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DLN: 93493317068484

Form **990** 

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	endar year, or tax year beginnin	g 01-01-2013 ,2013, and endir	ng 12-31-	2013	_		
		applicable	C Name of organization AMERICAN TRUCKING ASSOCIATION	NS INC			D Emplo	yer id	entification number
	dress cl	-	Doing Business As				53-00	2697	70
Na	me cha	ange	Doing Business As						
Ind	tial retu	ım		naıl ıs not delivered to street address)	Room/suite	!	E Telepho	one nu	mber
Te	rmınate	ed	950 N GLEBE ROAD Suite 210				(703)	838-	1050
Am	ended	return	City or town, state or province, coul ARLINGTON, VA 222034181	ntry, and ZIP or foreign postal code			(703)	030-	1939
Ap	plicatio	n pending	ARLINGTON, VA 222034181				<b>G</b> Gross r	eceipts	\$ \$ 64,459,364
			F Name and address of prin	ncıpal officer		<b>H(a)</b> Is th	ıs a group	retur	n for
			WILLIAM GRAVES 950 N GLEBE ROAD STE 2:	10		subo	rdinates?		┌ Yes  No
			ARLINGTON, VA 2220341			<b>H(b)</b> Are a	all subordi	nates	
						ınclu	ded?		
I Ta	x-exen	npt status	501(c)(3)   501(c) ( 6 ) ◀ (	(insert no )	7	If "N	o," attach	a list	(see instructions)
J W	ebsit	e:► HT	TP //WWW TRUCKING ORG			H(c) Gro	ıp exempt	ion ni	umber ►
<b>K</b> For	m of or	rganızatıor	Corporation Trust Associatio	n	<u> </u>	<b>L</b> Year of fo	mation 19	33 I	M State of legal domicile DC
Pa	rt I	Sum	ımary						
	1	Briefly d	escribe the organization's mission	on or most significant activities					
		THEPU	RPOSE OF THE AMERICAN TR		ISTO	PROMOTE	COMMON	BUS	INESS INTERESTS
a		WITHIN	THE TRUCKING INDUSTRY						
ĕ									
₽									
<u>ş</u>	,	Check t	his box দ if the organization di	scontinued its operations or disc	nosed of	more than 3	5% of its	net a	ssets
Governance	~	CHECK C	ms box F   m the organization ar	scontinued its operations of disp	, , , , , , , , , , , , , , , , , , ,	more enam.	25 70 01 165		
	3	Number	of voting members of the govern	ing body (Part VI, line 1a) .				3	158
Activities &	4	Number	of independent voting members	of the governing body (Part VI, I	ıne 1b)			4	158
<u>₹</u>	5	Total nu	mber of individuals employed in	calendar year 2013 (Part V , line	2a) .			5	195
ď	6	Total nu	mber of volunteers (estimate if n	ecessary)				6	200
			related business revenue from P					7a	8,665,467
	b	Net unre	elated business taxable income f	rom Form 990-T, line 34				7b	-41,707
						Pric	or Year		Current Year
a)	8		ibutions and grants (Part VIII, li			1,100,8		1,098,762	
Revenue	9		am service revenue (Part VIII, li		35,600,0	-	36,884,040		
₩.	10		tment income (Part VIII, column		2,902,0		1,202,598		
	11 12		revenue (Part VIII, column (A), revenue—add lines 8 through 11		•		1,090,8	352	1,486,051
	12		· · · · · · · · · · ·				40,693,8	343	40,671,451
	13		s and sımılar amounts paıd (Part				683,	328	753,040
	14	Benef	its paid to or for members (Part I	X, column (A), line 4)				0	0
ø	15	Saları 5–10	es, other compensation, employe	ee benefits (Part IX, column (A),	lines		19,325,0	136	20,766,565
Expenses	16a		) ssional fundraising fees (Part IX,	column (A) line 11e)			10,020,	0	0
⊕ ⊕	ь		indraising expenses (Part IX, column (D						
Ð	17		expenses (Part IX, column (D	···			22,531,8	339	18,648,082
	18		expenses Add lines 13-17 (mu				42,540,	-	40,167,687
	19		nue less expenses Subtract line				-1,846,	-	503,764
<u>%</u> &				-			g of Curre		End of Year
9 <u>00</u>							/ear		
Net Assets or Fand Balances	20		assets (Part X, line 16)				69,850,	-	65,989,838
# PE	21		liabilities (Part X, line 26)				46,810,	-	38,610,531
	22		ssets or fund balances Subtract	line 21 from line 20			23,039,6	61	27,379,307
	rt II		nature Block						
my k	nowle	dge and	perjury, I declare that I have ex- belief, it is true, correct, and con nowledge						
		T <sub>k</sub>				12	014-11-13		
Sigr	1	Sign	ature of officer				ate		
Her			LAM GRAVES PRESIDENT AND CEO						
		<u> </u>	Print/Type preparer's name	Preparer's signature	Dat	e la	eck 🗀 ıf	PTIN	
Paid	d	<u> </u>	KPMG LLP - JOCELYNE C MILLER	<u> </u>		self	-employed		34378
	u pare		Firm's name 🕨 KPMG LLP			Fim	n's EIN 🟲		
	pai e Mn		Firm's address 🕨 1676 International Driv	e		Pho	ne no (703	) 286-	8000

McLean, VA 22102

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

✓ Yes No

Form	990 (2013)			Page
Par	t IIII Statement of Program Service	<u>-</u>		_
	Check if Schedule O contains a respo	onse or note to any line in this Part III		· · · · · · · · · · · · · · · · · · ·
1	Briefly describe the organization's mission			
TRU ACT PRO	CKING INDUSTRY WITH ONE UNITED VOICTIONS, TO ADVANCE THE TRUCKING INDUVIDE EDUCATIONAL PROGRAMS AND IND	ASSOCIATIONS, INC IS TO SERVE AND REPR CE, TO INFLUENCE IN A POSITIVE MANNER F JSTRY'S IMAGE, EFFICIENCY, COMPETITIVEN DUSTRY RESEARCH, TO PROMOTE SAFETY AN TO STRIVE FOR A HEALTHY BUSINESS ENVIR	FEDERAL AND STA NESS, AND PROFIT ND SECURITY ON (	TE GOVERNMENTAL ABILITY, TO
_				
2	the prior Form 990 or 990-EZ?	Int program services during the year which were n	ot listed on	┌ Yes ┌ No
	If "Yes," describe these new services on Sc	hedule O		
3	Did the organization cease conducting, or m services?	ake significant changes in how it conducts, any p	orogram 	┌ Yes ┌ No
	If "Yes," describe these changes on Schedu	ıle O		
4		e accomplishments for each of its three largest pr ) organizations are required to report the amount of each program service reported		
4a	(Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
		JIT AND RETAIN MEMBERS TO JOIN THE ASSOCIATION A DIN THE INDUSTRY AS THEY DEVELOP RULES AND REGULATIONS		
4b	(Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
		ATIONAL WEEKLY NEWSPAPER FOR THE TRUCKING INDUSTF ,000 PUBLISHED MONTHLY MAGAZINES FOR LIGHT AND MEI F INFORMATION FOR THE TRUCKING INDUSTRY		
4c	(Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
		IUAL MEETINGS FOR DIFFERENT SEGMENTS OF THE TRUCK! TY, SECURITY, ENVIRONMENTAL, ETC MEETINGS WERE HEI		
	Other program services (Describe in Sched	dula O )		

) (Revenue \$

including grants of \$

(Expenses \$

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 $A$	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\textcircled{a}}$	3	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9	Yes	
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	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{\bullet}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule $E$	13		No
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, 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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

4.1	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	 No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   147		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
ı	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	00		
	II 163, to line 38 of 30, the the organization line Form 6000-1"	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	<b>7</b> c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h	ı	Ì

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "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 or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
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?			
а	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

- | Own website | Another's website | ✓ Upon request | 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JAMES R DUCKWORTH 950 N GLEBE ROAD STE 210 ARLINGTON, VA 222034181 (703)838-1959

Form 990	(2013	
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М	а	ч	u	•

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . . . . . . .

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	( <b>A)</b> Name and Title	(B) Average hours per week (list any hours	more t perso	tion ( han d n is l	ne l both	box, an d	heck unless officer stee)	i	(D) Reportable compensation from the organization (W	from related - organizations (W	<sub>/-</sub>	(F) Estima amount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC	) 2/1099-MISC)	C	organizati relate organiza	ed
											+		
											+		
											+		
											_		
											+		
1b	Sub-Total				<u>.                                    </u>	<u> </u>		<b> </b>					
c	Total from continuation sheet	s to Part VII, S	ection A	٠.			•	•					
d	Total (add lines 1b and 1c) .				•	•	•	Þ	4,738,8		0		331,110
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more	than			
												Yes	
3	Did the organization list any <b>fc</b> on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee,	, or highest comp	ensated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ			-					-	on or individual for	5	. 55	No
	ection B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization from the organizati	e highest comp										tay your	
	compensation from the organiz	(A)	nipens	ation	101	tile C	.arenda	агуе	ar ending with or	(B)	1011 S	tax year (C	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
PUBLISHERS PRESS INCORPORATED, PO BOX 37500 LOUISVILLE KY 40233	PUBLISHING	971,927
AQUARIAN LLC, 746 WALKER RD 12 PO BOX 1110 GREAT FALLS VA 22066	PRODUCTION	665,832
HITT CONTRACTING INC, PO BOX 602760 CHARLOTTE NC 282602760	GENERAL CONTRACTING	249,294
CCR EVENTS, 7220 OAKLEY INDUSTRIAL BLVD UNION CITY GA 30291	PRODUCTION	217,569
ROBBINS RUSSELL ENGLERT ORSECK UN, 1801 K ST NW SUITE 411L WASHINGTON DC 20006	LEGAL	200,000

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 ►13

Contributions, Gifts, Grants and Other Similar Amounts	1a
Program Serwice Revenue	2. I
evenue	3 4 5 6 I V V V V V V V V V V V V V V V V V V
Other R	
	114

VIII	Statement o	of <b>Revenue</b> ule O contains a respo	nse or note to any lu	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under
					revenue		sections 512-514
1a	Federated cam	paigns 1a					
ь	Membership du	ies 1b					
c	Fundraising ev	ents <b>1c</b>					
d	Related organiz	zations 1d					
e	Government grant		0				
	_						
f	similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
g	Noncash contributi 1a-1f \$	ons included in lines					
h	Total. Add line:	s 1a-1f	👢	1,098,762			
			Business Code				
2a	MEMBERSHIP DUE	S	900099	17,912,254	17,912,254		
b	PERIODICALS		541800	10,230,857	1,639,868	8,590,989	
С	MEETINGS		900099	8,542,781	8,542,781		
d	SPONSORSHIPS		900099	133,000	133,000		
e	SUBSCRIPTIONS		511120	65,148	65,148		
f	All other progra	am service revenue					
g	Total. Add lines	s 2a-2f		36,884,040			
3		ome (including dividen		486,432			486,432
4		ar amounts)	1	100,432			400,432
5	Royalties .		proceeds -	665,604			665,604
	,	(ı) Real	(II) Personal				
6a	Gross rents	1,753,801					
b	Less rental expenses	1,659,998					
С	Rental income or (loss)	93,803	0				
d	, ,	me or (loss)		93,803		55,077	38,726
		(ı) Securities	(II) O ther				
7a	Gross amount from sales of assets other than inventory	22,552,771	19,310				
b	Less cost or other basis and sales expenses	21,855,915					
С	Gain or (loss)	696,856	19,310				
d	Net gain or (los			716,166			716,166
8a	events (not inc \$						
	of contributions See Part IV, lir	s reported on line 1c) ne 18 a					
ь	Less direct ex	penses b					
С	Net income or	(loss) from fundraising	events 🛌	0			
9a		rom gaming activities ne 19 a					
b	Less direct ex	penses <b>b</b>					
1		(loss) from gamıng actı	vities	0			
10a	Gross sales of returns and allo		908,036				
ь	Less costofa	oods sold <b>b</b>	272,000				
		(loss) from sales of inv		636,036	616,635	19,401	
	Miscellaneou		Business Code				
11a	CONFERENCE	SERVICES	561499	89,683	89,683		
b	MISCELLANE	ous	900099	925	925		
c							
d		ue					
e	Total. Add lines		•	90,608			
12	Total revenue.	See Instructions .	🕨	40,671,451	29,000,294	8,665,467	1,906,928

# Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4)	) organizations must complete all co	lumns  All other organizations must complete column (A )

	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C)	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	753,040			·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,837,319			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	13,678,927			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	250,657			
9	Other employee benefits	1,759,798			
10	Payroll taxes	1,239,864			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	76,638			
С	Accounting	309,062			
d	Lobbying	254,801			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	66,723			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,625,793			
12	Advertising and promotion	469,900			
 L3	Office expenses	1,753,987			
L4	Information technology	542,921			
L5	Royalties	0			
L6	Occupancy	2,843,886			
-0 17	Travel	1,622,131			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,999,597			
20	Interest	276,572			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	2,365,712			
23	Insurance	177,044			
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)				
а	PRINTING & PUBLICATIONS	1,155,424			
b	BAD DEBT EXPENSE	632,991			
c	MEMBER RELATED SERVICES	300,997			
d	MEMBERSHIP DUES	159,962			
e	All other expenses	13,941			
25	Total functional expenses. Add lines 1 through 24e	40,167,687			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in	this Pa	art X			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			-237,728	1	1,255,802
	2	Savings and temporary cash investments			1,710,052	2	2,609,033
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			3,931,826	4	3,131,835
ts	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees Complete P. Schedule L	art II (	of	0	5	0
	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrıl mploy	outing employers		6	0
Assets	7	Notes and loans receivable, net			0	7	
AS	8	Inventories for sale or use			234,970		161,568
	9	Prepaid expenses and deferred charges			4,841,794	9	4,986,398
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		46,845,128	, ,	9	4,900,390
	ь	Less accumulated depreciation	10b	13,234,265	34,819,891	10c	33,610,863
	11	Investments—publicly traded securities		<u> </u>	24,549,411	11	20,234,339
	12	Investments—other securities See Part IV, line 11			0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0		
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34).			69,850,216	-	65,989,838
	17	Accounts payable and accrued expenses			17,022,042	17	14,628,644
	18	Grants payable			17,022,042	18	14,020,044
	19	Deferred revenue			5,328,428		6,810,890
	20				3,320,420	20	0,010,000
		Tax-exempt bond liabilities			1,591,278	20	1,591,278
eS.	21	Escrow or custodial account liability Complete Part IV of Sch			1,591,278	21	1,591,276
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	fied	·			0
<u>.e</u>		persons Complete Part II of Schedule L			0	22	0
_	23	Secured mortgages and notes payable to unrelated third partie			16,388,601	23	9,336,948
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of	Schedule	6,480,206	25	6,242,771
	26	Total liabilities. Add lines 17 through 25			46,810,555	26	38,610,531
—— Ф	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			10,010,000		23,312,221
Ë	27	Unrestricted net assets			22,138,000	27	26,400,122
<u>छ</u>	28	Temporarily restricted net assets	•		901,661	28	979, 185
Fund Balance	29	Permanently restricted net assets			0	29	0
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check h					
		complete lines 30 through 34.	GIG F	, and			
0.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other				32	
Net /	33	Total net assets or fund balances			23,039,661	33	27,379,307
Ž	34	Total liabilities and net assets/fund balances			69,850,216	34	65,989,838
	1		- •		1 33,000,210	<b>-</b>	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		40,6	571,451
2	Total expenses (must equal Part IX, column (A), line 25)	2		40 1	L67,687
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			503,764
7	- Net assets of failed balances at beginning of year (must equal r arc X, fine 33, column (A))	4		23,0	39,661
5	Net unrealized gains (losses) on investments	5		5	596,942
6	Donated services and use of facilities				
7	Investment expenses	6			
,		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9		3,2	238,940
	column (B))	10		27,3	379,307
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u>· · · </u>			<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved or	וו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	I			
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?	<b>:</b>	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

**EIN:** 53-0026970

Name: AMERICAN TRUCKING ASSOCIATIONS INC

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		_,,	related organizations
Duane W Acklie	1 0	×						0	0	0
Past Chairman Jason H Andrus	1 0									
State Vice President		Х						0	0	0
Ralph W Arthur At-Large Member	1 0	×						0	0	0
Scott C Arves	1 0	×						0	0	0
At-Large Member  Darrel Banning	1 0									
State Vice President		Х						0	0	0
Rıchard Bartolıc State Vice President	1 0	×						o	0	О
Steve Bates	1 0	х						0	0	0
State Vice President Walter G Bay	1 0							_	_	
At-Large Member Carı Baylor	1.0	×						0	0	0
State Vice President	10	x						0	0	0
Robert R Baylor	1 0	х						0	0	0
At-Large Member  David C Berry	1 0							0	0	0
At-Large Member Albert Y Bingham Jr	1 0	×						0	0	<u> </u>
At-Large Member		Х						0	0	0
Donald M Bowman Jr	1 0	×						0	0	0
Past Chairman Andrew T Boyle	1 0	×						0	0	0
State Vice President  Marc D Boyle	1 0									
At-Large Member		Х						0	0	0
Thomas S Brennan State Vice President	1 0	x						0	0	О
Gregory D Brown	1 0	×						0	0	0
State Vice President Carl Bumgarner	1 0									
State Vice President		Х								
Rıchard E Bundschuh State Vıce President	1 0	x						0	o	О
Chris N Bunning	1 0	X						0	0	0
At-Large Member Kevin W Burch	5 0							-	_	
Vice Chairman		Х		Х				0	0	0
James Burg At-Large Member	1 0	×						0	0	0
Fred C Burns Jr	1 0	×						0	0	0
Past Chairman Philip L Byrd Sr	20 0									
Chairman		Х		Х				0	0	0
Michael S Card  Immediate Past Chairman	5 0	×						0	0	0
anniculate Fast Chainnan	1	<u> </u>			1	<u> </u>		l	<u> </u>	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee W Tobin Cassels III 1 0 Χ 0 0 At-Large Member William T Cassels Jr 1 0 Χ 0 0 Past Chairman Bryan Keith Christian 1 0 Χ 0 0 State Vice President Randall J Clifford 1 0 0 0 0 Х At-Large Member David S Congdon 10 Х 0 0 0 At-Large Member Thomas G Connard 1.0 Χ 0 0 Conference Vice President Christopher Ronald Cooper 10 Χ 0 0 0 At-Large Member Rocque D Dameo 1 0 Χ 0 0 O Emeritus Member Leo Diaz 5 0 Χ 0 0 Carrier Policy Committee Chair Corry Dickerson 10 0 0 Χ State Vice President James H Dixon 1 0 Χ 0 0 0 Emeritus Member Joseph M Donald III 5 0 Χ 0 0 0 Carrier Policy Committee Chair G Mack Dove 10 Χ 0 0 At-Large Member Shepard Dunn 10 0 0 Х 0 At-Large Member Reggie Dupre' 5 0 Χ 0 0 Carrier Policy Committee Chair Daniel J Einwechter 1 0 Χ 0 0 At-Large Member D Jeffrey England 10 Χ 0 0 At-Large Member Daniel E England 5 0 Χ 0 0 0 Second Immediate Past Chairman William K England 1 0 0 Χ 0 Emeritus Member Gary R Enzor 1 0 0 0 Χ At-Large Member Robey W Estes Jr 10 Х 0 0 0 At-Large Member Calvin E Ewell 1 0 0 0 Χ State Vice President Alvin Leon Foley 1 0 Χ 0 0 At-Large Member Frank T Fujimura 10 Χ 0 0 State Vice President Charles Wayne Gaumer 1 0 0 Χ 0 0 State Vice President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours organizations (Wand a director/trustee) from the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee Philip Scott George 1 0 Χ 0 0 State Vice President Michael J Gerdin 10 Χ 0 0 At-Large Member Steve Gordon 1 0 Χ 0 0 At-Large Member Joseph A Greenstein 1 0 0 0 0 Х State Vice President Randy P Guillot 10 Х 0 0 0 Conference Vice President Michael J Habeck 1.0 Χ 0 0 State Vice President Charles L Hammel III 10 Χ 0 0 0 At-Large Member John Hausladen 1 0 Χ 0 0 O TAEC Representative Joseph D Hayden 1 0 Χ 0 0 State Vice President Erich H Helge 10 0 0 Χ State Vice President John T Hickerson 1 0 Χ 0 0 0 State Vice President Peter Hill Jr 1 0 Χ 0 0 0 At-Large Member G Tommy Hodges 5 0 Χ 0 0 ATA Audit Committee Chairman John N Hofstetter 10 0 0 Х 0 At-Large Member Steve Holtgeerts 10 Χ 0 0 State Vice President D Mitchell Jackson 1 0 Χ 0 0 At-Large Member William E Jayne III 10 Χ 0 0 At-Large Member William E Jayne Jr 1 0 Χ 0 0 0 **Emeritus Member** Thomas F Jensen 5 0 0 Χ 0 Carrier Policy Committee Chair Mike Jimenez 1 0 0 0 Χ State Vice President Jeff D Jones 10 Х 0 0 0 Allied Member John Kaburick 1 0 0 0 Χ At-Large Member Leland O Karras 5.0 Χ 0 0 Carrier Policy Committee Chair Michael Kelley 10 Χ 0 0 At-Large Member G Larry Kerr 5 0 0 0 Χ 0

Small Carrier Committee Chair

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee Kate Killory 1 0 Χ 0 0 State Vice President Kevin P Knight 1 0 Χ 0 0 At-Large Member Allen I Koenig 1 0 Χ 0 0 Emeritus Member Robert A Kortenhaus Sr 1 0 0 0 0 Х At-Large Member Robert J Kortenhaus 10 Х 0 0 0 Conference Vice President Tom B Kretsinger Jr 5.0 Χ 0 0 ATA Litigation Center Chairman Ray Kuntz 10 Χ 0 0 0 Past Chairman Cheryl P Lapaglia 1 0 Χ 0 0 O State Vice President Thomas Lee 1 0 Χ 0 0 State Vice President Kenneth W Leicht 10 0 0 Χ State Vice President Kevin Lhotak 1 0 Χ 0 0 0 State Vice President David Littlejohn 5 0 Χ 0 0 0 Carrier Policy Committee Chair Christopher B Lofgren PhD 10 Χ 0 0 At-Large Member William J Logue 10 0 0 0 Х At-Large Member L Duane Long 15 0 Χ Χ 0 0 First Vice Chairman Robert E Low 1 0 Χ 0 0 At-Large Member Anne M Lynch 10 Χ 0 0 TAEC Representative Bruce MacRae 1 0 Χ 0 0 0 State Vice President John Majors 1 0 0 Χ 0 State Vice President David Manning 5 0 Х 0 0 Χ Vice Chairman Jeffrey McCaig 10 Х 0 0 0 At-Large Member David G McCorkle 1 0 0 0 Х Past Chairman LaVern McCorkle 1 0 Χ 0 0 State Vice President C James McCornick 10 Χ 0 0 Past Chairman Harry McDonald 1 0 0 0 Χ 0 State Vice President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee Robert T McDowell 1 0 Χ 0 0 State Vice President H Winston McHenry 1 0 Χ 0 0 State Vice President Judy R McReynolds 1 0 Χ 0 0 At-Large Member Edwin A Meyer 1 0 0 0 0 Х State Vice President Larry W Miller 10 Х 0 0 0 State Vice President Reid Miura 1.0 Χ 0 0 State Vice President J Lavon Morton 5 0 Χ 0 0 0 Carrier Policy Committee Chair C Randal Mullett 1 0 Χ 0 0 O At-Large Member Dennis A Nash 1 0 Χ 0 0 At-Large Member Steven L Niswander 10 0 0 Χ State Vice President Albert 1 Nunes 1 0 Χ 0 0 0 State Vice President Richard O'Dell 1 0 Χ 0 0 0 At-Large Member Howard J O'Malley Jr 10 Χ 0 0 At-Large Member Danny Opie 10 0 0 Х 0 State Vice President Donald G Oren 1 0 Χ 0 0 At-Large Member Tonn M Ostergard 1 0 Χ 0 0 At-Large Member Gregory L Owen 10 Χ 0 0 At-Large Member David R Parker 1 0 Χ 0 0 0 At-Large Member G Clifton Parker 1 0 0 Χ 0 At-Large Member John Paugh 1 0 0 0 Χ State Vice President Louis E Pfrangle 10 Х 0 0 0 State Vice President David Pohl 5 0 0 0 Х Carrier Policy Committee Chair John Pope 1 0 Χ 0 0 State Vice President Barry E Pottle 10 0 Χ 0 0 ATA Truck Pac Chairman Chelsea Pottle 1 0 0 Χ 0 0

State Vice President

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee Charles Ramorino 1 0 Χ 0 0 Past Chairman Robert Ramonno 1 0 Χ 0 0 At-Large Member William H Reed Jr 1 0 Χ 0 0 At-Large Member Richard S Reiser 1 0 0 0 0 Х At-Large Member Mike Riggs 10 Х 0 0 0 Conference Vice President Edward A Rocha 1.0 Χ 0 0 Emeritus Member Everett Roehl 10 Χ 0 0 0 At-Large Member Richard Roehl 1 0 Χ 0 0 O State Vice President John Roswick 1 0 Χ 0 0 State Vice President Stephen J Rush 10 0 0 Χ Conference Vice President Stephen Russell 1 0 Χ 0 0 0 At-Large Member Gary Salisbury 1 0 Χ 0 0 0 At-Large Member Nancy Sawyer 10 Χ 0 0 State Vice President Robert J Schaupp 10 0 0 0 Х State Vice President Robert W Schomber 1 0 Χ 0 0 0 State Vice President David Schroyer 1 0 Χ 0 0 State Vice President Lee Philip Shaffer 10 Χ 0 0 Past Chairman David Allen Shumaker 1 0 Χ 0 0 0 At-Large Member John M Smith 5 0 Х 0 Χ 0 Secretary Kenneth W Staub 5 0 0 0 Χ Carrier Policy Committee Chair Vicki Jones Stephens 10 Х 0 0 0 State Vice President Lawrence H Stern 1 0 0 0 Х **Emeritus Member** Douglas W Stotlar 5.0 Χ Х 0 0 Treasurer Evan Stouten 1 0 Χ 0 0 State Vice President S Russell Stubbs 1 0 0 0 Χ 0

At-Large Member

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours organizations (Wfrom the and a director/trustee) for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related Institutional Trustee mer below organizations employee dotted line) t compensated ee Harold Sumerford Jr 1 0 Χ 0 0 At-Large Member Robert E Taylor 5 0 Χ 0 0 Carrier Policy Committee Chair Aaron Tennant 5 0 Χ 0 0 Carrier Policy Committee Chair Pat Thomas 10 0 Χ 0 0 Х 0 Second Vice Chairman Robert H Thompson 10 Х 0 0 0 State Vice President Keith Tuttle 1.0 Χ 0 0 At-Large Member William A Usher Jr 10 Χ 0 0 At-Large Member Charles A Van Zoeren 1 0 Χ 0 0 O **Emeritus Member** Stephen Wadhams 1 0 Χ 0 0 State Vice President Joel Wallace 10 0 0 Χ At-Large Member James E Ward 1 0 Х 0 0 0 At-Large Member Donna Weinrich-Lucht 1 0 Χ 0 0 0 State Vice President James L Welch 10 Χ 0 0 At-Large Member Arnold F Wellman 10 0 Х 0 0 **Emeritus Member** John White 10 Χ 0 0 At-Large Member Charles L Whittington 1 0 Χ 0 0 Past Chairman John S Whittington 10 Χ 0 0 Conference Vice President David R Williams 5 0 Χ 0 0 0 Carrier Policy Committee Chair James C Williams 10 Χ 0 0 At-Large Member Steve Williams 5 0 0 0 Χ ATRI Chairman Charles L Wilson 10 Х 0 0 0 At-Large Member Michael P Wilson 1 0 0 0 Χ State Vice President Barbara J Windsor 1 0 Χ 0 0 Past Chairman Thomas Witt 10 Χ 0 0 Conference Vice President Lawrence Woolson 5 0 0 Х 0 0 Carrier Policy Committee Chair

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit the position of the person of director	ion (d nan o n is b	ne bo oth a ctor/	ox, u an of trus	nless ficer tee)		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	( <b>E)</b> Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			_			2				
Robert A Young III	1 0	х						0	0	0
Emeritus Member WILLIAM Graves	20.0									
	30 0			х				1,123,038	0	30,334
President and CEO	10 0									
Karla Hulett	30 0			х				348,078	0	27,313
Senior Vice President & CFO	10 0									
Howard Abramson	40 0				х			288,763	0	30,749
Senior Vice President										
David T Brodie	40 0				х			289,686	0	24,258
Senior Vice President										
Warren E Hoemann Senior Vice President	40 0				х			235,721	0	22,802
Carl Kırk	40 0				х			204,182	0	17,159
Vice President  David J Osiecki	40 0									
Senior Vice President					Х			305,693	0	28,853
Mary B Phillips	40 0									
Senior Vice President					Х			333,821	0	16,825
Prasad Sharma	30 0									
Senior VP & General Counsel	10 0				Х			258,602	0	28,938
Kay Perkins	40 0				х			205,461	0	17,043
Vice President					^			203,401	O	17,043
Rebecca Brewster	0 0					x		291,087	0	27,313
Senior Vice President	40 0					^		231,007	V	27,313
Jeffrey A Mason	40 0					x		237,883	0	5,306
Senior Vice President						,		257,003		3,300
Jose de la Torre	40 0					х		208,341	0	23,518
Vice President										
Joseph M Hart	40 0					×		205,839	0	16,578
Vice President										
Richard S Pianka	20 0					×		202,676	0	14,121
Vice President	20 0									

DLN: 93493317068484

OMB No 1545-0047

**Political Campaign and Lobbying Activities** 

Department of the Treasury

**SCHEDULE C** (Form 990 or 990-EZ)

Internal Revenue Service

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

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

▶ See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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.

"Yes" to Form 990 Part IV Line 5 (Proxy Tax) or Form 990-F7 Part V line 35c (Proxy Tax) then

	me of the organization ERICAN TRUCKING ASSOCIATIONS INC			Employe	r iden	tificatio	n numb	er
Airii	ERICAN PROCESSING ASSOCIATIONS INC			53-002	6970			
Par	t I-A Complete if the or	ganization is exempt under	section 501(c	) or is a section	527	' organ	izatio	n.
1	Provide a description of the or	ganızatıon's dırect and ındırect politi	cal campaign acti	vities in Part IV				
2	Political expenditures				<b>-</b>	\$		201,522
3	V olunteer hours							
Dar	t I-E Complete if the or	ganization is exempt under	section 501/c	·)(3)				
1		e tax incurred by the organization un	-	.)(J).	<b>b</b>	<b>c</b>		
2	,	e tax incurred by organization manag		4955		→		
3	·	section 4955 tax, did it file Form 472		4555	-	эг		
4а	Was a correction made?	section 4955 tax, and it me Form 472	to for this year.				- Yes	, No
b	If "Yes," describe in Part IV					,	163	, 140
		ganization is exempt under	section 501(c	c), except section	n 50	1(c)(3	<u> </u>	
1	•	ended by the filing organization for se	-	•		±(c)( <u>s</u>	<i>,</i>	
2		organization's funds contributed to of	·		-	¥		
_	exempt function activities	organization s rands contributed to or	iner organizations	101 3001011 327	►	\$		201,522
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 1120	0-POL, line 17b	<b>-</b>	\$		201,522
4	Did the filing organization file I	Form 1120-POL for this year?				·	Yes	√ No
	amount of political contributio separate segregated fund or a	For each organization listed, enter th ns received that were promptly and c political action committee (PAC) If	directly delivered to additional space	to a separate politica	ıl orga	inization, tion in Pa	, such a art IV	s a
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizatio funds If none, ente	n's	contril and direct sep organ	butions   promp  ly deliv arate p	ered to a olitical If none,
(1)	ATA TRUCK PAC	950 N GLEBE ROAD STE 210 ARLINGTON, VA 22203		201	1,522			

Sch	nedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>	
Pä	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768		
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN	
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,	
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly			
	Limits on Lobbying E (The term "expenditures" means ar		l <b>.</b> )		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals	
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)				
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)				
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ			
d	O ther exempt purpose expenditures			Γ			
e	Total exempt purpose expenditures (add lines 1	c and 1d)					
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:				
	Not over \$500,000	20% of the amount on lir	ne 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000			
	Over \$1,500,000 but not over \$17,000,000	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 lir	ue 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No	
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five	
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1	
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(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))

Grassroots lobbying expenditures

Thedule C (I	onn 550 or 550 EZ/2015	Page .
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)).	

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

### d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1 1	17,912,254
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	1,996,226
	Carryover from last year	2b	
c	Total	2c	1,996,226
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	2,507,716
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-511.490

## Part IV Supplemental Information

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

Return Reference	Explanation
MPAIGN ACTIVITY	Part I-A, line 1 THE AMERICAN TRUCKING ASSOCIATIONS, INC 'S INDIRECT POLITICAL CAMPAIGN ACTIVITIES CONSIST OF PROVIDING FACILITIES AND CATERING SERVICES TO THE ATA TRUCK PAC FOR THEIR EVENTS TREAS REG SEC 1 527-6(B)(1)(I) PROVIDES THAT A SECTION 501(C) ORGANIZATION'S EXPENDITURES WHICH ARE OTHERWISE PERMITTED UNDER THE FEDERAL ELECTION CAMPAIGN ACT (FECA) OR SIMILAR STATE STATUTE ARE FOR AN EXEMPT FUNCTION ONLY TO THE EXTENT PROVIDED IN TREAS REG SEC 1 527-6 (B)(3) TREAS REG SEC 1 527-6(B)(3) HAS BEEN RESERVED (I E, NO REGULATIONS HAVE BEEN PROMULGATED UNDER THIS SECTION) T D 7744 STATES THAT WHEN FINAL REGULATIONS ARE ISSUED UNDER THIS SECTION, THEY WILL BE APPLIED ON A PROSPECTIVE BASIS IF TAXPAYERS ARE ADVERSELY AFFECTED PERMITTED ACTIVITIES OF A CORPORATION UNDER THE FECA INCLUDE, AMONG OTHER THINGS, PAYING THE COSTS OF ESTABLISHING A SEPARATE SEGREGATED FUND AND SOLICITING CONTRIBUTIONS TO SUCH FUND (SUBJECT TO VARIOUS RESTRICTIONS), COMMUNICATIONS WITH MEMBERS ABOUT CANDIDATES FOR PUBLIC OFFICE (IN THE CASE OF A MEMBERSHIP CORPORATION) AND ENGAGING IN CERTAIN NONPARTISAN ACTIVITIES DURING A POLITICAL CAMPAIGN SUCH AS VOTER REGISTRATION DRIVES UNDER THE CURRENT REGULATIONS, IF A SECTION 501(C)(6) ORGANIZATION INCURS INDIRECT EXPENSES, SUCH AS EXPENSES INCURRED IN SOLICITING CONTRIBUTIONS TO A PAC, THE IRS WILL NOT IMPOSE TAX ON SUCH EXPENDITURES UNDER SECTION 527(F)(1) OR REQUIRE THE ORGANIZATION TO REPORT SUCH EXPENDITURES ON FORM 1120-POL

201104410 3 (1 3111 330 31 330 12) 2013		i age <del>-i</del>
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

### DLN: 93493317068484

OMB No 1545-0047

## **SCHEDULE D**

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

nai Revenue Service	1 163 111361 <b>u</b> ccion3 13 uc <u>www.113.gov/101111.550</u> .		Inspection
lame of the organization MERICAN TRUCKING ASSOCIATIONS INC		Employer identific	ation number
organizations Maintaining D	Donor Advised Funds or Other Similar		s. Complete if the
organization anomered res to	(a) Donor advised funds	(b) Funds and	other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
	donor advisors in writing that the assets held i ect to the organization's exclusive legal contro		┌ Yes ┌ No
	onors, and donor advisors in writing that grant for the benefit of the donor or donor advisor, or		┌ Yes
art II Conservation Easements. C	omplete if the organization answered "Y	es" to Form 990, Part I	V, line 7.
Preservation of land for public use (e g Protection of natural habitat Preservation of open space	•	of an historically importar of a certified historic struc on in the form of a conserva	cture
easement on the last day of the tax year			
			e End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation e		2b	
Number of conservation easements on a ce	• •	2c	
Number of conservation easements include historic structure listed in the National Reg	2d		
Number of conservation easements modified the tax year	ed, transferred, released, extinguished, or tern	ninated by the organization	i during
the tax year F			
Number of states where property subject to	o conservation easement is located 🟲		
Does the organization have a written policy enforcement of the conservation easement	y regarding the periodic monitoring, inspection ts it holds?	, handling of violations, an	d   Yes   No
Staff and volunteer hours devoted to monit	oring, inspecting, and enforcing conservation	easements during the year	
A mount of expenses incurred in monitoring	g, inspecting, and enforcing conservation ease	ments during the year	
<b>▶</b> \$			
Does each conservation easement reporte and section 170(h)(4)(B)(II)?	d on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)(ı)	┌ Yes ┌ No
	n reports conservation easements in its revent he text of the footnote to the organization's fina tion easements		
	Collections of Art, Historical Treasur Inswered "Yes" to Form 990, Part IV, line		Assets.
works of art, historical treasures, or other s	nder SFAS 116 (ASC 958), not to report in its similar assets held for public exhibition, educa ne footnote to its financial statements that des	tion, or research in further	
If the organization elected, as permitted ur	nder SFAS 116 (ASC 958), to report in its rev similar assets held for public exhibition, educa	enue statement and baland	
(i) Revenues included in Form 990, Part V	III, line 1	<b>►</b> \$	
(ii) Assets included in Form 990, Part X			
If the organization received or held works o	of art, historical treasures, or other similar ass under SFAS 116 (ASC 958) relating to these i	ets for financial gain, prov	
Revenues included in Form 990, Part VIII,	. line 1	<b>▶</b> \$	
	, ····	· *	
Assets included in Form 990, Part X		<b></b> \$	

6	TIPE Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	tori	cal Tr	<u>eası</u>	ires, or (	)the	<u>r Simila</u>	<u>r Asse</u>	ts (co	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ds, ch	neck	any of t	the foll	lowing that	are a	sıgnıfıcan	t use of	its	
а	Public exhibition		d	Γ	Loan	orexc	hange prog	rams	;			
b	Scholarly research		e	Γ	Other	r						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ın hov	w the	y furthe	er the	organızatıo	n's ex	cempt purp	ose in		
5	During the year, did the organization solicit o	or receive donations	ofar	t his	torical	treasi	ures or othe	rsin	nılar			
	assets to be sold to raise funds rather than t								aı	Γ	Yes	┌ No
Par	Part IV, line 9, or reported an an						n answere	ed "Y	es" to Fo	rm 990	),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	ford	ontribu	itions	or other as:	sets	not	Г	Yes	√ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving	able		_					
							[			Amou	ınt	
c	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				•			<u> </u>	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Chack here if the	evnl	anatı	on hac	haan	provided in	Dart	VIII			굣
	rt V Endowment Funds. Complete									10		<u> </u>
	Endownient Fanasi Complete	(a)Current year		)Prior			wo years bac				)Four y	ears back
1a	Beginning of year balance											
b	Contributions											
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the curr	ent year end balanc	e (lın	e 1g	, colum	ın (a))	held as					
а	Board designated or quasi-endowment 🕨											
ь	Permanent endowment ▶											
c	Temporarily restricted endowment ►											
_	The percentages in lines 2a, 2b, and 2c show											
3a	Are there endowment funds not in the posses organization by	ssion of the organiza	ation	tnat	are nei	a ana a	administere	a for	tne		Yes	No
	(i) unrelated organizations									3a(i)	1.05	
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(II), are the related organization	ns listed as required	d on S	Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of th	=										
Par	t VI Land, Buildings, and Equipme		he o	rgar	ıızatıoı	n ans	wered 'Ye	s' to	Form 99	0, Part	IV, lı	ne
	11a. See Form 990, Part X, line :  Description of property	<u></u>		T (2)	Cost or	other	(b)Cost or o	thor	(c) Accum	ulated	(d) Bo	ok value
	Description of property				s (invest		basis (oth		deprecia		( <b>u</b> ) bo	ok value
1a	Land						15	0,204		T		150,204
b	Buildings						27,70	9,161	4,0	18,804	2	3,690,357
c	Leasehold improvements						11,78	0,212	4,9	14,488		6,865,724
d	Equipment						2,10	2,841	1,6	18,960		483,881
								2,710	2,6	82,013		2,420,697
Tota	I. Add lines 1a through 1e (Column (d) must e	aual Form 990. Part >	k, colu	ımn (	B), line	10(c).	)			<b>•</b>	3	3,610,863

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of va	
(Including name of security) (1)Financial derivatives		Cost or end-of-year	market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>		
Part VIII Investments—Program Related. C	Complete if the organizatio	n answered 'Yes' to Fo	orm 990, Part IV, line 11c
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX Other Assets. Complete if the organization (a) Description		), Part IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(a) bese	TIP CON		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line			
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	janization answered 'Yes' t	o Form 990, Part IV, l	ine 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
DEFERRED RENT EXPENSE	5,190,151		
CAPITAL LEASE LIABILITY	383,085		
PAYABLE TO RELATED ORGANIZATIONS	669,535		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<b>▶</b> 6,242,771		

Part		Revenue per Audited Financial Statements With Revenue wered 'Yes' to Form 990, Part IV, line 12a.	per R	eturn Complete if					
1		er support per audited financial statements	1						
2	Amounts included on line 1 b	included on line 1 but not on Form 990, Part VIII, line 12							
а	Net unrealized gains on inves	stments							
b	Donated services and use of	facilities	7						
c	Recoveries of prior year gran	ts							
d	Other (Describe in Part XIII	)	7						
e	Add lines <b>2a</b> through <b>2d</b>		2e						
3	Subtract line 2e from line 1 .		3						
4	Amounts included on Form 9	90, Part VIII, line 12, but not on line <b>1</b>							
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a							
b	Other (Describe in Part XIII	)							
c	Add lines 4a and 4b	· · · · · · · · · · · · · · · · · · ·	4c						
5	Total revenue Add lines 3 ar	nd <b>4c.</b> (This must equal Form 990, Part I, line 12)	5						
Part >		Expenses per Audited Financial Statements With Expenses Inswered 'Yes' to Form 990, Part IV, line 12a.	es per	Return. Complete					
1	Total expenses and losses pe	er audited financial statements	1						
2	Amounts included on line 1 b	ut not on Form 990, Part IX, line 25							
а	Donated services and use of	facilities							
b	Prior year adjustments								
C	Other losses	2c							
d	Other (Describe in Part XIII	)							
e	Add lines <b>2a</b> through <b>2d</b> .		2e						
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3						
4	Amounts included on Form 99	90, Part IX, line 25, but not on line 1:							
а	Investment expenses not inc	luded on Form 990, Part VIII, line 7b 4a							
b	Other (Describe in Part XIII	)							
C	Add lines <b>4a</b> and <b>4b</b>		4c						
		and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5						
Part	Supplemental In	formation							
	, line 4, Part X, line 2, Part X	r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part		de any additional					
L		Explanation		ATA TO DEDOCIT					
ESCRO	vv	Schedule D, Part IV, Line 2b A REAL ESTATE SALE AGREEMENT REGENERS IN A SOIL MANAGEMENT ESCROWACCOUNT HELD IN TRIPAY HALF OF THE EXPENSES RELATING TO SOIL REMOVAL, TEST PREVIOUSLY OWNED PROPERTY	JST BY A	A LEGAL FIRM TO ID DISPOSAL ON					
FIN 48		SCHEDULE D, PART X, LINE 2 THE AMERICAN TRUCKING ASSOCI ACCOUNTING POLICY FOR EVALUATING UNCERTAIN TAX POSIT TAX POSITIONS IF THEY WILL MORE LIKELY THAN NOT BE ULTIM DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX BENEF SHOULD BE RECORDED IN THE EVENT ATA WERE TO RECOGNIZ RELATED TO UNCERTAIN TAX POSITIONS, IT WOULD BE RECOGI STATEMENTS AS AN INCOME TAX EXPENSE TAX YEARS 2010 THE EXAMINATION BY THE FEDERAL AND STATE TAXING AUTHORITITAX EXAMINATIONS CURRENTLY IN PROCESS	TIONS IS MATELY SITS OR E INTER NIZED I ROUGH	S TO RÉCOGNIZE REALIZED ATA LIABILITIES THAT REST AND PENALTIES N THE FINANCIAL 2013 ARE OPEN TO					

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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**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 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

DLN: 93493317068484

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

AMERICAN TRUCKING ASSOCIATIONS INC

**Employer identification number** 

53-0026970

Part I General Information  1 Does the organization maintain the selection criteria used to average to average to a process of the part IV the organization part IV the org	records to substantı vard the grants or as	ate the amount of the			the grants or assist	ance, and	ΓYes ΓΝ
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
See Additional Data Table							
<ul><li>2 Enter total number of section 50</li><li>3 Enter total number of other organization</li></ul>							3

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

Part IV Supplemental :	Informa	<b>tion.</b> Provide the info	ormation required in Pa	irt I, line 2, Part III, col	umn (b), and any other a	ddıtıonal ınformatıon.	
Return Reference Explanation							
GRANTS AND ASSISTANCE	RANTS AND ASSISTANCE SCHEDULE I, PART II THE AMERICAN TRANSPORTATION ASSOCIATIONS, INC. DOES NOT GIVE GRANTS TO THIRD PARTIES. THE AMOUNTS LISTED ON PART II ARE CONTRIBUTIONS TO THE LISTED ORGANIZATIONS.						
						Schedule I (Form 990) 2013	

## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 53-0026970

Name: AMERICAN TRUCKING ASSOCIATIONS INC

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Transportation Research Institute 950 N Glebe Road Ste 210 Arlington,VA 22203	53-2039775	501(c)(3)	468,500				Contribution

Form 990, Schedule 1, Part 11, 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	<b>(d)</b> A mount of cash grant	cash	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Engine Manufacturers Association 333 West Wacker Dr Ste 810 Chicago, IL 60606	36-2039824	501(c)(6)	50,000				Contribution

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Colorado Motor Carriers Association 4060 Elati Street Denver, CO 80216	84-0173534	501(c)(6)	28,000				Contribution

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
American Highway Users Alliance PO Box 34523 STE 400 Washington, DC 20043	53-0186334	501(c)(6)	32,200				Contribution

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Republican Governors Association 1747 Pennsylvania Ave NW Washington, DC 20006	11-3655877	527	25,000				Contribution					

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Illinois Trucking Association 7000 S Adams Willow Brook, IL 60527	36-0884130	501(c)(6)	15,000				Contribution					

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance				
Minnesota Trucking Association 2277 Highway 36 W Roseville,MN 55113	41-0499260	501(c)(6)	15,000				Contribution				

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Missouri Trucking Association 102 E High St PO Box 1247 Jefferson City, MO 65102	44-0466293	501(c)(6)	15,000				Contribution				

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Motor Transport Association of Connecticut Inc 60 Forest Street STE 210 Hartford, CT 06105	06-0460460	501(c)(6)	15,000				Contribution					

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Oregon Department of Transportation 355 Capitol Street Salem, OR 97301	93-1111585	501(c)(4)	15,000				Contribution				

Form 990,Schedule 1, Pa	form 990,Schedule 1, Part 11, 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) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
American Heart Association 4301 N Fairfax Dr Arlington, VA 22203	13-5613797	501(c)(3)	10,000				Contribution					

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
Commercial Vehicle Safety Alliance 1101 17th Street NW Washington, DC 20036	91-1212247	501(c)(3)	10,000				Contribution				

-orm 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States												
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance					
Oregon Trucking Associations 4005 SE Naef Road STE 210 Portland, OR 97267	93-0399289	501(c)(6)	10,000				Contribution					

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> Amount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
South Carolina Trucking Association Inc PO Box 50166 Columbia, SC 29250	57-0213530	501(c)(6)	10,000				Contribution				

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DLN: 93493317068484

OMB No 1545-0047

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, line 23.

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization AMERICAN TRUCKING ASSOCIATIONS INC **Employer identification number** 

53-0026970

Pai	t I Questions Regarding Compensatio	n				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					_
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses do			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe				V	
	directors, trustees, officers, melading the eroyexe	cutive D	rector, regulating the reems effected in fine 14.	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply				
	▼ Compensation committee	Γ	Written employment contract			
	✓ Independent compensation consultant	<u>  -</u>	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to the filing organization $% \left( 1\right) =\left( 1\right) \left( 1\right$			
а	Receive a severance payment or change-of-control	paymen	tʔ	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased cor	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in	n Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MI	-2 and/or 1099-MISC compensation		(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

### Part IIII Supplemental Information

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

Return Reference	Explanation
	Part I, line 1a THE CHAIRMAN AND CHAIRMAN'S SPOUSE MAY TRAVEL FIRST CLASS DUE TO HEAVY TRAVEL SCHEDULES THE POSITION IS AN UNPAID ONE YEAR POSITION
PRESIDENT TRAVEL	Part I, line 1a THE PRESIDENT & CEO MAY TRAVEL FIRST CLASS DUE TO A HEAVY TRAVEL SCHEDULE
SPOUSE TRAVEL	Part I, line 1a THE PRESIDENT & CEO'S SPOUSE MAY TRAVEL FIRST CLASS TO AN ANNUAL CONVENTION FOR BUSINESS PURPOSES
	Part I, line 1a THE PRESIDENT & CEO'S GOLF CLUB DUES ARE PAID FOR BUSINESS PURPOSES PERSONAL USE IS REPORTED FOR TAXABLE PURPOSES
SERVICE AWARDS	Part I, line 1a SERVICE AWARDS TO ALL STAFF ARE GROSSED UP FOR TAXES SIX OF THE LISTED EMPLOYEES RECEIVED SERVICE AWARDS

Schedule J (Form 990) 2013

Software ID: **Software Version:** 

**EIN:** 53-0026970

Name: AMERICAN TRUCKING ASSOCIATIONS INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees							
(A) Name	(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	( <b>D)</b> Nontaxable benefits	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
	(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	Delletics	(B)(ı)-(D)	990 or Form 990-EZ
WILLIAM Graves (I President and CEO (II		253,604	14,469	8,960 0	21,374 0	1,153,372	0
Karla Hulett Senior (I Vice President & CFO (II		50,621	2,322	10,556 0	16,757 0	375,391	0
Rebecca Brewster (I Senior Vice President (II	•	16,520	1,242	10,556 0	16,757 0	318,400	0
Jeffrey A Mason Senior (I Vice President (II		25,000	42,226	4,523 0	783 0	243,189	0
Jose de la Torre Vice (I President (II		903	3,329	9,017 0	14,501 0	231,859	0
Joseph M Hart Vice (I President (II	•	517 0	1,816	9,509 0	7,069 0	222,417	0
Richard S Pianka Vice (I President (II		5,480	614	6,850 0	7,271 0	216,797	0
Howard Abramson (I Senior Vice President (II		11,272	4,191	12,541 0	18,208 0	319,512	0
David T Brodie Senior (I Vice President (II		26,173	4,191	6,119 0	18,139 0	313,944	0
Warren E Hoemann (I Senior Vice President (II		10,621	3,144	8,539 0	14,263 0	258,523	0
Carl Kirk Vice (I President (II		8,026	1,739	10,125	7,034 0	221,341	0
David J Osiecki Senior (i Vice President (ii		50,621	810	11,329 0	17,524 0	334,546	0
Mary B Phillips Senior (I Vice President (II		10,621	2,322	9,126 0	7,699 0	350,646	0
Prasad Sharma Senior (I VP & General Counsel (II		30,621	494	10,400	18,538 0	287,540	0
Kay Perkins Vice (I President (II		3,146	2,788	9,120	7,923 0	222,504	0

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DLN: 93493317068484

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

OMB No 1545-0047

Name of the organization	Employer identification number
AMERICAN TRUCKING ASSOCIATIONS INC	53-0026970

Return Reference	Explanation		
RELATIONSHIPS	Form 990, Part VI, Section A, line 2 - DUANE W ACKLIE AND RAY KUNTZ HAVE A BUSINESS RELATIONSHIP - DUANE W ACKLIE AND TONN OSTERGARD HAVE A FAMILY RELATIONSHIP - ROBERT R BAYLOR AND CARI BAYLOR HAVE A BUSINESS AND A FAMILY RELATIONSHIP - DONALD M BOWMAN JR AND JAMES WARD HAVE A BUSINESS RELATIONSHIP - ANDREW T BOYLE AND MARC D BOYLE HAVE A BUSINESS RELATIONSHIP AND A FAMILY RELATIONSHIP - THOMAS S BRENNAN, WILLIAM E JAYNE, III AND WILLIAM E JAYNE, JR HAVE A BUSINESS RELATIONSHIP - W TOBIN CASSELS, JII AND WILLIAM T CASSELS, JR AND G CLIFTON PARKER HAVE A BUSINESS RELATIONSHIP - W TOBIN CASSELS, III AND WILLIAM T CASSELS, JR HAVE A FAMILY RELATIONSHIP - JOSEPH A GREENSTEIN AND JOHN ROSWICK HAVE A BUSINESS RELATIONSHIP - RANDY P GUILLOT, DAVE MANNING AND KEVIN LHOTAK HAVE A BUSINESS RELATIONSHIP - D MITCHELL JACKSON AND WILLIAM J LOGUE HAVE A BUSINESS RELATIONSHIP - MIKE JIMENEZ AND LAWRENCE WOOLSON HAVE A BUSINESS RELATIONSHIP - MICHAEL S CARD AND RAY KUNTZ HAVE A BUSINESS RELATIONSHIP - DAVE MANNING, G CLIFTON PARKER, SCOTT GEORGE AND G TOMMY HODGES HAVE A BUSINESS RELATIONSHIP - RICHARD ROEHL AND EVERETT ROEHL HAVE A BUSINESS RELATIONSHIP AND A FAMILY RELATIONSHIP - LEE PHILIP SHAFFER AND DENNIS NASH HAVE A BUSINESS RELATIONSHIP		

Return Reference	Explanation
MEMBERS	Form 990, Part VI, Section A, line 6 THE AMERICAN TRUCKING ASSOCIATIONS, INC IS A TRADE ASSOCIATION CONSISTING OF DUES PAYING MEMBERS

Return Reference	Explanation
ELECTING A GOVERNING BOARD	Form 990, Part VI, Section A, line 7a THE AMERICAN TRUCKING ASSOCIATIONS, INC (ATA) BOARD OF DIRECTORS CURRENTLY CONSISTS OF ONE HUNDRED THIRTY-EIGHT MEMBERS PLUS TWENTY EMERITUS MEMBERS FOR A TOTAL OF ONE HUNDRED FIFTY-EIGHT VOTING MEMBERS SIXTY-SEVEN OFFICERS AND VICE PRESIDENTS AT LARGE ARE ELECTED BY THE BOARD ITSELF ANNUALLY FIFTEEN COMMITTEE CHAIRS ARE APPOINTED ANNUALLY BY THE CHAIRMAN, WHO SERVES A ONE YEAR TERM FIFTY-SIX STATE ASSOCIATIONS, AFFILIATED CONFERENCES REPRESENTING INDUSTRY SEGMENTS, AND OTHER RELATED ORGANIZATIONS EACH ELECT ONE ATA MEMBER AS THEIR REPRESENTATIVE TO THE BOARD EMERITUS MEMBERS ARE EX-OFFICIO LIFETIME MEMBERS

Return Reference	Explanation		
FORM 990 REVIEW	Form 990, Part VI, Section A, line 11 DRAFT VERSIONS OF THE 990 TAX RETURNS ARE REVIEWED BY THE SENIOR VICE PRESIDENT & CONTROLLER OF THE ORGANIZATION AND THEN FORWARDED TO AN INDEPENDENT ACCOUNTING FIRM FOR REVIEW FINAL DRAFTS ARE GIVEN TO THE MANAGEMENT COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING THE MANAGEMENT COMMITTEE IS AUTHORIZED BY THE 158 MEMBER BOARD TO ACT ON ALL FINANCIAL AND ADMINISTRATIVE AFFAIRS OF THE ORGANIZATION THE RETURN IS THEN MADE AVAILABLE TO ALL BOARD MEMBERS ON THEIR WEB PAGE		

Return Reference	Explanation		
INTEREST	Form 990, Part VI, Section B, line 12c THE AMERICAN TRUCKING ASSOCIATIONS, INC REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY ALL CONTRACTS GO THROUGH AN EXTENSIVE REVIEW PROCESS ALL ACCOUNTS PAYABLE CHECKS ARE REVIEWED AND APPROVED BY EITHER THE SENIOR VICE PRESIDENT & CONTROLLER OR THE ASSISTANT CONTROLLER BEFORE THEY ARE RELEASED IF AN EMPLOYEE IS MADE AWARE OF A CONFLICT THEY ARE INSTRUCTED TO DISCLOSE THE SITUATION THROUGH THE PROPER CHAIN SO THAT THE APPROPRIATE ACTION MAY TAKE PLACE		

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	Form 990, Part VI, Section B, Lines 15a and 15b THE AMERICAN TRUCKING ASSOCIATIONS, INC (ATA) USES AN OUTSIDE COMPENSATION CONSULTANT TO CONDUCT AN ANNUAL REVIEW OF THE PRESIDENT & CEO'S COMPENSATION AND THAT OF ALL SENIOR STAFF THE PROCESS INCLUDES A REVIEW OF THE CURRENT CASH COMPENSATION (BASE SALARY PLUS INCENTIVE BONUS AND BENEFITS) SECONDLY, THE CONSULTANT CONDUCTS A MARKET ANALYSIS COMPARING THE PRESIDENT & CEO'S COMPENSATION WITH THE COMPENSATION OF PRESIDENTS & CEOS OF COMPARABLE TRADE ASSOCIATIONS THE SENIOR STAFF'S COMPENSATION IS COMPARED TO COMPENSATION OF COMPARABLE POSITIONS IN A COMPARATOR GROUP OF TRADE ASSOCIATIONS THE ATA COMPENSATION COMMITTEE IS A SUBCOMMITTEE OF THE ATA EXECUTIVE COMMITTEE, A SUBCOMMITTEE OF THE ATA BOARD OF DIRECTORS THE COMPENSATION COMMITTEE CONSIDERS THE RESULTS OF THESE ANALYSES WHEN DETERMINING COMPENSATION LEVELS OF THE PRESIDENT & CEO AND ALL SENIOR STAFF

Return Reference	Explanation
AVAILABILITY OF GOVERNING DOCUMENTS TO THE PUBLIC	Form 990, Part VI, Section C, lines 18 and 19 THE AMERICAN TRUCKING ASSOCIATIONS, INC MAKES GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY AVAILABLE TO THE BOARD MEMBERS THE CONFLICT OF INTEREST POLICY IS ALSO AVAILABLE TO STAFF AND GOVERNING DOCUMENTS ARE AVAILABLE TO MEMBERS TAX RETURNS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation	
RECONCILIATION OF NET ASSETS	Form 990, Part XI, line 9 Change in value of Pension Equity Charge	3,238,940

#### DLN: 93493317068484

OMB No 1545-0047

Open to Public Inspection

# **Related Organizations and Unrelated Partnerships**

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization

AMERICAN TRUCKING ASSOCIATIONS INC

(Form 990)

**SCHEDULE R** 

**Employer identification number** 

or more related tax-exempt organizations during the tax year.  (a) Name, address, and EIN of related organization  RESEARCH  RESEARCH  VA  SOI(c)6  N/A  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
Name, address, and EIN (if applicable) of dissegarded entity  Primary activity  Indication of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because or more related tax-exempt organizations during the tax year.  Name, address, and EIN of related organizations during the tax year.  (a) Name, address, and EIN of related organizations during the tax year.  (b) Indication of Related Tax-Exempt Organizations during the tax year.  (c) (c) (d) Exempt Code section (if section 591(c)(3)) Direct controlling or foreign country)  Primary activity  India (state or foreign country)  RESEARCH  VA SOL(36  N/A AIA  350 (4) N/A AIA  AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(36)  AIR MICROR MARKEN TRANSPORTATION RESEARCH BISTITU  RESEARCH  VA SOL(3) 7 AIA  AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  ARLINGTON, VA 22203  Section SOL(3) 7 AIA  SON GLEBE ROAD STE 210  AIR AIR SON CARBOR RO	
romore related tax-exempt organizations during the tax year.    Ca	_
Or more related tax-exempt organizations during the tax year.  (a) Name, address, and EIN of related organization  RESEARCH  RESEARCH  VA  501(c)6  N/A  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
Or more related tax-exempt organizations during the tax year.  (a) Name, address, and EIN of related organization  RESEARCH  RESEARCH  VA  501(c)6  N/A  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
Or more related tax-exempt organizations during the tax year.  (a) Name, address, and EIN of related organization  RESEARCH  RESEARCH  VA  SOI(c)6  N/A  ATA  (b) Pmany activity Legal domicile (state or foreign country)  (1) ATA FOUNDATION  RESEARCH  VA  SOI(c)6  N/A  ATA  ATA  (2) ATA LITIGATION CENTER  VA  SOI(c)6  N/A  RESEARCH  VA  SOI(c)6  N/A  NA  NA  (3) ARELINGTON, VA 22203  S2-1488323  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  RESEARCH  VA  SOI(c)3  7  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
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)  (1) ATA FOUNDATION  RESEARCH  VA  501(c)6  N/A  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
or more related tax-exempt organizations during the tax year.  (a) Name, address, and EIN of related organization  RESEARCH  RESEARCH  VA  501(c)6  RESEARCH  VA  501(c)6  N/A  ATA  ATA  ATA  ATA  ATA  ATA  ATA	
Name, address, and EIN of related organization  Primary activity legal domicile (state or foreign country)  (1) ATA FOUNDATION  RESEARCH  VA  501(c)6  ARLINGTON, VA 22203 52-1488332  (2) ATA LITIGATION CENTER  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  RESEARCH  VA  501(c)6  N/A  NA  ATA  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  RESEARCH  VA  501(c)3  7  ATA  4TA  4TA  4TA  4TA  4TA  4TA	it had one
950 N GLEBE ROAD STE 210 ARLINGTON, VA 22203 52-1488332  (2) ATA LITIGATION CENTER LITIGATION VA 950 N GLEBE ROAD STE 210 ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU RESEARCH VA 950 N GLEBE ROAD STE 210 ARLINGTON, VA 22203 4-1342836  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB PSO N GLEBE ROAD STE 210 ARLINGTON, VA 22203 4-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB PSO N GLEBE ROAD STE 210 ARLINGTON, VA 22203 ARLINGTON, VA 22203 ARLINGTON, VA 22203 ARLINGTON, VA 22203	Section 512( (13) controllentity?
ARLINGTON, VA 22203 52-1488332 (2) ATA LITIGATION CENTER  LITIGATION  VA  501(c)6  N/A  NA  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  PSO N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  RESEARCH  RESEARCH  VA  S01(c)3  7  ATA  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  RESEARCH  VA  S01(c)3  7  ATA  ATA  ATA  ATA  ATA  ARLINGTON, VA 22203	Yes
52-1488332	
950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 ARLINGTON, VA 22203 ARLINGTON, VA 22203 ARLINGTON, VA 22203	
ARLINGTON, VA 22203 54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  PSO N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  PSO N GLEBE ROAD STE 210  ARLINGTON, VA 22203	No
54-1332836  (3) AMERICAN TRANSPORTATION RESEARCH INSTITU  P50 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  ARLINGTON, VA 22203	
950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  P50 N GLEBE ROAD STE 210  ARLINGTON, VA 22203  ARLINGTON, VA 22203	
ARLINGTON, VA 22203 54-2039775  (4) THE TRUCKING RESEARCH INSTITUTE CHARITAB  PSO N GLEBE ROAD STE 210  ARLINGTON, VA 22203  ARLINGTON, VA 22203	Yes
54-2039775         RESEARCH         VA         501(c)3         7         ATA           950 N GLEBE ROAD STE 210         ARLINGTON, VA 22203         Image: Control of the control o	
950 N GLEBE ROAD STE 210  ARLINGTON, VA 22203	
ARLINGTON, VA 22203	Yes
ARLINGTON, VA 22203 54-1410559	

<b>(a)</b> Name, address, and E related organizatio	<b>(b)</b> Primary activity	(c) Legal domicile	(d) Direct controlling	(e) Predomina income(rela		(g) Share of ne end-of-year	Oisprop	ortionate	(i) Code V-UBI amount in box	de V-UBI   General		(k) Percentag ownershi	
related Organization	related organization		(state or foreign country)	entity	unrelated excluded fr tax unde sections 51	, om r	assets	allocal	uons	20 of Schedule K-1 (Form 1065)	part	iner?	OWNEISH
					514)			Yes	No		Yes	No	
												$\Box$	
												$\Box$	
												$\Box$	
	of Related Organizations Taxable It had one or more related organization  of (b) Primary activity			poration o	(d) ct controlling 1	ng the tax y		(g)		(h)	) tage	S	(i) Section 512 (b)(13) controlled entity?
ATA SERVICES INC AND GIDIARY	COMPUTER SERV	VA		NA	С	Corp	C	-		100 00	00 %		Yes No
N GLEBE ROAD STE 210 NGTON, VA 22203 066416													
												$\perp$	
												$\neg$	$\overline{}$

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule													
<b>1</b> Dur	ng the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?										
a F	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity												
b (	<b>b</b> Gift, grant, or capital contribution to related organization(s)												
c Gift, grant, or capital contribution from related organization(s)													
d L	d Loans or loan guarantees to or for related organization(s)												
e L	e Loans or loan guarantees by related organization(s)												
					1f								
f D	f Dividends from related organization(s)												
g S	g Sale of assets to related organization(s)												
h P	h Purchase of assets from related organization(s)												
i E	i Exchange of assets with related organization(s)												
j L	j Lease of facilities, equipment, or other assets to related organization(s)												
k Lease of facilities, equipment, or other assets from related organization(s)													
I P	l Performance of services or membership or fundraising solicitations for related organization(s)												
<b>m</b> 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)													
• Sharing of paid employees with related organization(s)													
рΕ	eimbursement paid to related organization(s) for expenses				1p	Yes							
q F	eimbursement paid by related organization(s) for expenses				1q	Yes							
r Other transfer of cash or property to related organization(s)													
s C	ther transfer of cash or property from related organization(s)				1s		No						
2 1	the answer to any of the above is "Yes," see the instructions for information on who must complete		· · · · · · · · · · · · · · · · · · ·										
	(a) (b) (c) (d)  Name of related organization Transaction type (a-s)												
ee Addı	tional Data Table												

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

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships  (a)  Name, address, and EIN of entity  (b)  Primary activity  Predominant  Are all partners  Share of Share of Share of Disproprtionate  Code V7UBI General or Percentage																			
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?				(f) (g) Share of total end-of-ye assets	(g) Share of end-of-year assets								(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No							
												]							
												$\Box$							
												$\Box$							
	•																		

Schedule R (Form 990) 2013

## Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

## **Additional Data**

Software ID: Software Version:

**EIN:** 53-0026970

Name: AMERICAN TRUCKING ASSOCIATIONS INC

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

Form 990, Schedule R, Part V - Transactions with Related Organizations											
(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved								
AMERICAN TRANSPORTATION RESEARCH INSTITUTE	b	468,500	ACTUAL CONTR								
AMERICAN TRANSPORTATION RESEARCH INSTITUTE	I	200,000	BUDGETED FEE								
AMERICAN TRANSPORTATION RESEARCH INSTITUTE	0	992,942	ACTUAL COSTS								
AMERICAN TRANSPORTATION RESEARCH INSTITUTE	q	2,327,118	ACTUALTRANSFER								
ATA LITIGATION CENTER	I	125,000	BUDGETED FEE								
ATA LITIGATION CENTER	o	267,444	ACTUAL COSTS								
ATA LITIGATION CENTER	р	632,991	ACTUAL COSTS								
ATA LITIGATION CENTER	q	108,385	ACTUAL REIMBURS								

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Depreciation and Amortization** 

(Including Information on Listed Property)

DLN: 93493317068484 OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** GENERAL DEPRECIATION Name(s) shown on return AMERICAN TRUCKING ASSOCIATIONS INC 53-0026970 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) \$ 2,600,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 . . . . . 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 1.795.775 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 596.527 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 2,392,302 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2013) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre		nd Other I																
<b>24a</b> Do you have evider	nce to support	the business/inv	estment u	ise claimed	o? ┌ Yes	Γ <sub>No</sub>			24l	If "Yes,	' is the	ev ider	ice writ	ten?	T <sub>Ye</sub>	₅ IT N	0	
(a) Type of property (list vehicles first)	Type of property (list Date placed in investment Cost o			d) r other isis  (e) Basis for depreciation (business/investment use only)				(f) Recov perio	ery	(g) Method Convent	<b>(h)</b> Depreciation/ deduction			,	(i) Elected section 179 cost			
<b>25</b> Special depreciation allo 50% in a qualified busi			erty placed	in service o	during the	tax year	and u	ısed m	ore		5							
<b>26</b> Property used more than 50% in a qualified business										•								
		%																
		% %							-		_				1			
<b>27</b> Property used 50%	orless in a		iness us	e	<u> </u>													
		%		_					_	6/L -								
		%							_	5/L -	_				4			
28 Add amounts in co	lumn (h.) lun		ıb 27 En	ter here s	and on lu	21	nage	1		5/L - 28				T				
29 Add amounts in co		-				16 21,	page	1					29	╁				
29 Aud amounts in Co	Jiuiiiii (1), iiii			—Infor		on II		• • •			•	1	29	<u>—</u>				
Complete this section	for vehicles										or rel	ated p	erson					
If you provided vehicles to									eptio	n to comp					e vehic			
<b>30</b> Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)				(a) ( Vehicle 1 Vehi			(c) 2 Vehicle 3			Ve	(d) hicle	4 V	<b>(e</b> ehic	•	5 Vehicle			
31 Total commuting miles driven during the year .									+ +				+					
32 Total other personal(noncommuting) miles driven											+		+					
33 Total miles driven during the year Add lines 30 through 32																		
34 Was the vehicle a		ersonal use		Yes	No	Yes	No	No Yes		No Y		Yes No		Yes N		Yes	No	
during off-duty ho	urs? .										1		$\top$					
35 Was the vehicle us owner or related p		by a more tl	nan 5%															
<b>36</b> Is another vehicle	avaılable fo	r personal us	e? .															
<b>Section</b> Answer these question 5% owners or related	ns to determ		et an exc													not mo	re than	
<b>37</b> Do you maintain a	•			nibits all i	personal	use of	vehi	cles,	ıncl	udıng co	mmu	tıng, b	y you	r	Y	es	No	
														•	<u>                                   </u>		110	
38 Do you maintain a employees? See the													r	-				
39 Do you treat all us	e of vehicles	s by employe	es as pei	rsonal us	e?													
<b>40</b> Do you provide movehicles, and reta				oyees, ol	otaın ınfo	rmatio	n fro	m you	ır er	mployee	s abo	ut the	use o	f •				
<b>41</b> Do you meet the re				automobi	le demor	nstratio	n us	e? (S	ee ı	nstructi	ons)							
Note: If your answ	<i>ı</i> er to 37.38	. 39. 40. or 4	1	s." do not	t comple	te Sect	ion E	· 3 for t	he d	overed	vehic	les						
	rtization	<u>, , , , , , , , , , , , , , , , , , , </u>		<u>,                                      </u>	•													
		(b)						(4)		Τ (	e)				<b>(6)</b>			
(a) Date Description of costs amortization			(c) A mortizable amount				Code cection  A mortizati period or				А		tızatıc	<b>(f)</b> ::zation for s year				
43 A month and the	oto that ha	begins	2012			+=======				perc	entag	e						
<b>42</b> A mortization of co	ists that beg	ms auring yo	ur 2013	ıax year	(see insi	Tuction	15)			1		1						
<b>43</b> A mortization of co	sts that beg	an before voi	ur 2013 t	ax year				<del></del>			43	1						
		/ -		,	_		-			- <del>-</del>								

44 Total. Add amounts in column (f) See the instructions for where to report