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DLN: 93493317021574

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 cal		ing 01-01-2013 , 2013, and end	ling 12-31	-2013	•		
		applicable	C Name of organization National Automobile Dealers Asso	ciation			D Emplo	yer iden	tification number
		change	Doing Business As			53-0	114725		
Na	me ch	ange							
Ini	tial reti	um		f mail is not delivered to street address)	Room/suite	2	E Teleph	one numb	per
Te	rmınate	ed	8400 Westpark Drive Suite				(703)	821-7	000
_ Am	ended	l return		ountry, and ZIP or foreign postal code	•		(703)	1021-7	000
— Ap	plicatio	n pending	MCLEAN, VA 22102				G Gross	eceipts \$	109,930,607
			F Name and address of p	rıncıpal officer		H(a) Is th	ıs a group	return	for
			joseph I cowden 8400 WESTPARK DRIVE				rdinates?		┌ Yes 🗸 No
			MCLEAN, VA 22102			H(b) Are	all cubord	natas	┌ Yes ┌ No
							ided?	illates	j řesj No
I Ta	x-exer	mpt status	501(c)(3) 501(c)(6)	◀ (Insert no)	527	If"N	o," attach	a list ((see instructions)
J W	ebsit	: e:► NA	DA ORG			H(c) Gro	up exempt	ion num	nber ►
W =			Corporation Trust Associa			1.(-,			
	m or o rt I		imary	ition Other		L Year of fo	ormation 19	917 M	State of legal domicile DE
Fe			-						
	1			sion or most significant activities ing with MANUFACTURERS AND		GRESS OP	ERATE TI	RAININ	G AND SERVICE
				I IMPROVING THEIR SALES AN					
క్ర									
듄									
<u>=</u>									
Governance	2	Check t	his box 🔭 if the organization	discontinued its operations or di	sposed of	more than 2	25% of its	net ass	sets
	٦	Number	of voting members of the gove	erning body (Part VI, line 1a) .				з	63
Activities &				rs of the governing body (Part VI,				4	63
Ē				ın calendar year 2013 (Part V , lır			•	5	128
ទ្ធ			·	fnecessary)		• • •		6	120
•			•	Part VIII, column (C), line 12				7a	332,629
			elated business taxable incom			7b	191,738		
	 	Tree anne		- monitronii 330 1, inic 31 1	<u> </u>		or Year	1 75 1	Current Year
	8	Contr	ibutions and grants (Part VIII	line 1 h)			Ji Tear	0	0
ē	9			, line 2g)			33,917,		36,495,501
Revenue	10			mn (A), lines 3, 4, and 7d)		6,79			43,096,575
ž	11			A), lines 5, 6d, 8c, 9c, 10c, and 1		3,941,5			4,329,392
	12			11 (must equal Part VIII, column			-, ,		1,70207002
				<u> </u>			44,652,	324	83,921,468
	13			art IX, column (A), lines 1–3).				0	0
	14			t IX, column (A), line 4)				0	0
ø	15			oyee benefits (Part IX, column (A), lines		13,355,	943	15,314,349
)Se	16a	5-10 Profes	•	X, column (A), line 11e)	0			13,314,349	
<u>Φ</u>	_						\dashv		
五	1					27.770	000	21 271 021	
	1								
<u>. 9</u>	19	Revei	ide less expenses Subtract III	ie 18 ii oiii iiiie 12	· · ·	 			
8 9 9 10 9 9 9							g or curre Year		End of Year
egg.	20	Total	assets (Part X, line 16)				139,054,	936	151,558,260
4 B	21						49,365,		16,535,344
žŽ	22			ct line 21 from line 20			89,689,	234	135,022,916
Pa	rt II		nature Block						
Not Assets or Expenses Fund Balances	17 18 19	Total fu O ther Total Rever	undraising expenses (Part IX, column expenses (Part IX, column (A expenses Add lines 13–17 (r nue less expenses Subtract lir	(D), line 25) ▶ 0), lines 11a-11d, 11f-24e) nust equal Part IX, column (A), line 18 from line 12	ne 25)	Beginnin		943 381 int	
e B	20								
žĒ	1								
				oc.mo El Hom mic 20 I I I	• •		, ,	'	155,022,510
				examined this return, including ac	company	ına schedul	es and sta	tement	s, and to the best of
		as any k	nowledge	omplete Declaration of preparer	(other tha			all ınfoı	mation of which
<u></u>	_	**** Sian	*** ature of officer				014-11-12 ate		
Sigr		'				U			
Her	=		nas goulionis director of finance e or print name and title						
			·	Dronarode signature	I n	to 1		LDTIN	
			Print/Type preparer's name Craig Stevens CPA	Preparer's signature	Dat	011	eck lif f-employed	PTIN P00177	781
Paid		1	Firm's name FARONSON LLC				n's EIN 🟲		
	pare								
Use	On	ıly 📙	Firm's address 🟲 805 KING FARM BLV	D 3RD FLOOR		Pho	one no (703	3) 821-70	00
		·	ROCKVILLE, MD 20	850					

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

✓ Yes ☐ No

Form	1990 (2013)				Page
Par		nt of Program Service A chedule O contains a response	Accomplishments or note to any line in this Part	III	
1	Briefly describe t	he organization's mission			
CON EDU TRA	IGRESS AND THE I	EXECUTIVE BRANCH ON LEG L AND REGULATORY ISSUE	GISLATIVE AND REGULATOR S DEVELOP RESEARCH DATA	OMOBILE MANUFACTURERS L Y ISSUES ON BEHALF OF DEAL A ON THE AUTOMOBILE INDUS IR SALES, SERVICES, AND OP	ERS PROVIDE STRY OPERATE
2	the prior Form 99	O or 990-EZ?	rogram services during the yea	r which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Sched	ule O		
3		on cease conducting, or make	significant changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule C	1		
4	expenses Section		anizations are required to repor	nree largest program services, as t the amount of grants and alloca	
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
		WITH FACTORY and AFTER MARKET		RTANTLY TO THE EXEMPT FUNCTION BY URPOSE IS TO INFORM MEMBERS OF CU	
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	DEALERS WITH INFO			UTING TO THE EXEMPT FUNCTION BY PR ROGRAMS INCLUDE DEALER CANDIDATE	
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	INDUSTRY RELATION MANUFACTURERS A		M IS TO DEVELOP and ADVOCATE POSI	TIONS WHICH WILL IMPROVE THE DEALE	ERS RELATIONSHIP WITH
4d	Other program s	ervices (Describe in Schedule	O)		
	(Expenses \$		g grants of \$) (Revenue \$)

Total program service expenses ►

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{\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	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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		No			
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? If "Yes," complete Schedule J						
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?						
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c					
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d					
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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? If "Yes," complete Schedule L, Part III	27		No			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)						
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part						
		28a		No			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No			
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? 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		Νo			
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?	30	Yes				

Part V Statements Regarding Other IRS Filings and Tax Compliance

Fai	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	 Yes	.] No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 151		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	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country CJ, BD			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		
a	If "Yes," indicate the number of Forms 8282 filed during the year	1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_		
_		8		
	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		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	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)			
.2a	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 year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		1
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand]		
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
	eties B. Belieies (This Castian D. requests information about policies not required by the Internal D		·a Cad	o 1
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie cou	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a 12a 12b	Yes Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No

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
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►THOMAS C GOULIONIS 8400 WESTPARK DRIVE
 McLean, VA 22102 (703) 821-7000

Form 990	(2013)	
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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)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	tion (han c in is l	ne b both ctor	oox, an o	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W	,_	(F) Estima amount of compens from t	other ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganizati relate organiza	ed .
											-		
1b c	Sub-Total		 ection A		•			*					
d	Total (add lines 1b and 1c) .			• •	٠.	٠.	•	Þ	2,928,887	1,148,8	53		456,554
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho received more th	nan	·		
												Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •		yee, •	or highest compen	sated employee	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual									4	Yes		
5	Did any person listed on line 1 services rendered to the organ									or individual for	5		No
-54	ection B. Independent Co	ntractors								-			
1	Complete this table for your fix	/e highest comp											
	compensation from the organiz	zation Report co (A)	ompens	ation	tor t	ne c	alenda	arye	ar ending with or wi	(B)	ion's	tax year (C)

(A)	(B)	(C)
Name and business address	Description of services	Compensation
marshall robinson assoc,		565,763
microsoft licensing,	ıt	165,714
payne frears llp,		163,240
ml strategies llc,		150,737
miller Chevalier chartered,		120,000
Takal musekan akundan andanka antus akan 70 aludun akunkan kukun kutus da akha alubah da ak		

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

Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f
Program Serwce Revenue	2a b c d e f
	3 4 5 6a b c d
Other Revenue	b d 8a b c 9a
	b c 10a b c
	11a b c d e

/	Statement o	of Revenue ule O contains a respo	nse or note to any lu	(A)	(B)	(C)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					
ь	Membership du	ies 1b					
С	Fundraising eve	ents 1 0	:				
d	Related organiz	zations 1d					
e	Government grant						
f	_	ons, gifts, grants, and 1f					
g		or included above					
h	Total. Add lines	s 1 a - 1 f		o			
			Business Code				
2a	CONVENTION AND	EXPOSITION	900099	13,392,855	13,392,855		
	MANAGEMENT SER		611600	13,794,652	13,794,652		
c	PUBLICATIONS	· · ·	900099	3,172,245	3,172,245		
d	MEMBER DUES		541900	4,967,597	4,967,597		
e	SPONSORSHIP/ADV	VERTISING	900099	1,168,152	835,523	332,629	
f		am service revenue	300039	1,100,132	033,323	332,029	
'							
g		s 2a-2f		36,495,501			
3		ome (including divider ar amounts)		42,407,122			42,407,122
4	Income from inves	stment of tax-exempt bond	proceeds 🕨	0			
5	Royalties			4,329,392			4,329,392
62	Gross rents	(ı) Real	(II) Personal				
b	Less rental						
	expenses Rental income	0	0				
C .	or (loss)		ľ				
d	Net rental inco	me or (loss)	·	0			
7a	Gross amount	(ı) Securities	(II) O ther				
'"	from sales of assets other than inventory	26,698,592					
ь	Less cost or other basis and	26,009,139					
_c	sales expenses Gain or (loss)	689,453					
d	Net gain or (los	ss)		689,453			689,453
8a		rom fundraising					
	\$	s reported on line 1c)					
	See Part IV, lin	ne 18					
		a					
b c		penses b (loss) from fundraising		0			
	Gross income f	rom gaming activities					
	See Pail IV, III	ne 19 a					
b		penses b		_			
		(loss) from gaming act	ivities	0			
TOA	Gross sales of returns and allo	owances .					
Ь	less costofa	a oods sold b					
c		(loss) from sales of inv	entory	o			
	Miscellaneous		Business Code				
11a							
b							
c							
d	All other reven	ue					
e	Total. Add lines	s 11a-11d	•	0			
12	Total revenue.	See Instructions .		83,921,468	36,162,872	332,629	47,425,967

Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
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	Check if Schedule O contains a response or note to any line in this	Part IX			
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0	•		· .
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	-			
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	2,099,808			
7	Other salaries and wages	10,672,732			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	2,541,809			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	148,245			
c	Accounting	3,518			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	178,475			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,028,178			
12	Advertising and promotion	1,099,240			_
13	Office expenses	2,659,370			
14	Information technology	5,083,276			
15	Royalties	, ,			
16	Occupancy	1,360,536			-
17	Travel	3,119,684			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,608,687			
20	Interest	0			
21	Payments to affiliates	488,613			
22	Depreciation, depletion, and amortization	121,237			
23	Insurance	109,287			
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	COMMISSIONS	1,706,269			
b	EQUIPMENT RENTAL	2,901,013			
c	CORPORATE OVERHEAD	6,355,478			
d	TAXES	112,483			
е	All other expenses	187,442			
25	Total functional expenses. Add lines 1 through 24e	46,585,380			
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

Cash-non-interest-bearing Segmining flyear End of year	Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
2 Savings and temporary cash investments 396 2 380 3 Pledges and grants receivable, net 0 3 0 4 Accounts receivable, net 0 3 0 4 Accounts receivable, net 0 0 5 0 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees complete Part II of Schedule L 0 5 0 6 Loans and other receivables from their disqualified persons (as defined under section 4958(R)(II)), persons described in section 4958(R)(3)(B), and contributing employers and sponsoring organizations of section 50 I(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 0 6 0 7 Notes and loans receivable, net 0 7 0 0 8 Inventories for sale or use 0 6 0 9 Prepaid expenses and deferred charges 0 0 0 0 0 0 10 Land, buildings, and equipment cost or other basis Complete Part II of Schedule L 0 0 0 0 0 0 0 10 Land, buildings, and equipment cost or other basis Complete Part II of Schedule D 0 0 0 0 0 0 0 0 0						
1 1 2 2 2 2 2 2 2 2		1	Cash-non-interest-bearing	2,041,000	1	2,081,681
4 Accounts receivable, net 2,000,708 4 3,231,900 4 Accounts receivable, net 2,000,708 4 3,231,900 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 0 5 0 6 Loans and other receivables from other disqualified persons (as defined under section 49,58 (f)(1)), persons described in section 49,58 (f)(1), person described in section 49,58 (f)(1), person described in section 49,58 (f)(1), person described in section 49,58 (f) f) for section 49,58 (f) f		2	Savings and temporary cash investments	399	2	399
Solution and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 0 S 0 0		3	Pledges and grants receivable, net	0	3	0
Notes and loans receivable, net 10 10 10 10 10 10 10 1		4	Accounts receivable, net	2,998,788	4	3,231,949
1		5	key employees, and highest compensated employees Complete Part II of		-	
Name	## Section of the sec	6	section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees'	0	5	
Name						0
Name		7		0	7	0
10a		Inventories for sale or use	0	8		
Part VI of Schedule D 10a 2.232.447		9	Prepaid expenses and deferred charges	705,673	9	615,766
11 Investments—publicly traded securities 114.160,390 11 130.227,318 12 Investments—other securities See Part IV, line 11 15.501,307 12 12.902,912 13 Investments—other securities See Part IV, line 11 0 13 0 0 14 0 0 14 0 0 15 0 14 0 0 14 0 0 15 0 0 14 0 0 14 0 0 15 0 0 14 0 0 14 0 0 15 0 0 14 0 0 14 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 15 0 0 0 15 0 0 0 0 0 0 0 0 0		10a				
12 Investments—other securities See Part IV, line 11 15,501,307 12 12,923,912 13 Investments—program-related See Part IV, line 11 0 13 0 14 Intangible assets 0 14 0 15 Other assets See Part IV, line 11 2,533,002 15 1,286,374 16 Total assets. Add lines 1 through 15 (must equal line 34) 139,054,939 16 151,559,260 17 Accounts payable and accrued expenses 5,087,984 17 5,143,943 18 Grants payable 0 18 0 19 Deferred revenue 5,777,194 19 6,153,124 20 Tax—exempt bond liabilities 0 20 0 21 Escrow or custodial account liability Complete Part IV of Schedule D 0 21 0 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 0 22 0 23 Secured mortgages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 49,365,702 26 16,535,344 27 Unrestricted net assets 89,689,234 27 135,022,916 28 Temporarily restricted net assets 0 28 0 29 Permanently restricted net assets 0 29 0 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 39,689,234 33 135,022,916		ь	Less accumulated depreciation 10b 1,041,586	1,114,357	10 c	1,190,861
13		11	Investments—publicly traded securities	114,160,390	11	130,227,318
14		12	Investments—other securities See Part IV, line 11	15,501,307	12	12,923,912
15		13	Investments—program-related See Part IV, line 11	0	13	0
16 Total assets. Add lines 1 through 15 (must equal line 34) 139,054,936 16 151,558,280 17		14	Intangible assets	0	14	0
17		15	Other assets See Part IV, line 11	2,533,022	15	1,286,374
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line 34)	139,054,936	16	151,558,260
19 Deferred revenue 5,777,194 19 6,153,124		17	Accounts payable and accrued expenses	5,087,984	17	5,143,943
20 Tax-exempt bond liabilities		18	Grants payable	0	18	0
Secured mortgages and notes payable to unrelated third parties 0 21 0 0 0 21 0 0 0 22 0 0 0 0 23 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		19	Deferred revenue	5,777,194	19	6,153,124
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities	0	20	0
Unsecured notes and loans payable to unrelated third parties	د	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Unsecured notes and loans payable to unrelated third parties	iitie	22				
Unsecured notes and loans payable to unrelated third parties	Liabilities		persons Complete Part II of Schedule L	0	22	0
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third parties	0	23	0
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties	0	24	0
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				· ' '		
lines 27 through 29, and lines 33 and 34. 27		26		49,365,702	26	16,535,344
30 Capital stock or trust principal, or current funds	S)		- · · · · · · · · · · · · · · · · · · ·			
30 Capital stock or trust principal, or current funds	ĕ	27	- '	89 689 234	27	135 022 916
30 Capital stock or trust principal, or current funds	<u>න</u>			<u> </u>		
30 Capital stock or trust principal, or current funds	<u> </u>					
30 Capital stock or trust principal, or current funds	ŭ	29			29	
30 Capital stock or trust principal, or current funds	<u>.</u>		- · · · · · · · · · · · · · · · · · · ·			
31 Paid-in or capital surplus, or land, building or equipment fund	9	30			30	
33 Total net assets or fund balances	Ř	31			31	
33 Total net assets or fund balances	ΑŠ	32			32	
34 Total liabilities and net assets/fund balances	ቑ	33	Total net assets or fund balances	89,689,234	33	135,022,916
	Z	34	Total liabilities and net assets/fund balances	139,054,936	34	151,558,260

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		83,9	921,468
2	Total expenses (must equal Part IX, column (A), line 25)	2		46 1	585,380
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		3/,.	336,088
		4		89,6	589,234
5	Net unrealized gains (losses) on investments	5		7,9	97,594
6	Donated services and use of facilities	6			
7	Investment expenses				
	Division named admiret menta	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		135,0	22,916
Par	t XII Financial Statements and Reporting			· ·	•
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed o	n		
	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 sepa basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
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?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits				

Software ID: Software Version:

EIN: 53-0114725

Name: National Automobile Dealers Association

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, ependent Co	Direct ntracto	ors, ors	Tru	ste	es, ŀ	(ey	Employees, High	nest	
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more tl perso and a	ion (d han o n is b	ne b oth a ctor/	ox, ι an o /trus	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 trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033 11130/	2/1033 11130/	related organizations
David W Westcott	5 0	х		×						
jeffrey b carlson	5 0	х		x						
SECRETARY WILLIAM P UNDERRINER	5 0	X								
director FORREST MCCONNELL III	5 0									
vice chairman george e nahas	5 0	Х		X						
treasurer		Х		X						
andrew caldwell jr director	5 0	Х								
PETER E BLACKSTOCK DIRECTOR	5 0	х								
greg taylor director	5 0	х								
GARY H REYNOLDS	5 0	х								
WILLIAM H WILLIS JR	5 0	×								
DIRECTOR JOHN C SYMES	5 0	х								
DIRECTOR Steven J Allwine	5 0	-								
Director brian hamilton	5 0	Х								
director stan masmaitsu	5 0	X								
director		Х								
EDWARD C TONKIN director	5 0	х								
DAVID B PENSKE DIRECTOR	5 0	×								
W CARROLL SMITH DIRECTOR	5 0	х								
STEPHEN W WADE	5 0	х								
TAMARA C DARVISH	5 0	×								
DIRECTOR RAMSEY T WAY	5 0	х								
DIRECTOR Mark Birdnow	5 0									
Director Wesley L Lutz	5 0	X								
Director		Х								
MARCY H MAGUIRE DIRECTOR	5 0	Х								
DON CHALMERS DIRECTOR	5 0	х								
Carlo Merlo Director	5 0	х								
	_		1		1	1	-	ı	1	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (C) (D) (E) (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 (Worganizations (Wany hours and a director/trustee) from the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe Former Office Individual trustee or director organizations related Institutional Trustee below emplo)ee organizations dotted line) t compensated .ee CLARENCE B SMAIL JR 5 0 Χ DIRECTOR mark SCARPELLI 5 0 Χ DIRECTOR DAVID L COX 5 0 DIRECTOR DAVID SHEPHERD 5 0 Χ DIRECTOR JACK KAIN 5 0 Х DIRECTOR Dennis Gaudet 5.0 Χ Director CHARLES R GAUNCE 5 0 Χ DIRECTOR DAVID K WILLIAMS JR 5 0 Χ DIRECTOR Dan Mullins 5 0 Χ Director AJ M OUSTALET III 5 0 Χ DIRECTOR Joel Oustalet 5 0 Х Director JAMES R MARSH 5 0 Χ DIRECTOR WILLIAM C FOX 5 0 Χ DIRECTOR NEALE A KUPERMAN 5 0 Χ DIRECTOR DONOVAN A BERTSCH 5 0 Χ DIRECTOR THOMAS D GANLEY 5 0 Χ DIRECTOR CLIFTON C GOODWIN III 5 0 Χ DIRECTOR H DOUGLAS KNUST 5 0 Χ DIRECTOR TED RUSSELL 5 0 Χ DIRECTOR ANNETTE SYKORA 5 0 Χ DIRECTOR WADE D WALKER 5 0 Х DIRECTOR MICHAEL C MARTIN 5 0 Χ DIRECTOR MARLENE HOLLENBACK 5 0 Χ DIRECTOR RICHARD STEPHENS 5 0 Χ DIRECTOR KENNETH C VANCE 5 0 Х DIRECTOR

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

Compensated Employees, and Inde	pendent Cor	ntracto	rs					1	1	1 1
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne booth a	ox, u an of trus	nless ficer 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	Ke, emplojee	Highest compensated employee	Former	2,23 -2	2,23 :2,	related organizations
RICHARD P GREINER JR	5 0	-				2				
DIRECTOR		х								
MICHELLE PRIMM	5 0									
DIRECTOR		Х	_							
DONALD P HICKS	5 0	×								
DIRECTOR		^								
KATHLEEN SIMS	5 0	х								
DIRECTOR										
RICHARD GENTHE	5 0	х								
DIRECTOR JAMES A AUFFENBERG JR	5 0									
DIRECTOR]	х								
TODD M SNELL	5 0									
DIRECTOR		Х								
DESMOND A ROBERTS	5 0									
DIRECTOR		X								
Greg Galpın	5 0	x								
director		^								
donald e sudbay jr director	5 0	х								
william f reineke jr	5 0	х								
chris hurd	5 0	х								
director nchard w witcher	5 0									
		х								
JOSEPH L COWDEN	40 0			х				209,493	406,662	53,636
VP AND CFO/temp president ANDREW D KOBLENZ	40 0									
VP AND GENERAL COUNSEL				х				533,964	117,211	59,536
Peter K Welch President/Part Year	40 0			x				598,227	351,339	46,833
JOHN R LYBOLDT vp dealer services	40 0				х			315,864	0	45,964
STEPHEN R PITT	40 0				х			272,487	0	27,249
vp conventions MICHAEL T REGAN	40 0									
vp industry affairs						х		285,665	0	57,834
DAVID W REGAN VP LEGISLATIVE AFFAIRS	40 0					х		194,011	0	23,503
DAVID F HYATT VP PUBLIC AFFAIRS	40 0					х		268,530	0	41,583
JAMES C MINNIS	40 0					х		0	273,641	47,541
ASSOC GENERAL COUNSEL Michael W Harrington	40 0					х		250,646	0	52,875
Temp VP Legislative affairs	J									

DLN: 93493317021574

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** National Automobile Dealers Association 53-0114725 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Sch	hedule C (Form 990 or 990-EZ) 2013	Complete if the organization is exempt under section 501(under section 501(h)). If the filing organization belongs to an affiliated group (and list in Part IV eacypenses, and share of excess lobbying expenditures) If the filing organization checked box A and "limited control" provisions apply the filing organization checked box A and "limited control" provisions apply the filing organization checked box A and "limited control" provisions apply the filing expenditures (The term "expenditures" means amounts paid or incurred.) Image expenditures to influence public opinion (grass roots lobbying) ring expenditures (add lines 1a and 1b) and propose expenditures (add lines 1c and 1d) and 1d and 1d and 1d and 1d and 1d and				Page 2
P		is exempt under	section 501(c)(3) and file	ed Form 5768	
_			List in Dank IV as			a adduces FIN
٠.			list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3			ol" provisions app	ly		
			l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from 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	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_		•				
	•			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii 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	section 501(h) el he instructions fo	ection do not r lines 2a thre	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
		(a) 2010	(b) 2011	(c) 2012	(d) 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

Par		ization is exempt under section 501(c)(3) and has I tion under section 501(h)).	TOP				
For es	-	below, provide in Part IV a detailed description of the lobbying	(a	1)	(b)		
activi	•	below, provide in Part IV a detailed description of the lobbying	Yes	No	Aı	nount	
1		tion attempt to influence foreign, national, state or local ifluence public opinion on a legislative matter or referendum,					
а	Volunteers?						
b	Paid staff or management (include cor	npensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?						
d	Mailings to members, legislators, or th	ne public?					
e	Publications, or published or broadcas	t statements?					
f	Grants to other organizations for lobby	- · · · · · ·					
g		taffs, government officials, or a legislative body?					
h		nventions, speeches, lectures, or any similar means?					
i	Other activities?	-					
j 2-	Total Add lines 1c through 1i		ı				
2a b	If "Yes," enter the amount of any tax i	rganization to be not described in section 501(c)(3)?					
		ncurred by organization managers under section 4912		ŀ			
		ction 4912 tax, did it file Form 4720 for this year?	ı				
		ization is exempt under section 501(c)(4), section !	501(c))(5) o	r se	ction	
	501(c)(6).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,(-), -			•
						Yes	No
1		dues received nondeductible by members?			1		Νo
2	- · · · · · · · · · · · · · · · · · · ·	se lobbying expenditures of \$2,000 or less?			2		Νo
3		er lobbying and political expenditures from the prior year?				/es	
Par		ization is exempt under section 501(c)(4), section ! r (a) BOTH Part III-A, lines 1 and 2, are answered " es."					
1	Dues, assessments and similar amoun		1			1,967	,596
2		g and political expenditures (do not include amounts of political					
а	Current year		2a			918	
Ь	Carryover from last year		2b			-723	
	Total		2c			2,195	
3	,	6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			910	,298
4		n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and	4				
5	Taxable amount of lobbying and politic	cal expenditures (see instructions)	5		- ;	1,714	,983
Pa	art IV Supplemental Informa	ation					
	vide the descriptions required for Part l t II-B, line 1 Also, complete this part fo	-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou or any additional information	ıp lıst),	Part II	·A , lın	e 2, a	and
	Return Reference	Explanation					
GOV	WIT ISSU ATT LEG COM	TECTS DEALER INTERESTS BEFORE THE US CONGRESS THE H MEMBERS OF CONGRESS TO EXPRESS THE POSITION OF DE JES, PREPARES TESTIMONY FOR CONGRESSIONAL HEARINGS EMPTS TO MODIFY LEGISLATION TO ADDRESS DEALERS' CON ISLATIVE ACTIVITIES SUCH AS HEARINGS, MARKUPS, CONFEIMUNICATES WITH THE DEALER BODY ON LEGISLATIVE MATTORTS TO COMMUNICATE WITH MEMBERS OF CONGRESS	ALERS WHEN ICERNS RENCE	ON VA APPRC S IT MO ES, ETC	RIOU PRIA NIT ,	S TE, A DRS	ND

201124416 3 (1 31111 333 31 333 12) 2313		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

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DLN: 93493317021574

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) Open to Public

nal Revenue Service	and its instruct	tions is at <u>www.irs.gov/form990</u> .			Inspect	IOI	
lame of the organization	on		Emp	loyer identifica	tion numbe	r	
ational Automobile Dealers Associati	OII		53-	0114725			
		vised Funds or Other Similar F			. Complet	e ıf	the
organization ans	wered "Yes" to Form 990			(1) 5			
Total number at end of yea		(a) Donor advised funds		(b) Funds and o	otner accou	ints	
Aggregate contributions to							
Aggregate grants from (du	` ' ' '						
Aggregate value at end of							
Did the organization inforr	n all donors and donor advis	ors in writing that the assets held in dor ganization's exclusive legal control?	nor adv	ısed	┌ Yes	_	No
Did the organization inforr used only for charitable pu	n all grantees, donors, and d urposes and not for the bene	onor advisors in writing that grant funds fit of the donor or donor advisor, or for a			-	_	
conferring impermissible p		11	- F	- 000 P- 1 TV	│ Yes	ļ	No
		the organization answered "Yes" t	to Forn	n 990, Part IV	, line 7.		
	_	anization (check all that apply) or education) Preservation of ar	n histor	rically important	land area		
Protection of natural h		Preservation of a					
Preservation of open s		,					
•	· n 2d ıf the organızatıon held a	a qualified conservation contribution in	the forn	n of a conservat	ion		
casement on the last day	or the tax year			Held at the	End of the	Yea	ır
Total number of conservat	cion easements		2a				
Total acreage restricted b	y conservation easements		2b				
Number of conservation e	asements on a certified histo	oric structure included in (a)	2c				
Number of conservation e historic structure listed in		quired after 8/17/06, and not on a	2d				
Number of conservation e the tax year ►	asements modıfıed, transferı	red, released, extinguished, or terminate	ed by th	ne organization (during		
Number of states where p	operty subject to conservat	on easement is located ►					
Does the organization hav		the periodic monitoring, inspection, han	dling of	f violations, and	┌ Yes	Г	No
Staff and volunteer hours	devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	during the year			
A mount of expenses incur	red in monitoring, inspecting	g, and enforcing conservation easement	s durın	g the year			
'		d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)	┌ Yes	Г	No
balance sheet, and include		nservation easements in its revenue an e footnote to the organization's financia ents					
rt IIII Organizations	Maintaining Collection	s of Art, Historical Treasures, 'es" to Form 990, Part IV, line 8.	or Ot	her Similar <i>i</i>	Assets.		
works of art, historical tre	asures, or other similar asse	.16 (ASC 958), not to report in its reve ets held for public exhibition, education, to its financial statements that describe	or rese	earch in furthera			
If the organization elected works of art, historical tre	l, as permitted under SFAS 1	.16 (ASC 958), to report in its revenue	statem	nent and balance		ıc	
(i) Revenues included in F	Form 990, Part VIII, line 1			► \$			
(ii) Assets included in For	m 990, Part X			- \$			
If the organization receive	d or held works of art, histor	rical treasures, or other similar assets f 116 (ASC 958) relating to these items		icial gain, provid	le the		
Revenues included in Forr	n 990, Part VIII. line 1			► \$			
Assets included in Form 9							
wasers included ill Loll a	JU, ΓαΙL Λ			- >			

Par	t IIII Organizations Maintaining Co	llections of Art	t, His	tori	cal Tr	easur	es, or C	the	r Similar As	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	ieck a	any of t	the follo	wing that	are a	significant use	ofits	
а	Public exhibition		d	Γ	Loan	or excha	ange prog	rams			
b	Scholarly research		e	Γ	Other	=					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	aın how	v they	/ furthe	r the or	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ Yes	┌ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar				_		answere	d "Y	es" to Form 9) 90,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interm	ediary	for c	ontribu	tions or	other ass	ets r		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II and complete the	e follow	ving t	able		Г		Ar	nount	
c	Beginning balance							1c			
d	Additions during the year						ļ	1d			
e	Distributions during the year						ľ	1e			
f	Ending balance						ļ	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?							┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	e expla	anatio	on has	been pro	ovided in I	Part)	KIII		Γ
Pa	art V Endowment Funds. Complete										
		(a)Current year	(b)	Prior y	/ear	b (c)Two	o years back	(d)	Three years back	(e) Four y	ears back
1a	Beginning of year balance							+			
Ь	Contributions							+-			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balan	ice (lin	e 1g,	colum	n (a)) he	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse organization by	ssion of the organiz	zatıon t	that a	re held	d and ad	mınıstere	d for	the	Yes	No
	(i) unrelated organizations			•				•	3a		
b	(ii) related organizations		 ad on S	ched	 ule R?				3a(
4	Describe in Part XIII the intended uses of the	•				•		•			<u> </u>
Pa	rt VI Land, Buildings, and Equipme	ent. Complete if				n answe	ered 'Yes	' to	Form 990, Pa	art IV, li	ine
	11a. See Form 990, Part X, line	10.		1 ,	-) C+		(h)Cash as		(-) ((-)	Da a le con leon
	Description of property				a) Cost o sıs (ınve	estment)	(b)Cost or basis (ot		(c) Accumulat depreciation		Book value
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment		•								
	Other										
Tota	al. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X colu	mn (I	3) line	10(c)		_		I	

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
(3)Other		_
(A) HEDGE FUNDS CITADEL KENSINGTON	6,423,912	F
(B) HEDGE FUNDS TACONIC	6,500,000	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. C	12,923,912	answored 'Ves' to Form 900 Part IV line 11s
See Form 990, Part X, line 13.		answered fes to form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of that of year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*	
Part IX Other Assets. Complete if the organization		Part IV, line 11d See Form 990, Part X, line 15
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the property of the	anızatıon answered 'Yes' to	Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
PAYABLE - RELATED ORGANIZATION	5,238,277	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	5,238,277	

Part	ΧI		evenue per Audited Financial Statements With Revenue pe ered 'Yes' to Form 990, Part IV, line 12a.	er Ro	eturn Complete ıf
1	Tota		support per audited financial statements	1	91,919,062
2	A mo	unts included on line 1 but	not on Form 990, Part VIII, line 12		
a	Net	unrealized gains on investr	ments		
b	Dona	ated services and use of fa	cilities 2b		
c	Reco	overies of prior year grants			
d					
e	Add	lines 2a through 2d .		2e	7,997,594
3	Subt	ract line 2e from line 1 .		3	83,921,468
4	A mo	unts included on Form 990), Part VIII, line 12, but not on line 1		
a	Inve	stment expenses not inclu	ded on Form 990, Part VIII, line 7b . 4a		
b	Othe	er (Describe in Part XIII)	4b		
c	Add	lines 4a and 4b		4c	
5	Tota	l revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	83,921,468
Part	XII		Expenses per Audited Financial Statements With Expenses Swered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Tota		audited financial statements	1	46,585,380
2	A mo	unts included on line 1 but	not on Form 990, Part IX, line 25		
а	Dona	ated services and use of fa	cılıtıes 2a		
b	Prior	year adjustments	2b		
С	Othe	erlosses	2c		
d	Othe	er (Describe in Part XIII)	2d		
e	Add	lines 2a through 2d		2e	
3	Subt	ract line 2e from line 1 .		3	46,585,380
4	A mo	unts included on Form 990	, Part IX, line 25, but not on line 1:		
а	Inve	stment expenses not inclu	ded on Form 990, Part VIII, line 7b 4a		
b	Othe	er (Describe in Part XIII)	4b		
c	Add	lines 4a and 4b		4c	
5			d 4c. (This must equal Form 990, Part I, line 18)	5	46,585,380
		Supplemental Info			
Part '	de the V,line nation	4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p	rovic	de any additional
	R	eturn Reference	Explanation		
schedu	ıle d p		NADA evaluates uncertainty in income tax positions taken or expected to based on a more-likely-than-not recognition standard. If that threshold is then measured at the largest amount that is greater than 50% likely of being settlement and is recognized in NADA's financial statements. As of Decembere are no accruals for uncertain tax positions. If applicable, NADA recognized as a component of income tax expense. Tax years from December 31, 201 remain open for examination by federal and state tax authorities.	met, ng re nber rds 11	the tax position is valized upon ultimate 31, 2013, and 2012, interest and penalties

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

Schedule D (Form 990) 2013

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DLN: 93493317021574

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

National Automobile Dealers Association

Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

53-0114725

Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiza	ation answered		
1	For grantmakers. Does the o other assistance, the grantee to award the grants or assista	s' eligibility fo	r the grants o	r assistance, and the s	selection criteria used	d Yes No		
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.							
3	Activites per Region (The follow	ing Part I, line 3	B table can be du	uplicated if additional spa	ice is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1)	Central America and the Caribbean		_	Investments	n/a	9,742,288		
(2)	North America			Investments	n/a	7,763,263		
(3)								
(4)								
(5)								
b	Sub-total Total from continuation sheets to Part I Totals (add lines 3a and 3b)					17,505,551 17,505,551		
				I .				

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

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

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	₽	- 1	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	Ŀ	- 1	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	Į✓	- 1	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	F	- 1	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	F	- 1	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	⊽	- 1	Νo

Schedule F (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 53-0114725

Name: National Automobile Dealers Association

Schedule F (Form 990) 2013

Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

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DLN: 93493317021574

OMB No 1545-0047

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Schedule J (Form 990)

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization National Automobile Dealers Association

Employer identification number

53-0114725

Pa	rt 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 II					
	First-class or charter travel	厂	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	✓ Tax idemnification and gross-up payments	굣	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			2	Yes	
	an ectors, trastees, sinceres, metaling the electric	outvo b	meetor, regarding the reamb effective in the 14		res	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III					
	∇ Compensation committee		Written employment contract			
	☐ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	nt?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	plete 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	, lıne 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,					
	subject to the initial contract exception described in					
	ın Part III			8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?					

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

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

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

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

Schedule J (Form 990) 2013

Part III 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
	CERTAIN DIRECTORS ARE REIMBURSED FOR FIRST CLASS AIRFARE TO ATTEND BOARD OR COMMITTEE MEETINGS NADA HAS A HEALTH AND WELLNESS PLAN WHEREBY A PORTION OF HEALTH CLUB DUES ARE REIMBURSED TO PARTICIPATING EMPLOYEES IN 2011 CERTAIN KEY EMPLOYEES OF NADA PARTICIPATED IN THE PLAN
	NADA HAS A QUALIFIED DEFERRED COMPENSATION PLAN FOR KEY EMPLOYEES IN ADDITION, A SUBSIDIARY ENTITY HAS A NONQUALIFIED DEFERRED COMPENSATION PLAN OFFICERS OF NADA PARTICIPATE IN THEIR APPROPRIATE PLAN

Schedule J (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 53-0114725

Name: National Automobile Dealers Association

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

(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
JOSEPH L COWDEN VP AND CFO/temp president	(I) (II)		0,500	1 ' 1				
ANDREW D KOBLENZ VP AND GENERAL COUNSEL	(I) (II)		20,300				1	
JOHN R LYBOLDT vp dealer services	(I) (II)		15,000	4,684	22,950 0	23,014	361,828	0 0
STEPHEN R PITT vp conventions	(I) (II)		15,000	7,907	22,950 0	4,299	299,736	0
MICHAEL T REGAN vp industry affairs	(I) (II)		5,000	3,105	22,950 0	34,884	343,499	0 0
DAVID WREGAN VP LEGISLATIVE AFFAIRS	(I) (II)		0	2,338	14,475 0	9,028	217,514	0
DAVID FHYATT VP PUBLIC AFFAIRS	(I) (II)		0	5,742	19,125 0	22,458	310,113	0
JAMES C MINNIS ASSOC GENERAL COUNSEL	(I) (II)		0 25,000	0 3,297	0 22,950	0 24,591	0 321,182	0
Peter K Welch President/Part Year	(I) (II)		1 120,7121			29,505 17,328	I	
Michael W Harrington Temp VP Legislative affairs	(1) (11)		35,000	1,682	22,950 0	29,925	303,521	0
4								

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2013

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization National Automobile Dealers Association Employer identification number

53-0114725

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 PART vi SECTION A QUESTION 6 AND 7	
FORM 990 PART VI SECTION B QUESTION 11A	AFTER THE RETURN HAS BEEN REVIEWED BY THE INDEPENDENT AUDITORS AND PRIOR TO FILING WITH THE IRS, A COPY IS PROVIDED TO CERTAIN OFFICERS (INCLUDING THE TREASURER) FOR THEIR REVIEW
FORM 990 PART VI SECTION B QUESTION 12C	NADA HAS A WRITTEN POLICY WHEREBY MEMBERS OF THE BOARD OF DIRECTORS AND OFFICERS (INCLUDIN G CERTAIN KEY EMPLOYEES) ARE REQUIRED ANNUALLY TO DISCLOSE OR UPDATE POTENTIAL CONFLICTS O F INTEREST NADA REQUIRES THAT SUCH PERSONS COMPLETE A FORM ANNUALLY ON WHICH THE MANDATED DISCLOSURE OR UPDATING, IF ANY, IS PROVIDED IN ADDITION, NADA HAS A WRITTEN POLICY WHERE BY OTHER EMPLOYEES ARE REQUIRED TO REPORT POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE
FORM 990 PART VI SECTION B QUESTION 15 A,B	NADA HAS A COMPENSATION COMMITTEE COMPRISED OF DIRECTORS/OFFICERS THAT REVIEW EXECUTIVE SALARIES ANNUALLY
FORM 990 PART VI SECTION C QUESTION 19	GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE NOT AVAILABLE TO THE PUBLIC
FORM 990 page 2 PART III QUESTION 4D	GOVERNMENT RELATIONS - PROTECTS DEALER INTERESTS BEFORE THE U.S. CONGRESS. THE STAFF COMMU NICATES WITH MEMBERS OF CONGRESS TO EXPRESS THE POSITION OF DEALERS ON VARIOUS ISSUES, PRE PARES TESTIMONY FOR CONGRESSIONAL HEARINGS WHEN APPROPRIATE, AND ATTEMPTS TO MODIFY LEGISL ATION TO ADDRESS DEALERS' CONCERNS. IT MONITORS LEGISLATIVE ACTIVITIES SUCH AS HEARINGS, M ARKUPS, CONFERENCES, ETC, COMMUNICATES WITH THE DEALER BODY ON LEGISLATIVE MATTERS, AND D IRECTS DEALER EFFORTS TO COMMUNICATE WITH MEMBERS OF CONGRESS
TRANSACTIONS WITH RELATED ORGANIZATION	EXEMPT RENTAL AND ROYALTY REVENUE, UNDER SECTION 512(B)(13)(E) OF THE INTERNAL REVENUE COD E, AN EXEMPT ORGANIZATION RECEIVING CERTAIN QUALIFIED SPECIFIED PAYMENTS (I.E. RENTS OR RE AL ESTATE, ROYALTIES, INTEREST AND ANNUITIES) FROM ITS CONTROLLED SUBSIDIARY MAY EXCLUDE S OME OR ALL OF SUCH PAYMENTS FROM ITS UNRELATED BUSINESS TAXABLE INCOME

DLN: 93493317021574

2013

OMB No 1545-0047

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SCHEDULE R

(Form 990)

Department of the Treasury

Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

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

Name of the organization National Automobile Dealers Association **Employer identification number** 53-0114725

(a)	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (If applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income End	of-year assets	Direct controlling entity		
_							
Part II Identification of Related Tax-Exempt Organizations dur	ganizations Complete if ring the tax year.	the organization an	swered "Yes" on	Form 990, Par	t IV, line 34 because it	had on	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c)	atus Direct controlling entity	Section (13) co	
						Yes	No
1) DEALERS ELECTION ACTION COMMITTEE	LOBBYING		527	N/A	NADA	Yes	
3400 WESTPARK DRIVE							
MCLEAN, VA 22102						- 1	
94-D13430D							
54-6154586 (2) NADA EMPLOYEE HEALTH BENEFIT PLAN	HEALHCARE		501(c)(9)	N/A	NADA	Yes	T
	HEALHCARE		501(c)(9)	N/A	NADA	Yes	
(2) NADA EMPLOYEE HEALTH BENEFIT PLAN	HEALHCARE		501(c)(9)	N/A	NADA	Yes	
(2) NADA EMPLOYEE HEALTH BENEFIT PLAN 3400 WESTPARK DRIVE MCLEAN, VA 22102	HEALHCARE		501(c)(9)	N/A	NADA	Yes	
(2) NADA EMPLOYEE HEALTH BENEFIT PLAN 3400 WESTPARK DRIVE MCLEAN, VA 22102	HEALHCARE		501(c)(9)	N/A	NADA	Yes	
(2) NADA EMPLOYEE HEALTH BENEFIT PLAN 3400 WESTPARK DRIVE MCLEAN, VA 22102	HEALHCARE		501(c)(9)	N/A	NADA	Yes	
(2) NADA EMPLOYEE HEALTH BENEFIT PLAN 3400 WESTPARK DRIVE MCLEAN, VA 22102	HEALHCARE		501(c)(9)	N/A	NADA	Yes	

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predo income unre exclud tax sectio	elated, ded from under ons 512-	d, total income			(h Disprop allocat	rtionate	(i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)		ox managır partner -1		(k) Percentage ownership
					5	514)				Yes	No			Yes	No	
					1											
					<u> </u>											
Identification of Related line 34 because it had one of (a) Name, address, and EIN of related organization			s a corp		trust (1) (ntrolling	during t	entity corp,	Shar		Share	(g) of end-oyear ssets	of- Pe	(h) ercenta wners	age	s	(i) fection 512 (b)(13) controlled entity?
(1) NADA SERVICES CORPORATION	PUBLISHING	DE		NADA		C CORP		:	11,366,088	7	1,945,5	i32 1	00 000) %		Yes No
8400 WESTPARK DRIVE MCLEAN, VA 22102 53-0114728																
(2) NADA RETIREMENT ADMINISTRATORS INC	ADMIN	DE		NADASC		C CORP									١	'es
8400 WESTPARK DRIVE MCLEAN, VA 22102 20-0102939																
(3) nat'l auto dealers assoc Indemnity inc	INSURANCE	DE		NADASC		C CORP									Y	res es
8400 WESTPARK DRIVE MCLEAN, VA 22102 84-1424429																
(4) NAISA	INSURANCE	DE		NADASC		C CORP									١	'es
8400 WESTPARK DRIVE MCLEAN, VA 22102 54-1044983																
(5) NADA LINK LLC	SERVICES	DE		NADASC		C CORP									١	res es
8400 WESTPARK DRIVE MCLEAN, VA 22102 20-2628901																
												_			\dashv	$-\!$

(5) FROM NADA SERVICES CORPORATION

Part \	Transactions With Related Organizations Complete if the organization	answered "Yes" on Fo	orm 990, Part IV, lın	e 34, 35b, or 36.							
No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No				
1 Durın	g the tax year, did the orgranization engage in any of the following transactions with one or n	nore related organizatior	ns listed in Parts II-IV?	>							
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity											
b Gı	ft, grant, or capital contribution to related organization(s)				1b		No				
c Gi	c Gift, grant, or capital contribution from related organization(s)										
d Lo	ans or loan guarantees to or for related organization(s)				1d		No				
e Loans or loan guarantees by related organization(s)											
f Di	vidends from related organization(s)				1f						
g Sa	le of assets to related organization(s)				1 g		No				
h Pu	rchase of assets from related organization(s)				1h		No				
i Ex	change of assets with related organization(s)				1i		No				
j Le	ase of facilities, equipment, or other assets to related organization(s)				1j		No				
k Le	ase of facilities, equipment, or other assets from related organization(s)				1k	Yes					
Performance of services or membership or fundraising solicitations for related organization(s)											
m Performance of services or membership or fundraising solicitations by related organization(s)											
	aring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
	paring of paid employees with related organization(s)				10		No				
p Re	embursement paid to related organization(s) for expenses				1 p	Yes					
q Re	imbursement paid by related organization(s) for expenses				1q	Yes					
r Ot	her transfer of cash or property to related organization(s)				1r		No				
s Ot	her transfer of cash or property from related organization(s)				1 s		No				
2 If t	the answer to any of the above is "Yes," see the instructions for information on who must cor	mplete this line, including	g covered relationships	and transaction threshold	s						
	(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved Method of determining am										
(1) FROM	NADA SERVICES CORPORATION	a	2,821,249	9 ACCRUAL							
(2) PAYME	ENTS TO NADA SERVICES CORPORATION	а	1,358,304	4 ACCRUAL							
(3) PAYME	ENTS TO NADA SERVICES CORPORATION	р	1,584,151	1 ACCRUAL							
(4) PAYME	ENTS TO AFFILIATES	р	488,613	3 ACCRUAL							

876,000 ACCRUAL

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	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\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