH SHALL PROVIDE RULES AND REGULATIONS FOR THE AUTHORIZATION OF EXPENDITURES AND THE APPROVAL OF VOUCHERS FOR THE PAYMENT OF MONEY, AND PRIOR TO THE ANNUAL MEETING TO PREPARE A SUGGESTED BUDGET FOR THE ENSUING FISCAL YEAR FOR APPROVAL BY THE BOARD OF DIRECTORS. ALL EXPENDITURES, PAYMENT OF MONEY AND FINANCIAL OBLIGATIONS OF THE ASSOCIATION ARE SUBJECT TO THE JURISDICTION OF THE FINANCE COMMITTEE, AND AN AUDIT OF THE BOOKS OF THE ASSOCIATION SHALL BE MADE BY A FIRM OF CERTIFIED PUBLIC ACCOUNTANTS AT LEAST ONCE EACH YEAR. THE CERTIFIED PUBLIC ACCOUNTANTS SELECTED BY THE ASSOCIATION SHALL BE REVIEWED AT LEAST EVERY FIVE YEARS. (B) TO ACT AS A LIAISON COMMITTEE IN ORDER TO DEVELOP AND MAINTAIN CORDIAL AND PRODUCTIVE RELATIONSHIPS WITH ALL INDUSTRY GROUPS. (C) TO ACT AS BYLAWS COMMITTEE IN ORDER TO ASSURE THAT THE ASSOCIATION'S BYLAWS ARE KEPT CONSISTENT WITH AND RESPONSIBLE TO POLICY CHANGES INITIATED AND APPROPRIATE WITHIN THE ORGANIZATION. (D) TO ACT AS A MEMBERSHIP DUES AND FEES COMMITTEE, RECOMMENDING DUES, FEES AND ASSESSMENTS FOR APPROVAL BY THE BOARD OF DIRECTORS.



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

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

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

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE CFO/COO WILL REVIEW THE PREPARED FORM 990 BY TRACING ALL NUMBERS TO THE GENERAL LEDGER AND READING OVER THE QUESTIONS TO ENSURE ALL ARE ANSWERED CORRECTLY THE AUDIT COMMITTEE WILL MEET, AFTER THE CFO/COO'S REVIEW, WITH THE ASSOCIATION'S ACCOUNTING FIRM TO REVIEW THE FORM 990 ON BEHALF OF THE FULL BOARD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ALL BOARD MEMBERS ARE REQUIRED TO SIGN A STATEMENT PRIOR TO ALL MEETINGS NOTING THAT ANY AND ALL CONFLICT OF INTERESTS HAVE BEEN REPORTED TO THE BOARD OR TO THE ASSOCIATION'S GENERAL COUNSEL. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BODY OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMINTY WITH THE ABOVE DETERMINATION IS SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE CEO IS REVIEWED BY THE COMPENSATION COMMITTEE, WHICH IS MADE UP OF THE EXECUTIVE COMMITTEE MEMBERS. THE COMPENSATION COMMITTEE WILL USE OUTSIDE HR CONSULTANTS AND/OR SALARY SURVEYS TO BENCHMARK THE CEO'S COMPENSATION. ALL SENIOR STAFF POSITIONS ARE REVIEWED BY THE CEO. ALL SALARIES ARE COMPARED TO INDUSTRY SALARY SURVEYS ON AN ANNUAL BASIS. BENCHMARKING OF THE SENIOR STAFF'S SALARIES WAS DONE BY AN OUTSIDE FIRM IN 2012.

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

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  
AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

Employer identification number  
52-2172219

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) FAIR (CAR CARE COUNCIL)  7101 WISCONSIN AVENUE STE 1300  BETHESDA, MD 20814 52-1250966	CAR CARE CAMPAIGN - RAISING CONSUMER AWARENESS	MD	501(C)(3)	509(A)(3)	AAIA	Yes	
(2) AUTOMOBILE AFTERMARKET POLITICAL ACTION COMMITTEE  7101 WISCONSIN AVENUE STE 1300  BETHESDA, MD 20814 36-3756801	POLITICAL ACTION	MD	527		AAIA	Yes	
(3) AUTOMOBILE AFTERMARKET POLITICAL EDUCATION COMMITTEE  7101 WISCONSIN AVENUE STE 1300  BETHESDA, MD 20814	POLITICAL ACTION	MD	527		AAIA	Yes	



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) Disproportionate 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) APPEX  10072 W 190TH PL MOKENA, IL 60448 36-4257968	TRADE SHOW	IL	AAIA	RELATED	7,954,592	637,802		No		Yes		60 000 %
(2) HDAW  10072 W 190TH PL MOKENA, IL 60448 16-1724561	TRADE SHOW	IL	AAIA	RELATED	706,256	42,264		No		Yes		33 330 %

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) ISC  7101 WISCONSIN AVENUE BETHESDA, MD 20814 38-3657088	NONE	MD	AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION	C			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

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

Yes

1m

No

1n

Yes

1o

Yes

1p

No

1q

Yes

1r

No

1s

No

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CCC (CAR CARE COUNCIL)	B	450,094	FMV
(2) CCC (CAR CARE COUNCIL)	L	101,915	FMV
(3) CCC (CAR CARE COUNCIL)	O	101,915	FMV

Schedule R (Form 990) 2012

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]

**Software ID:**  
**Software Version:**  
**EIN:** 52-2172219  
**Name:** AUTOMOTIVE AFTERMARKET INDUSTRY ASSOCIATION

**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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