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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -Form **990** 

DLN: 93493316045206

OMB No 1545-0047

Open to Public Inspection

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

Department of the

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

 $\blacktriangleright$  Do not enter social security numbers on this form as it may be made public

 $\blacktriangleright$  Information about Form 990 and its instructions is at  $\underline{\textit{www IRS qov/form990}}$ 

A Fo	rthe 3	2015 ca	lendar year, or tax year beginning 01-01-2015 , and ending 12-31-201	<u> </u>					
	ck if ap		C Name of organization			D Empl	oyer i	dentification number	
_	dress ch		Alliance of Automobile Manufacturers Inc			-	-		
<u> </u>	me cha	_	- David have a second			52-2	1439	108	
☐ In	tıal retu	rn	Doing business as						
FII FII	nal terminal	tod	Number and street (or P O box if mail is not delivered to street address) Room/suit	:e		E Telepl	none ni	umber	
_	ended n		803 7th Street NW No 300			(202	) 326	5-5593	
		pending	City or town, state or province, country, and ZIP or foreign postal code						
			Washington, DC 20001			<b>G</b> Gross	receip	ts \$ 33,755,648	
			F Name and address of principal officer	H(a)	Is thi	s a grou	p retu	ırn for	
			Mitch Bainwol 803 7th Street NW No 300			dinates	•	Yes	; <b>\</b>
			Washington, DC 20001	1171-3	No Area	ll subord	linato	is.	
I Tax	c-exemp	ot status	501(c)(3) <b>✓</b> 501(c) (6) <b>◄</b> (insert no ) <b>☐</b> 4947(a)(1) or <b>☐</b> 527	H(D)	includ		illiate	Yes T	Νo
1 W	oheit o	► httr	o //www autoalliance org/		If"No	," attac	h a lıs	st (see instructions)	)
	ebsite.	P IICC	5 // www autoumance org/	H(c)	Grou	p exemp	tion r	number 🕨	
<b>K</b> Form	n of orga	anızatıon	✓ Corporation Trust Association Other ►	L Yea	ar of fo	mation 1	999	M State of legal domicile	e D
-		<u> </u>							
Pa		Sum	*						—
			scribe the organization's mission or most significant activities ent the common interests of its members and provide a forum to enable	them to	adva	nce publ	lic pol	licies that meet	
	cor	nsümer	and societal needs for clean, safe, efficient, and affordable personal trai	nsporta	tion T	o repres	sent 1	2 car and light truck	k
au			arers selling vehicles in the Unites States and serves as a leading advoc of sustainable mobility permits technological progress in harmony with						
Ě	Pili	licipies	of sustainable mobility permits technological progress in narmony with	the env	/11011111	ent and	the et	Contonly	_
Ē									
0 Ve	_								
Activities & Governance	<b>2</b> C	heck th	is box ▶ ☐ if the organization discontinued its operations or disposed o	f more	than 2	5% of it	s net	assets	
<b>20</b> √2	3 N	umhar	of voting members of the governing body (Part VI, line 1a)				з	1 ,	6
Æ			of independent voting members of the governing body (Part VI, line 1a)				4		6 6
ctì			mber of individuals employed in calendar year 2015 (Part V., line 2a) .			•	5	60	_
⋖			mber of volunteers (estimate if necessary)				6	18	
			related business revenue from Part VIII, column (C), line 12				7a	2,602	
			ated business taxable income from Form 990-T, line 34				7b	<u> </u>	_
						r Year		Current Year	
	8	Contri	butions and grants (Part VIII, line 1h)			781	,896	1,022,	,10
enue	9		am service revenue (Part VIII, line 2g)			27,403	,381	28,128,	,15
Įė y	10	Invest	tment income (Part VIII, column (A), lines 3, 4, and 7d)			405	,546	502,	,40
Ьşv	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			15	,509	8,	,46
	12	Total	revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			28,606	332	29,661,	12
		12)				20,000	,552		
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)			629	,610	659,	,79
	14		ts paid to or for members (Part IX, column (A), line 4)				0	<del> </del>	
<b>\$</b> ?	15	Saları 5-10)	es, other compensation, employee benefits (Part IX, column (A), lines			10,114	,784	11,115,	,71
Expenses	16a	•	, ssional fundraising fees (Part IX, column (A), line 11e)				0		
kb e	b		indraising expenses (Part IX, column (D), line 25) ▶0						
ū	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			18,374	,956	17,064,	.30
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)			29,119	_	28,839,	
	19		ue less expenses Subtract line 18 from line 12			-513	_	821,	
<u>δ</u> φ				Bear-	nına -				
Net Assets or Fund Balances				Begin	ning o	f Current	теаг	End of Year	
Ass. Bal	20		assets (Part X, line 16)			23,942	,088	24,816,	,19
a pur	21		liabilities (Part X, line 26)	•		7,988		8,535,	
	22		ssets or fund balances Subtract line 21 from line 20			15,953	,313	16,280,	,51
	t II		ature Block		اللحما	a a		onto ondtate e	+
unde	penal	ties of	perjury, I declare that I have examined this return, including accompany	ring scl	reaule	s and st	ateme	encs, and to the best	COL

preparer has any knowledge

Sign	Sig	gnature of officer		Date			
Here	Ju	dith Mulcahy VP of Operations and Finance					
	Ту	pe or print name and title					
Paid		Print/Type preparer's name Lori A Collingsworth	Preparer's signature Lori A Collingsworth	Date 2016-11-07	Check If self-employed	PTIN P00639819	
Prepare	r	Firm's name		Fırm's EIN ► 58-2676261			
Use Onl		Firm's address ► 8300 Boone Boulevard S	Phone no (703) 893-0300				
USE OIII	У	Vienna, VA 22182					
May the IRS	Sidisc	uss this return with the preparer sh	own above? (see instructions)			√Ves □No	

2016-11-07

Forn	n 990 (2015)				Page <b>2</b>
Pai	t IIII Statemei	nt of Program Service	Accomplishments		-
		hedule O contains a respons ne organization's mission	se or note to any line in this Part	III	
socı vehi	etal needs for clean, cles in the Unites St	, safe, efficient, and affordab tates and serves as a leadin	and provide a forum to enable the le personal transportation. To rep g advocacy group for the auto inc environment and the economy	present 12 car and light truck m	nanufacturers selling
2	the prior Form 990	on undertake any significant ) or 990-EZ? these new services on Sche		r which were not listed on	⊤Yes √No
3	Did the organization services?		e significant changes in how it co	onducts, any program	⊤Yes √No
4	expenses Section		ccomplishments for each of its th ganizations are required to repor th program service reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	Research To work w	vith member companies on researc	th matters This includes programs addre	ssing a variety of environmental and v	vehicle safety issues
4b	(Code Legislation and Regu	) (Expenses \$ lation To work with member com	including grants of \$	) (Revenue \$ es affecting the industry	)
<b>4</b> c	(Code Communications Ex	) (Expenses \$ tensive communications with mem	including grants of \$	) (Revenue \$	) and other issues affecting the
			nd current trends in communications		
4d	Other program se	ervices (Describe in Schedu	le O )		
	(Expenses \$	•	ng grants of \$	) (Revenue \$	)

Total program service expenses ▶

10

11a

11b

11c

**11**d

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12a

12b

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14a

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Form 990 (2015)

Form	n 990 (2015)			Page <b>3</b>
Par	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
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	9	Yes	

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 😏 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII,

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 💆 . . . . . . . . . . . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of

ıts total assets reported ın Part X, line 16? If "Yes," complete Schedule D, Part VIII 💆 . . . . . . . . . . . d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that

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 🥦

**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 . . . . . . . . . . . . 🔧 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? ...

**20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . 🔀

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

negotiation services? If "Yes," complete Schedule D, Part IV 🛸 .

VIII, IX, or X as applicable

If "Yes," complete Schedule D, Part X 🛸

Page 4

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21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		
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), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

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 . . . . . . . . . . 💆 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

**b** If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 🔧 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛂 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

instructions for applicable filing thresholds, conditions, and exceptions)

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Form 990 (2015)

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	990 (2015)			Page \$			
Pai				_			
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	·   No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   106		res	NO			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b  0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable						
	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?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes				
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority						
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No			
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No			
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?						
_		5c 6a		No			
	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?						
b	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					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f					
_	required?	<b>7</b> g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time						
	during the year?	8					
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter  Institute on face and control control control and add on Part VIII. Inc. 12						
	Initiation fees and capital contributions included on Part VIII, line 12 10a  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club  10b						
U	facilities	I I		l			
11	Section 501(c)(12) organizations. Enter						
а	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the						
13	year  Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a					
b	Enter the amount of reserves the organization is required to maintain by the states						
_	in which the organization is incensed to issue qualified neutrit plans						
	Did the organization receive any payments for indoor tanning services during the tax year?	   14a		l I No			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		110			
	,			1			

independent

year by the following The governing body? . .

Section C. Disclosure

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Form 990 (2015)

0 (2015)	
Governance, Management, and Disclosure	

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

Check if Schedule O contains a response or note to any line in this Part VI				<u></u>		🗸
ction A. Governing Body and Management						
					Yes	No
Enter the number of voting members of the governing body at the end of the tax year	1a			6		
If there are material differences in voting rights among members of the governing						l

1h

Section A. Governing Body and Management						
					Yes	ı
<b>1a</b> Enter the number of voting members of the govern year	ing body at the end of the tax	1a	6			
If there are material differences in voting rights ar body, or if the governing body delegated broad aut or similar committee, explain in Schedule O						

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 

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? Did the organization make any significant changes to its governing documents since the prior Form 990 was

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

**b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

**12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . .

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

the form?

**b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

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?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

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)

State the name, address, and telephone number of the person who possesses the organization's books and records

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

**b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . .

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . . . . . . . .

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

Did the organization become aware during the year of a significant diversion of the organization's assets?

Did the organization have members or stockholders? . . . . . . . . .

**10a** Did the organization have local chapters, branches, or affiliates? . . . . .

**b** Describe in Schedule O the process, if any, used by the organization to review this Form 990

Did the organization have a written document retention and destruction policy? . . . . .

a The organization's CEO, Executive Director, or top management official . . . . .

f b Other officers or key employees of the organization  $\ldots \ldots \ldots \ldots$ 

List the States with which a copy of this Form 990 is required to be filed▶

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

▶The Organization 803 7th Street NW No 300 Washington, DC 20001 (202) 326-5593

**b** Enter the number of voting members included in line 1a, above, who are

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

- 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 orga	nization nor any	related	l orga	nıza	tion	comp	ensa	ted any current offi	cer, director, or trus	stee
(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion ( han ( on is	one b both	oox, an d	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)		organization and related organizations
See Additional Data Table										
						-				
						_				
										Form <b>990</b> (2015)

201 Deerwood Glen Drive Deer Park, TX 77536

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 for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
		Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated emptovies	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total				•		•				
d Total (add lines 1b and 1c) .				<u>.</u>	٠.	•		5,279,924	0	721,049

\$100,000 of reportable compensation from the organization ▶ 33

Total number of individuals (including but not limited to those listed above) who received more than

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . 3 Νo 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 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person . . . . . 5 Νo

Section B. Independent Contractors									
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.									
(A) Name and business address	(B) Description of services	(C) Compensation							
ATK Launch Systems	Technical Consulting	1,400,000							
5995 Opus Parkway Suite 300 Minnetonka, MN 55343									
Hogan Lovells	Legal 990,14								
555 13th Street NW Washington, DC 200041109									
Connections Media	Advertising & Web Services	773,482							
1728 14th Street NW 4th Floor Washington, DC 20009									
Home Front Communications LLC	Advertising	617,446							
1121 14th Street NW Washington, DC 20005									
Saybolt LP	Research Services	440,130							

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 26

Yes

No

Form 99			<u> </u>					Page
Part V		Statement o	i <b>r Revenue</b> ule O contains a respo	nse or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated cam	paigns 1a					
	ь	Membership du	es <b>1</b> b	1,022,103				
ے <u>ب</u>	С	Fundraising eve	ents <b>1</b> 0	:				
ifts lar A	d	Related organiz	ations 1d					
s, G imil	е	Government grants	s (contributions) <b>1e</b>					
ion r Si	f		ons, gifts, grants, and <b>1f</b>					
ibut	g	sımılar amounts no Noncash contributi	or included above					
<u>a</u> = 0	9	1a-1f \$			4 000 400			
Cont	h	Total. Add lines	s 1a-1f		1,022,103			
<del>1</del>				Business Code				
Ven	2a b	Membership Dues Non-member-Acce	use ELIS Database	900099	27,527,602	27,527,602		
Program Service Revenue	C	Non-member-Fuel		900099	512,550 88,000	512,550 88,000		
Ž.	d	-	Survey Suies	300093	55,000	00,000		
<i>3</i> 5 =	e							
gran	f	All other progra	am service revenue					
Æ	g	Total. Add lines	s 2a-2f	>	28,128,152			
	3	Investment inc	ome (ıncludıng dıvıder	nds, interest,			2 (02	425.45
	4		ar amounts) stment of tax-exempt bond	-	428,055		2,602	425,45
	5			proceeds -				
		,	(ı) Real	(II) Personal				
	6a	Gross rents	270,270					
	b	Less rental	270,270					
	c	expenses Rental income	0					
	d	or (loss) Net rental inco	me or (loss)					
		True remaining	(i) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	3,898,605					
	ь	Less cost or other basis and	3,824,252					
	c	sales expenses Gain or (loss)	74,353					
	d	Net gain or (los			74,353			74,35
Other Revenue	8a	events (not inc						
č T		See Part IV, lin	ne 18 <b>a</b>					
ŧ	b	Less direct ex	penses b					
0	С		(loss) from fundraising	events >				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 <b>a</b>					
	b c	Less direct ex Net income or (	penses <b>b</b> (loss) from gamıng act					
	10a	Gross sales of returns and allo	owances .					
	ь	Less costofa	a oods sold b					
	c	_	(loss) from sales of inv	entory >				
		Miscellaneous	· · · · · · · · · · · · · · · · · · ·	Business Code				
	11a	Other		900099	8,463	8,463		
	ь							
	С							
	d	All other reven						
	е	Total. Add lines		•	8,463			
	12	Total revenue.	See Instructions .	· · · · •	29,661,126	28,136,615	2,602	499,80

Form	990 (2015)				Page <b>10</b>
Part	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	itions must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in t	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 domestic organizations and domestic governments See Part IV, line 21	659,791			·
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	4,727,152			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	4,733,100			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	473,257			
9	Other employee benefits	745,529			
10	Payroll taxes	436,678			
11	Fees for services (non-employees)	+30,070			
a	Management				
b	Legal	1,691,592			
c		138,452			
d	Accounting				
	Preference of fundrations converse. See Part IV. June 17	3,854,838			
e	Professional fundraising services See Part IV, line 17	100.047			
f	Investment management fees	100,847			
g 12	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,953,855			
	· .	1,067,459			
13	Office expenses	1,254,095			
14	Information technology	346,583			
15	Royalties				
16	Occupancy	1,598,825			
17	Travel	638,046			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,064,370			
20	Interest	17,668			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	463,531			
23	Insurance	70,803			
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	Organization Dues	583,684			
b	Taxes	184,720			
c	Miscellaneous	26,022			
d	Staff Professional Dues	8,914			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	28,839,811			
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)				

(B) End of year

5,297,261

1,209,609

858,483

3,971,313

12,144,876

1,318,781

15.875

24,816,198

3,480,710

1,482,006

60,486

89,365

3,423,118

8,535,685

15,678,217

16,280,513

24,816,198 Form **990** (2015)

602,296

Form 9	990 (	2015)		
Par	t X	Balance Sheet		
		Check if Schedule O contains a response or note to any line in this Part $X$		
			(A) Beginning of year	
	1	Cash-non-interest-bearing	2,640,165	1
	2	Savings and temporary cash investments		2
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	1,971,412	4
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5
188	7	Notes and loans receivable, net		7
~	8	Inventories for sale or use		8
	9	Prepaid expenses and deferred charges	516,133	9

5,341,519

1,370,206

4,286,483

13, 195, 180

1,316,030

16,685

23,942,088

4,371,399

187,810

121,559

3,308,007

7,988,775

15,613,119

15,953,313

23,942,088

340,194

0 19

**10**c

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32

33

34

**10**a

10b

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . . . . . . .

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Complete Part VI of Schedule D

Intangible assets .

Grants payable

Deferred revenue

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets

Less accumulated depreciation

Other assets See Part IV, line 11

Investments—publicly traded securities

Accounts payable and accrued expenses

# Asset

10a

b

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

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31

32

33

34

Net Assets or Fund Balances

Net unrealized gains (losses) on investments .

Part XII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

1 Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☐ Other

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

If the organization changed its method of accounting from a prior year or checked "Other," explain in

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Both consolidated and separate basis

Both consolidated and separate basis

Donated services and use of facilities .

Investment expenses

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Prior period adjustments .

Revenue less expenses Subtract line 2 from line 1 . . . . Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . .

3 821,315 4 15,953,313 5 -494,115

1

2

10

Page **12** 

29,661,126

28,839,811

16,280,513

Yes

Yes

Yes

2a

2b

2c

3a

3b

▽

No

Νo

Νo

Form 990 (2015)

6 7 8 9 Software ID: Software Version:

**EIN:** 52-2143968

Name: Alliance of Automobile Manufacturers

Inc

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t	han erso cer tor/t	not one n is and rust	tee)	an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations	
Michael Hom Chair	2 00	x		×				0	0	o	
Ziad Ojakli	2 00										
Vice-Chair		Х		×				0	0	o	
Dan Turton	2 00			Ī.,					_	_	
Secretary		X		×				0	0	٥	
Anna-Maria Schneider	2 00	х		х				0	0	0	
Treasurer	2 00			_							
James E Lentz Director	2 00	x						0	0	o	
David Geanacopoulos	2 00										
Director		Х						0	0	0	
Curtis Magleby Director	2 00	х						0	0	0	
Stephen Ciccone Director	2 00	х						0	0	0	
	40 00										
Roger Shane Karr  VP Gov't & Int'l Affairs/ Director		x		×				368,417	0	28,629	
Kım Pittel	2 00										
Director		X						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C)

Average

Name and Title

Director

Director

William Craven

Mitch Bainwol

John Whatley

President & CEO

EVP & General Counsel

Name and Title	hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	one n is and			compensation from the organization (W- 2/1099-	compensation from related organizations (W- 2/1099-	amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Tom Stricker Director	2 00	×						0	0	
Jody Trapasso Director	2 00	×						0	0	
Stephen Cannon Director	2 00	×						0	0	
Bryan Roosa Director	2 00	×						0	0	
Jake Jones Director	2 00	×						0	0	
Nancy Bell Director	2 00	×						0	0	
Victoria Emerson Barnes	2 00							0	0	

2 00

40 00

40 00

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(D)

Reportable

1,508,131

422,693

Position (do not check

(E)

Reportable

(F)

Estimated

69,09

72,04

0

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

Compensated Employees, and Inde	pendent Co	ntrac	Jtor	5				1	1	
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	nore tl	than erso icer	o not n one on is and		,	(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
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			organization and related organizations
Glona Bergquist VP Communications	40 00			x				332,253	0	60,36
Robert Strassburger  VP Safety & Harmonization	40 00			х				323,167	0	60,83
Julie Becker VP Environment	40 00			x				322,224	0	58,66
Judith Mulcahy  VP of Operations and Finance	40 00			x				313,820	0	72,98
Landon Fulmer VP, State Affairs	40 00			x				287,760	0	47,56
Jonathan Weinberger	40 00									

40 00

40 00

40 00

40 00

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VP, Technology, Innovation & Policy

EVP, Federal Govt & Public Relations

Director Policy & Government Affairs, CA

VP, Gov't & International Affairs

Assistant General Counsel

David Schwietert

Jennifer Thomas

Susan Conti

Curtis Augustine

1,44

34,91

56,61

38,05

0

0

0

95,903

17,577

228,661

226,544

216,814

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

Sr Dir Safety & Regulatory Affairs

Director Automotive Fuels

Valene Ughetta

(A)	(B)	(c)				(D)	(E)	(F)		
Name and Title	Average	Pos	unless person is both an officer and a			k	Reportable	Reportable	Estimated	
	hours per	m					compensation	compensation	amount of	
	week (list	unle				an	from the	from related	other	
	any hours						organization	organizations	compensation	
	for related	0					(W- 2/1099-	(W- 2/1099-	from the	
	organizations	0 -			<b>x</b>	to T	_	MISC)	MISC)	organization
	below	er d	=	≆	3	急雹	호"			and related
	dotted line)	individual trustee or director	Institutional Trust	Officer	employee	Highest compensa employee	Former			organizations
_		4.	î,			sated				
Steven Douglas	40 00									
Sr Director Environmental Affairs						X		211,513	0	27,13
Scott Schmidt	40 00									

40 00

53,02

39,68

0

203,215

201,232

**SCHEDULE C** 

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

OMB No 1545-0047

DLN: 93493316045206

Open to Public Inspection

Treasury Internal Revenue Service

Department of the

(Form 990 or

990-EZ)

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, 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" on 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then

ne ooc (1 loxy lax) (see separate instructions), then	
• Section 501(c)(4), (5), or (6) organizations Complete Part III	
	Employer identification number
Alliance of Automobile Manufacturers	

52-2143968

Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV 1

- 2 Political expenditures
- 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
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
  - - Was a correction made?
- If "Yes," describe in Part IV
- 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

3

- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt function activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?

- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing
- organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the

- amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a
- separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

- (a) Name (b) Address

See Additional Data Table

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

(c) EIN

filing organization's

funds If none, enter -

0 -

- Cat No 50084S

(d) A mount paid from (e) A mount of

✓ Yes

☐ Yes

political contributions

received and

promptly and directly delivered to a separate political organization If none, enter -0-

☐ No

389,250

#### under section 501(h)). Check 🕨 🗔 If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

3	Check ▶ If the filing organization checked box A and "limited control" provisions apply		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b)		

Other exempt purpose expenditures

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:

Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Calendar year (or fiscal year

beginning in)

Not over \$500,000

Over \$17,000,000

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

Total lobbying expenditures

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

Grassroots nontaxable amount

Grassroots lobbying expenditures

Lobbying ceiling amount (150% of line 2a, column(e))

2a

20% of the amount on line 1e

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

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

**(b)**2013

(a)2012

Yes

(c)2014

☐ No

(d)2015

Schedule C (Form 990 or 990-EZ) 2015

(e) Total

Current year

Yes

No

Νo

7,384,615

senedare e (i i	31111 330 01 330 EZ/2013
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT
	filed Form E769 (election under section E01/h))

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Were substantially all (90% or more) dues received nondeductible by members?

c If "Yes," enter the amount of any tax incurred by organization managers under section 4912

**b** If "Yes," enter the amount of any tax incurred under section 4912

	mea roim 5755 (election under section 502(n/))				
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	3)	(b)	_
activ			No	A mount	
		Yes			
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				_
i	Total Add lines 1c through 1i				_

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

	501(c)(6) and if either (a) ROTH Part III-A lines 1 and 2 are answered "No" OR	h) Pai	rt TTT.	- Δ			
Par	t III-B Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)(5)$						
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?						
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?						

# line 3, is answered "Yes."

#### Dues, assessments and similar amounts from members 1 28,549,705 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

b	Carryover from last year	2b	
c	Total	2c	7,384,615
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	7,634,953

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-250,338
P	art IV Supplemental Information		

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and ee instructions), and Part II-B. line 1. Also, complete this part for any additional information

2 (see instructions), and Part II-B, IIII	e 1 Also, complete this part for any additional information
Return Reference	Explanation
•	Alliance of Automobile Manufacturers provided direct and indirect political support to 527 organizations
political organizations	Committee to Elect Bobby Zirkin 1,000 Friends of Mike Busch 1,000 Marylanders for Miller 1,000 Friends of Dan Stein 750 Citizens for Bob Cassilly 500 Committee to Elect Harold Jones II 500 Committee to Re-Elect Gantt 500 Committee to Re-Elect Joseph Morelle 500 Dilan for Senate 500 Friends of Kathy Klausmeier 500 Friends of Scott Garrett 500 Friends of Steve Gooch 500 Friends of Victor Ramirez 500 Michael Williams Campaign 500 Powell for Representative 500 Citizens to Elect

Hatchett for House 250 Williamson for Walton 250 Total 11,500

Wayne Norman 250 Dance for Senator 250 Friends for Dave McDonough 250 Friends of Anthony O'Donnell 250 Friends of Bob Flanagan 250 Friends of Clarence Lam 250 Friends of Jay Jacobs 250

2a

Software ID: Software Version:

**EIN:** 52-2143968

Name: Alliance of Automobile Manufacturers Inc

#### Form 990, Schedule C, Part 1-C, Line 5

(a)Name	(b)A ddress	(c) EIN	(d)	(e)
• •			A mount paid from filing organization's funds If none, enter -0-	A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
Alliance of Automobile Manufacturers CA PAC	555 Capitol Mall Suite 1425 Sacramento, CA 95814	262335858	7000	63000
Republican Governors Association	1747 Pennsylvania Avenue NW Washington, DC 20006	113655877	175000	0
Republican State Leadership Committee Inc	1201 F Street NW 675 Washington, DC 20004	050532524	60000	0
Democratic Legislative Campaign Committee	1401 K Street NW Washington, DC 20005	521870839	37500	0
Innovate Florida	610 S Boulevard Tampa,FL 33606	463472497	10000	0
Protect Flonda Families	5730 Corporate Way Suite 214 West Palm Beach,FL 33407	473966488	10000	0
Treasure Coast Alliance	5730 Corporate Way Suite 214 West Palm Beach, FL 33407	463511953	10000	0
Common Good Virginia	1710 E Franklin St 3rd Floor Richmond, VA 23223	465033171	5000	0
House Majority 2016 Republican Party of Flonda	420 E Jefferson Street Tallahassee, FL 32301	590683241	5000	0
Mike Pence for Indiana	101 W Ohio St Suite 1180 Indianapolis, IN 46206	800719483	5000	0
Flonda Democratic Party	214 S Bronough St Tallahassee, FL 32301	590772902	2500	0
Flonda Republican Senatonal Campaign Committee	2640-A Mitcham Drive Tallahassee,FL 32308	472058962	2500	0
Fnends of Ron Villanueva	PO Box 61005 Virginia Beach, VA 23466	204181075	2500	0
Friends of Steve Newman for Senate	PO Box 480 Forest, VA 24551	541998270	2500	0
Howell for Delegate	PO Box 8296 Fredericksburg, VA 22404	912063491	2000	0
Fnends of Tommy Norment	PO Box 6205 Williamsburg, VA 23188	541998194	1500	0
Saslaw for State Senate	PO Box 1856 Springfield, VA 22151	541414651	1500	0
Barve For Maryland	1688 E Gude Drive Suite 202 Rockville, MD 20850	521659731	1000	0
Carrico for Senate	PO Box 1100 Galax, VA 24333	452492919	1000	0
Casey Cagle for Lt Governor	PO Box 12137 Atlanta,GA 30355	202615729	1000	0
Deeds for State Senate	PO Box 5462 Charlottesville, VA 22905	900020416	1000	0
Eileen Filler-Com	PO Box 523082 Springfield, VA 22152	271694500	1000	0
Favola for State Senate	2319 18th Street North Arlington, VA 22201	275414799	1000	0
Friends of Kenny Alexander	120 West Berkley Ave Norfolk, VA 23523	043699080	1000	0
Friends of Kirk Cox	PO Box 1205 Colonial Heights, VA 23834	541998091	1000	0
Friends of Lee Ware	PO Box 689 Powhatan, VA 23139	541884491	1000	0
Friends of Pam Beidle	PO Box 397 Linthicum, MD 21090	522076022	1000	0
Friends of Rich Anderson	PO Box 7926 Woodbridge, VA 22195	264374961	1000	0
Friends of Tim Hugo	PO Box 893 Centreville, VA 20122	510420767	1000	0
Jeff Brandes for State Senate	610 South Boulevard Tampa,FL 33606	455394887	1000	0

# Form 990, Schedule C, Part 1-C, Line 5

	1 43344		1	
(a)Name	<b>(b)</b> A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
Liberty Flonda	610 South Boulevard Tampa,FL 33606	463370714	1000	0
McDougle for Virginia	PO Box 187 Mechanicsville,VA 23111	203018088	1000	0
Ralston for Representative Committee	PO Box 1196 Blue Ridge, GA 30513	272894066	1000	0
Senate Republican Campaign Committee	PO Box 7229 Albany, NY 12224	141753654	1000	0
Toscano for Delegate	211 E High St Charlottesville, VA 22902	134313090	1000	0
Wagner for Senate	PO Box 68008 Virginia Beach,VA 23471	541997863	1000	0
Wexton for State Senate	20 W Market St Leesburg, VA 20176	464129288	1000	0
David Shafer Senate Committee	PO Box 880 Duluth, GA 30096	453761564	750	0
Republican Assembly Campaign Committee	315 State Street Albany, NY 12210	141713936	750	0
Rick Jeffares for Senate	1300 Keys Ferry Ct McDonough, GA 30253	272598533	750	0
Albers for Senate	530 Junction PO int Roswell, GA 30075	273508191	500	0
Beach for Senate Inc	3100 Brierfield Road Alpharetta, GA 30004	264736344	500	0
Bethel for Georgia Senate	1701 Briarcliff Circle Dalton, GA 30720	272247376	500	0
Carr for Virginia	PO Box 406 Richmond, VA 23218	264556434	500	0
Christian Coomer Campaign	127 A West Main Street Cartersville, GA 30120	272473032	500	0
Citizens for Joseph Robach	PO Box 26409 Rochester, NY 14626	352169255	500	0
Committee to Elect Jeff Mullis Ga State Senate	212 English Ave Chickamauga,GA 30707	912064475	500	0
Committee to Elect Tom Rice	11213 Brookhaven Club Drive Johns Creek, GA 30097	352174509	500	0
Cowsert for Senate	PO Box 512 Athens, GA 30603	463943213	500	0
Dave LaRock for Delegate	PO Box 6 Hamilton, VA 20159	900939170	500	0
Democratic Assembly Campaign Committee	107 Washington Ave Albany, NY 12210	133041656	500	0
Friends of Andrea Stewart- Cousins	1461 First Avenue 302 New York, NY 10075	731706257	500	0
Friends of Bill DeSteph	588 Central Drive Virginia Beach, VA 23454	461931477	500	0
Friends of Chris Jones	PO Box 5059 Suffolk, VA 23435	912063051	500	0
Friends of Chris Peace	PO Box 819 Mechanicsville, VA 23111	204045892	500	0
Friends of David Yancey	PO Box 1163 Newport News, VA 23601	453023884	500	0
Friends of Elena Parent Inc	774 Springdale Road NE Georgia, GA 30901	270501017	500	0
Friends of Greg Habeeb	PO Box 882 Salem, VA 24153	273957008	500	0
Friends of Kathy Szeliga	PO Box 40 Kingsville,MD 21087	270292866	500	0
Friends of Stacey Y Abrams Inc	3106 Woodlands Dr Smyrna,GA 30080	203691682	500	0

#### Form 990, Schedule C, Part 1-C, Line 5

(b)Address

(a)Name

Mike Cheokas Campaign Committee

William Ligon Campaign Committee

Vanous- Part I-C- Continuation listing

Watson for Senate

below

400 Tripp Street

PO Box 2486

Various

Americus, GA 31709

Savanah, GA 31402

1309 Gloucester Street

Brunswick, GA 31520

Washington, DC 20001

				organization If none, enter -0-
Henson for Senate	2643 Sterling Acres Drive Tucker, GA 30084	731646963	500	0
Kilgore for Delegate	PO Box 669 Gate City, VA 24251	541998428	500	0
LeMunyon for Delegate	3296 Willow Glen Drive Oak Hill, VA 20171	262196998	500	0
Marsden for Senate	PO Box 10889 Burke,VA 22009	271338500	500	0
Mike Dugan Reelection Campaign	106 Champion Drive Carrollton, GA 30116	300748649	500	0
Minchew for Delegate	PO BOX 385 Leesburg,VA 20178	800784281	500	0
Terry Austin For Delegate	PO Box 400 Buchanan, VA 24066	462463359	500	0
Al Williams Reelection Campaign	9041 East Oglethorpe Hwy Midway,GA 31320	252742384	250	0
Boysko for Delegate	940 Locust St Herndon, VA 20170	460894680	250	0
Burt Jones Reelection Campaign	PO Box 767 Jackson,GA 30233	461218756	250	0
Committee to Elect Bubber Epps	PO Box 236 Dry Branch, GA 31020	383784971	250	0
Committee to Elect Matt Ramsey	900 Westpark Drive Suite 210 Peachtree City, GA 30269	261378077	250	0
Fnends of Brett Harrell	PO Box 1135 Snellville,GA 30078	800729328	250	0
Hunter Hill for State Senate	2451 Cumberland Pkwy Suite 3439 Atlanta,GA 30339	261737552	250	0
	<u>'</u>			

201149575

462707449

270935921

000000000

250

250

250

11500

0

0

0

0

(c) EIN

(d)

Amount paid from filing

organization's funds If

none, enter -0-

(e)

Amount of political

contributions received

and promptly and directly delivered to a separate political

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE D** 

(Form 990)

Department of the

Supplemental Financial Statements

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

OMB No 1545-0047

DLN: 93493316045206

Interr	oury nal Revenue Service		(Form 990) and its instructions is at <u>www.ir</u> s	s.gov/fo	<u>rm990</u> .	Inspection
<b>Na</b> Allia	me of the organiance of Automobile I	ization		Emplo	yer identifi	cation number
Inc		inations Maintaining Bones	Advised Funds on Other Circles F		143968	
10			· <b>Advised Funds or Other Similar F</b> ed "Yes" on Form 990, Part IV, line 6.	unas o	r Accoun	ts.
		<u> </u>	(a) Donor advised funds	(b)F	unds and of	ther accounts
1	Total numbe	er at end of year				
2	Aggregate v year)	value of contributions to (during				
3	Aggregate v	value of grants from (during year)				
4	Aggregate v	value at end of year				
5			advisors in writing that the assets held in dor the organization's exclusive legal control?	or advis	ed	☐ Yes ☐ N
6	used only for c		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		purpose	┌ Yes
Pa	rt III Conse	rvation Easements. Comple	ete if the organization answered "Yes" o	n Form	990, Part	IV, line 7.
1	Purpose(s) of	conservation easements held by th	e organization (check all that apply)			
	Preservati education)	ion of land for public use (e g , recr	eation or Preservation of a	n histori	cally import	ant land area
	Protection	n of natural habitat	Preservation of a	certified	historic str	ructure
	Preservati	ion of open space				
2		s 2a through 2d if the organization he last day of the tax year	held a qualified conservation contribution in t	he form	of a conserv	/ation
					Held at t	he End of the Year
а	Total number o	of conservation easements		2a		
b	3	restricted by conservation easeme		2b		
c		servation easements on a certified	` '	<b>2</b> c		
d		servation easements included in (o ure listed in the National Register	c) acquired after 8/17/06, and not on a	2d		
3	Number of con	servation easements modified, tra	nsferred, released, extinguished, or terminate	ed by the	organizatio	n during the
	tax year ▶					
4	Number of stat	tes where property subject to cons	ervation easement is located <b>&gt;</b>			
5		nization have a written policy regar I enforcement of the conservation o	ding the periodic monitoring, inspection, hand	dling of	Г	Yes No
6	Staff and volun	nteer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing conse	ervation eas	ements during the
	▶					
7	A mount of exp  ▶ \$	enses incurred in monitoring, inspe	ecting, handling of violations, and enforcing c	onservat	ion easeme	nts during the year

(B)(I) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

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

service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

Cat No 52283D

**▶** \$ \_\_

Sched	dule D (Form 990) 2015							Page <b>2</b>
Part	Organizations Maintaining (continued)	Collections of Ar	, Hi	storio	cal Tre	asures, or C	Other Similar A	ssets
3	Using the organization's acquisition, acc collection items (check all that apply)	ession, and other recor	ds,c	heck a	n <b>y</b> of the	e following that	are a significant us	e of its
а	Public exhibition		d		Loan or	r exchange prog	jrams	
b	Scholarly research		e	Γ	Other			
c	Preservation for future generations							
4	Provide a description of the organization Part XIII	's collections and expla	ın ho	w they	further t	the organization	n's exempt purpose	ın
5	During the year, did the organization soli assets to be sold to raise funds rather th							s No
Pari	Escrow and Custodial Arra Complete if the organization a Part X, line 21.	_	orm	990,	Part IV,	, line 9, or re	oorted an amour	t on Form 990,
<b>1</b> a	Is the organization an agent, trustee, cus included on Form 990, Part X?	stodian or other intermo	ediar	y for co	ontributio	ons or other ass	ets not <b>Ye</b> :	s <b>▽</b> No
b	If "Yes," explain the arrangement in P	art XIII and complete	he fo	llowing	j table		Am	ount
c	Beginning balance					<b>1</b> c		
d	Additions during the year					<b>1</b> d		
e	Distributions during the year					<b>1</b> e		
f	Ending balance					<b>1</b> f		
<b>2</b> a	Did the organization include an amount o	n Form 990, Part X, lin	e 21	, for es	crow or o	custodial accou	nt liability? 🔽 Yes	s No
b	If "Yes," explain the arrangement in Part	XIII Check here if the	exp	lanatıo	n has be	en provided in	Part XIII	🗹
Par	t V Endowment Funds. Comple	<del></del>						
		(a)Current year	<b>(b)</b> P	rior year	b (c	Two years back	(d)Three years back	(e)Four years back
1a 	Beginning of year balance							
b	Contributions							
c	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the	current vear end balan	e (lı	ne 1a.	column (	(a)) held as		
а	Board designated or quasi-endowment ▶	,	(	5,	,	(,,		
ь	Permanent endowment ▶							
c	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	should equal 100%						
	Are there endowment funds not in the poorganization by		atıon	that a	re held a	nd administere	d for the	Yes No
	(i) unrelated organizations							(i)
	(ii) related organizations					•	<del></del>	(ii)
	If "Yes" on 3a(II), are the related organized Describe in Part XIII the intended uses	·					3	Bb
Pari			dowi	nent iu	iius			
	Complete if the organization a		rṃ 🤉					
	Description of property				a) ther basis tment)	(b) Cost or other ba (other)	Accumulated (c)depreciation	(d)Book value
<b>1</b> a L	and		. [					
<b>b</b> E	Buildings		.[					
<b>c</b> L	_easehold improvements					3,441,4	33 555,54	7 2,885,886

**d** Equipment . . .

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

1,085,427

3,971,313

814,659

1,900,086

Schedule D (Form 990) 2015  Part VIII Investments—Other Securities. Com	nplete if the ord	anization a	answered 'Ye	s' on For	Page m 990. Part IV. line 11b
See Form 990, Part X, line 12.	TPICE II THE OIL				
(a) Description of security or category (including name of security)		( <b>D)</b> Boo	ok value		Method of valuation r end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests					
(3)O ther (A) Limited Partnership Interests			1,047,531		F
(B) Structured Notes			271,250		Г
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related.	•		1,318,781		
Complete if the organization answered	'Yes' on Form S				
(a) Description of investment		<b>(b)</b> Bo	ok value		) Method of valuation r end-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 (a) Description		on Form 990	, Part IV , line	11d See F	orm 990, Part X, line 15 (b) Book value
(a) besettly	peron				(B) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line 15	<i>5</i> )			•	
Part X Other Liabilities. Complete if the organ See Form 990, Part X, line 25.	nızatıon answe	red 'Yes' oı	n Form 990, I	Part IV, I	ine 11e or 11f.
1. (a) Description of liability	(b) Book va	lue			
Federal income taxes					
Deferred Rent Credits	3.36	2,161			
Tenant Security Deposit		0,957			
Tenant Security Deposit	0	0,937			

3,423,118

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )

1 2

а

b

c

d

е

b

5

1 2

а

b

c

d

е

а b

c

Part XIII

information

Part IV, Line 2b

Return Reference

3

3

Schedule D (Form 990) 2015

Page 4

29,427,922

-132,357

29,560,279

Net unrealized gains (losses) on investments . . . . Recoveries of prior year grants . . . . . . Other (Describe in Part XIII)

Add lines 2a through 2d . . . . . . . Subtract line 2e from line 1 . . . . .

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Investment expenses not included on Form 990, Part VIII, line 7b.

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) . . . . . . Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 

Amounts included on line 1 but not on Form 990, Part IX, line 25

Add lines **2a** through **2d** . . . . . . . . . . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Supplemental Information

Total revenue, gains, and other support per audited financial statements . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

December 31, 2015 and 2014, respectively

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

2a

2с

4a

4b

The Alliance receives funds from its members on behalf of the Automotive Coalition for Traffic Safety (ACTS), a related party for financial reporting purposes of the Alliance These funds related to ACTS's new Advanced Alcohol Detection Technologies grant with the National Highway Traffic Safety Administration (NHTSA), which began on September 30, 2013 and requires ACTS to have matching contributions for the amounts granted The funds held for ACTS were \$60,486 and \$187,810 as of

2a

2b

2c

2d

4a

4b

100,847

328,990

100,847

-494,115

361,758

4c 5

2e

3

4c

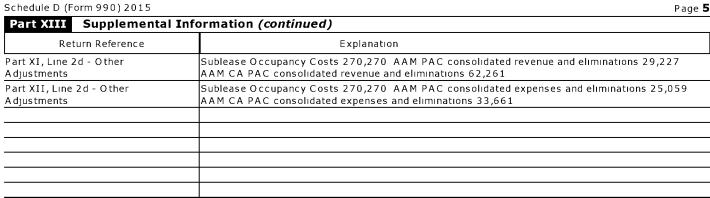
2e

3

100,847 29,661,126 29,067,954

> 328,990 28.738.964 100,847 28,839,811

Schedule D (Form 990) 2015



efile GRAPHIC print - DO NO	OT PROCESS	As Filed Da	ta -	DLN	: 93493316045206
SCHEDULE F St:	atement of <i>l</i>	Activities (	Outside the Unit	ed States	OMB No 1545-0047
(FOIII 990)	► Complete i	f the organizatio	n answered "Yes" to Form	990,	2015
		•	14b, 15, or 16.		2013
Department of the Treasury Internal Revenue Service  ► Information	atıon about Schedu		o Form 990. nd its instructions is at w	ww.irs.gov/form990.	Open to Public Inspection
Name of the organization Alliance of Automobile Manufacture	rs			Employer ide	ntification number
Inc	13			52-2143968	3
Part I General Informati Complete if the organization			he United States. orm 990, Part IV, line	14b.	
1 For grantmakers. Does the	e organization m	naıntaın record	s to substantiate the	amount of its grants	
and other assistance, the o	-	ity for the grar	nts or assistance, and	the selection criteria	
used to award the grants o	r assistance?				Yes No
For grantmakers. Describe assistance outside the Unit		ganızatıon's p	rocedures for monitori	ng the use of its gra	nts and other
3 Activites per Region (The foll	owing Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed )	
(a) Region	<b>(b)</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 program service, describe specific type of service(s) in region	
(1) See Add'l Data			,		
( 2)					
(3)					
( 4)					
( 5)					
<b>3a</b> Sub-total	0	0			22,003
<b>b</b> Total from continuation sheet to Part I	s 0	0			2,753
c Totals (add lines 3a and 3b)  For Paperwork Reduction Act Notice, s	0			No 50082W <b>Sch</b> e	24,756 edule F (Form 990) 2015

Schedule F (Form 990) 2015

Page 2

1	(a) Name of	
	addıtıonal	s
	Complete	ш

orga





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Ī	3)	
(	4)	
2		E
		ta

(1)

•	if the organiz space is need	ation answered "Ye: led.	s" to Form 990, Par	t IV, line 15, for an	y recipient who rece	eived more than \$5,	.000. Part II can be	duplicated if
lame of nization	(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 o valuation (book, FMV, appraisal, othe

total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  $\ldots$   $\ldots$   $\blacktriangleright$ 

Schedule F (Form 990) 2015

Part III can be duplicated if additional space is needed.							
(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)

Part III	can	be
(a) Type of grant	or	
assistance		

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Sch	edule F (Form 990) 2015			Рa	ge <b>4</b>
Pa	rt 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)	Г	Yes	<b>√</b>	No
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, do not file with Form 990)	Г	Yes	✓	No
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	✓	No
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	<b>√</b>	No
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	<b>√</b>	No
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, do not file with Form 990)

Yes

Schedule F (Form 990) 2015

Page 5

Schedule F (Form 990) 2015

Return Reference	Explanation
Part I, line 3	AAM's foreign expenditures were travel costs for AAM employees to travel to foreign countrules to attend a meeting or speak on behalf of the Alliance Expenses were captured through
	employee expense reports

#### **Additional Data**

Australia, Brunei, Burma,

Cambodia,

Software ID:

Software Version:

**EIN:** 52-2143968

Name: Alliance of Automobile Manufacturers

Inc

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
East Asia and the Pacific - Australia, Brunei, Burma,	0	0	Program Services	China Forum	2,130

			grants to recipients located in the region)	(s) in region	
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	Program Services	China Forum	2,130
East Asıa and the Pacıfıc -	0	0	Program Services	OICA General Assembly	10,063

			located in the region)		
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	Program Services	China Forum	2,130
East Asia and the Pacific - Australia, Brunei, Burma,	0	0	Program Services	OICA General Assembly	10,063

Cambodia,					
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	Program Services	OICA General Assembly	10,063
East Asia and the Pacific -	0	0	Program Services	CFEE Study	384

Cambodia,					
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	Program Services	OICA General Assembly	10,
East Asia and the Pacific -	0	0	Program Services	CFEE Study	

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services, grants to recipients (s) in region located in the region) East Asia and the Pacific -Program Services Electric Vehicle Safety 799 3,394

Program Services

lElectric Vehicle Safety

lmeetina

1.141

Cambodia,				meeting	
Europe (Including Iceland & Greenland)	0	0	Program Services	TTIP meeting	

Form 990 Schedule F Part I - Activities Outside The United States

Europe (Including Iceland &

Greenland)

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services, grants to recipients (s) in region located in the region) Europe (Including Iceland & Program Services Electric Vehicle Safety 2,667 Greenland) lmeetina Europe (Including Iceland & Program Services lElectric Vehicle Safety 1,425 Greenland) meeting

IProgram Services

Senate President Forum

2.753

Form 990 Schedule F Part I - Activities Outside The United States

Europe (Including Iceland &

Greenland)

efile GRAPHIC pr	int - DO NOT	PROCESS As	Filed Data -				DLN: 9	93493316045206
Schedule I (Form 990)  Department of the Treasury Internal Revenue Service		Gra GoV Complet ▶ Information	OMB No 1545-0047  2015  Open to Public Inspection					
Name of the organization							Employer identificati	on number
Alliance of Automobile Inc	Manufacturers						52-2143968	
Part I Genera	l Informatio	n on Grants and	l Assistance					
the selection cri  Describe in Part  Part II Grants an	teria used to aw IV the organiza id Other Assista	rard the grants or assistion's procedures fo nce to Domestic Org	sistance? or monitoring the use ganizations and Dome	of grant funds in the Un			orm 990, Part IV, line 2	<b>√ Yes N</b> 1, for any recipient
(a) Name and addr organization or governmen	ress of	( <b>b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data	a Table							
			1					
		. , . ,	<u> </u>	sted in the line 1 table .			· · · · · • _	8
				<u> </u>		<u> </u>		12
For Paperwork Reductio	n ACT Notice, see	tne Instructions for I	rorm 990.		Cat No 50055P		Schedu	ile I (Form 990) 2015

Schedule I (Form 990) 2015						Page <b>2</b>
		<b>Domestic Individuals.</b> C itional space is needed		on answered "Yes" on For	m 990, Part IV, line 22	
(a)Type of grant or assista	ance	( <b>b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental	l Informa	<b>tion.</b> Provide the in	formation required in	Part I, line 2, Part III,	column (b), and any other a	additional information.
Return Reference	Explanat	ion				
Part I, Line 2	Grants ar the organ		icked directly through the	e organization's accountin	ng system and payments are app	roved through the internal policies of

Schedule I (Form 990) 2015

## **Additional Data**

Massachusetts Institute of

77 Massachusetts Ave

Cambridge, MA 02139

American Academy of Orthopaedic Surgeons

6300 N River Rd Rosemont, IL 60018

Technology

Software ID: Software Version:

04-2103594

36-2110592

**EIN:** 52-2143968

Name: Alliance of Automobile Manufacturers

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

501(c)(3)

Inc

N/A

N/A

To support the Energy

To support the Decide

to Drive Campaign

and Environmental

Policy Research

0 N/A

0 N/A

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (a) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) N/A Republican Governors 11-3655877 527 150,000 0 N/A To support the work of Association the organization 1747 Pennsylvania Avenue NW Washington, DC 20006

60,000

50,000

(a) Name and address of (b) EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 501(c)(3) 50,000 0 N/A N/A Center for Automotive 01-0779978 To support the CAR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(4)

3005 Boardwalk Suite 200 Ann Arbor, MI 48108						Amiliates program
Intelligent Car Coalition Inc PO Box 33821	46-3283290	501(c)(4)	50,000	0	N/A	To support the work of the organization

40,242

N/A

To support the work of

the organization

0 N/A

Washington, DC 20033 Automotive Coalition for 54-1638971

Traffic Safety Inc

803 7th St NW Suite 300 Washington, DC 20001

(a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non- (f) Method of valuation (h) Purpose of grant (d) A mount of cash (a) Description of organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance arant or government assistance other) 02-0747896 501(c)(4) 60,000 0 N/A N/A To support the work of Center for Innovative Policy nızatıon

defending free

enterprise

401 K Street NW Suite 200 Washington, DC 20005							the organı
Americans for Tax Reform 722 12 Street NW 4th Floor	52-1403587	501(c)(4)	25,000	0	N/A	N/A	To suppor the organı

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2009 Massachusetts Ave NW Washington, DC 20036

Americans for Tax Reform 722 12 Street NW 4th Floor Washington, DC 20005	52-1403587	501(c)(4)	25,000	0	N/A	N/A	To support the work of the organization
Washington Legal Foundation	52-1071570	501(c)(3)	15,000	0	N/A	N/A	Contribution to work

**(b)** EIN (c) IRC section (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A Brvce Harlow Foundation 52-1266620 501(c)(3) 10,000 0 N/A To support the Annual 1700 New York Ave NW Suite A wards Dinner

(e) Amount of non- (f) Method of valuation

400 Washington, DC 20006						
Alliance of Automobile Manufacturers CA PAC 555 Capitol Mall Suite 1425	26-2335858	527	7,000	0	N/A	To support the work of the organization

(d) A mount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of

West Palm Beach, FL 334072032

Sacramento, CA 95814 N/A Treasure Coast Alliance 46-3511953 527 10,000 0 N/A To support the work of 5730 Corporate Way Suite the organization 214

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) Innovate Florida 46-3472497 527 10,000 0 N/A N/A To support the work of

610 S Boulevard Tampa,FL 33606						the organization
Protect Florida Families 5730 Corporate Way Suite 214 West Palm Beach, FL	47-3966488	527	10,000	0	N/A	To support the work of the organization

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1301 Pennsylvania Ave NW Washington, DC 20004

5730 Corporate Way Suite
214
West Palm Beach, FL
334072032

Citizens A gainst Government Way Suite
Solution

Citizens A gainst Government Waste

52-1363952

Citizens A gainst Government Waste

52-1363952

Solution

5,000

N/A

N/A

To support the work of the organization

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) N/A Horton's Kids 52-1755403 501(c)(3) 5,000 0 N/A To support the work of anızatıon

100 Maryland Ave SE Suite						the organ
520						ĺ
Washington, DC 20002						
Mike Pence for Indiana	80-0719483	527	5,000	0	N/A	To suppo
101 W Ohio St Suite 1180						lthe organ

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Tallahassee, FL 32301

Mike Pence for Indiana 101 W Ohio St Suite 1180 Indianapolis, IN 46204	80-0719483	527	5,000	0	N/A	1	To support the w the organization
House Majority 2016	59-0683241	527	5 000	0	N / A	N/A	To support the w

Mike Pence for Indiana 101 W Ohio St Suite 1180 Indianapolis, IN 46204	80-0719483	527	5,000	0	N/A		To support the work of the organization
House Majority 2016	59-0683241	527	5,000	О	N/A	N/A	To support the work of

House Majority 2016	59-0683241	527	5,000	0	N/A	N/A	To support the work of
Republican Party of Florida							the organization
420 E Jefferson Street							

(e) A mount of non- (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (a) Description of (h) Purpose of grant organization if applicable arant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance work of

the organization

Common Good Virginia	46-5033171	527	5,000	0	N/A	N/A	To support the w
1710 E Franklın Street 3rd							the organization
Floor							
Richmond VA 23223							

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

514 Tenth Street NW

Washington, DC 20004

N/A Ford's Theatre 52-6073157 501(c)(3) 10,000 0 N/A To support the work of

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493316045206 Compensation Information OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 2015 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Inspection **Employer identification number** Name of the organization Alliance of Automobile Manufacturers 52-2143968 Part I Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 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 Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Nο 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Any related organization? 5b If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2015

Cat No 50053T

Page 2

Form 990

Schedule J (Form 990) 2015

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	( <b>F</b> ) Compensation in
	P	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base	Bonus & incentive	Other reportable	l compensation			as deferred on prior

## (1) compensation compensation compensation

Schedule J (Form 990) 2015

See Additional Data Table

Page 3 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

Schedule J (Form 990) 2015

land social club dues

Part I. Line 1a All of the items checked on Schedule J - Part 1, line 1a relate to Mitch Bainwol, President and CEO First class travel is provided in the normal course of business for an executive in this position. Travel for Mr. Bainwol's spouse is treated as taxable compensation on his W-2 as well as his gross-up payment.

Schedule J (Form 990) 2015

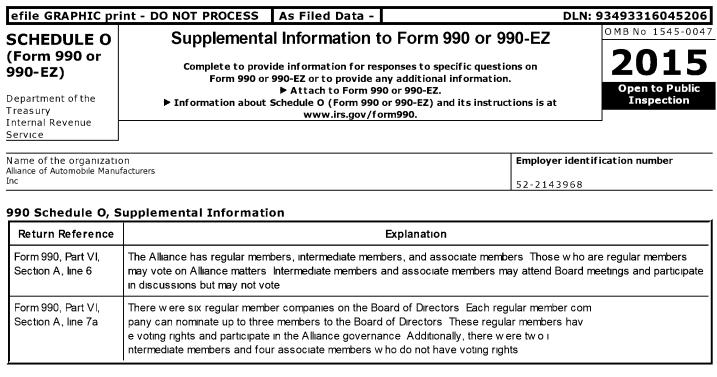
## Software ID: Software Version:

**EIN:** 52-2143968

Name: Alliance of Automobile Manufacturers

Inc

Form 990, Schedule J, Pa	irt I	I - Officers, Direc	stors, Trustees, K	ey Employees, an	d Highest Compen	sated Employees	5	
(A) Name and Title		(B) Breakdown of (i) Base	of W-2 and/or 1099-MI: (ii) Bonus &	SC compensation (iii) Other	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
		Compensation	incentive compensation	reportable compensation			!	on prior i on 222
1Roger Shane Karr VP Gov't & Int'l Affairs/ Director	(1)	326,083	32,500	9,834	7,950	20,679	397,046	0
Director	(11)	o	0	ol	0	0	-	0
1Mitch Bainwol President & CEO	(1)	875,650	340,000	292,481	29,800	39,297	1,577,228	0
	(11)	0	0	0	0			0
2John Whatley EVP & General Counsel	(1)	368,150	41,000	13,543	29,800	42,244	494,737	0
EVP & General Counsel	(11)	0	0	0	0			0
3Glona Bergquist	(1)	286,480	33,500	12,273	29,800	0 30,564	392,617	0
VP Communications	(11)		33,300	12,2,3	29,000		392,017	
4Robert Strassburger				<u> </u>	Ĭ ,	0	0	Ŭ,
4Robert Strassburger VP Safety & Harmonization	(1)	278,394	32,500	12,273	29,800	31,038	384,005	0
	(11)		0	0	0	0		0
5Julie BeckerVP Environment	(1)	277,450	32,500	12,274	29,800	28,865	380,889	0
	(11)	0	0	0	0	-	-	0
<b>6</b> Judith Mulcahy VP of Operations and Finance	(1)	270,650	32,000	11,170	29,800	43,189	386,809	0
Vr or Operations and time	(11)	0	0	0	0			0
7Landon Fulmer	(1)	239,849	30,000	17,911	18,600	28,968	335,328	0
VP, State Affairs	(11)			0				0
8Jennifer Thomas		180.001				0	0	
VP, Gov't & International Affairs	(1)		47,500	1,070	25,376	9,535	263,572	0
	(11)	0	0	0	0	0	0	0
<b>9</b> Susan Conti Assistant General Counsel	(1)	200,709	23,000	2,835	25,160	31,459	283,163	0
	(11)	0	0	0	0	-	-	0
10Curtis Augustine Director Policy & Government	(1)	189,524	26,840	450	24,206	13,844	254,864	0
Affairs	(11)	0	0	0	0			0
11Steven Douglas Sr Director Environmental	(1)	189,223	21,600	690	23,299	3,834	238,646	0
Affairs	(11)	0	0	0	0		  -	0
12Scott Schmidt	(1)	178,925	23.000	1 200	22.527	30.484	256.226	0
Sr Dir Safety & Regulatory Affairs	(11)	0	23,000	1,290		30,484	256,236	
	<u> </u>		U	٧١	0	0	0	U
<b>13</b> Valene Ughetta Director Automotive Fuels	(1)	178,502	20,750	1,980	22,145	17,535	240,912	0
	(11)	0	0	0	0	0	0	0



Return Explanation
Reference

990 Schedule O. Supplemental Information

Form 990. Part VI.

Section A, line 7b Board also participate in the Executive Committee meetings. Each company, regardless of the number of Board members present, has one vote on each issue for a total, if all members are represented, of six votes.

Form 990, Part VI,

The information for the 990 is compiled by the VP of Operations and Finance and the accoun

Each of the six regular member companies can nominate up to three members to the Board of Directors. Members of the

Form 990, Part VI,
Section B, line 11

The information for the 990 is compiled by the VP of Operations and Finance and the accounting department and given to the tax staff of the independent auditing firm. Once the audit firm has prepared the draft, the the accounting department reviews it and requests any necessary changes. Then the VP of Operations and Finance makes the final review before the final review is made by the President and CEO, the General Counsel, and the Audit Committe e. A copy of the 990 is made available to the Board of Directors prior to filing.

Return Reference Explanation

Form 990, Part VI,
Section B, line 12c

The conflict of interest declaration is discussed in one board meeting annually. In addition, each member of the Board reaffirms the conflict of interest declaration annually. The process is recorded in the minutes of the Board meeting.

990 Schedule O. Supplemental Information

Form 990, Part VI,
Section B, line 15a

Comparability data from a number of like industry surveys is maintained and review ed on an as-needed basis. The Executive Committee of the Board set the multi-year contractual compensation for the President and CEO based on external data collected. Annual performance we lighs heavily in the determination of the variable compensation payment of the President and CEO occurring each spring.

Return Reference Explanation

	on the discretion of management
Form 990 Part VII Section A Line	Power Shape Karr was employed by the Alliance as VP Government & International Affairs thr

ough November of 2015, and then went to work for a regular member company and became a mem 1a (9)

ber of the Board of Directors

990 Schedule O, Supplemental Information

Return Explanation Reference

990 Schedule O, Supplemental Information

Line 2c

Form 990, Part IX,	Coalition Engagement 43,000 Ally Engagement & Outreach 42,502 Research 2,212,118 Technical Consultants 603,373
line 11g	Marketing 442,506 PR Processing 15,839 Other Consulting 559,079 Security 6,062 Advocacy 19,500 Ethics / Compliance 9,876

Form 990, Part XII, The organization has a committee responsible for the oversight of the audit and selection

of independent accountant. This process has not changed from prior years

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

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

2015

DLN: 93493316045206 OMB No 1545-0047

> Open to Public Inspection

Schedule R (Form 990) 2015

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

Alliance of Automobile Manufacturers

(Form 990)

► Attach to Form 990.

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

Cat No 50135Y

Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. Part I (c) (d) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) entity (13) controlled entity? Yes No (1) Alliance of Automobile Manufacturers PAC See Part VII DC 527 Alliance of Automobile Yes 803 7th St NW Suite 300 Manufacturers Washington, DC 20001 45-4807568 (2)Alliance of Automobile Manufacturers CA PAC See Part VII CA 527 Alliance of Automobile Yes 555 Capitol Mall Sute 1424 Manufacturers Sacramento, CA 95814 26-2335858

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

(a)  Name, address, and EIN of related organization	(c) Legal domicile (state or foreign country)	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging ner?	<b>(k)</b> Percentage ownership
					Yes	No		Yes	No	

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

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8) ed ?	No				- 000\ 7
(i) Section 512 (b)(13) controlled entity?	Yes				- D / F C
(h) Percentage ownership					Calcadula
(g) Share of end- of-year assets					
<b>(f)</b> Share of total Income					
(e) Type of entity (C corp, S corp, or trust)					
(d) Direct controlling entity					
(c) Legal domicile (state or foreign country)					
<b>(b)</b> Primary activity					
(a) Name, address, and EIN of related organization					1

chedule R (Form 990) 2015				Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answ	ered "Yes" on Form	990, Part IV, line	34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
<b>1</b> During the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations lis	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			<b>1</b> a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)			<b>1b</b>	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s)			<b>1</b> c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			19		No
<b>h</b> Purchase of assets from related organization(s)			<b>1h</b>		No
i Exchange of assets with related organization(s)			1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)			1k		No
Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)					No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			<u>1</u> n		No
o Sharing of paid employees with related organization(s)					No
<b>p</b> Reimbursement paid to related organization(s) for expenses			<b>1</b> p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses			<u>1q</u>	Yes	
r Other transfer of cash or property to related organization(s)			<b>1</b> r		No
${f s}$ Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved	ı
1.)Alliance of Automobile Manufacturers CA PAC	В	7,000	Tracked directly		
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o the danser of such of property from related organization (6).			
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)Alliance of Automobile Manufacturers CA PAC	В	7,000	Tracked directly
(2)Alliance of Automobile Manufacturers CA PAC	Q	739	Tracked directly
(3)Alliance of Automobile Manufacturers PAC	Q	778	Tracked directly

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 r							(c)	/h)		(1)	(1)		(k)
<b>(a)</b> 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)	org	(e) all partners section 601(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
												7	

Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation

Part II, Column (b) Alliance of Automobile Manufacturers PAC (b) Primary Activity To support and encourage the election of persons to federal offices that support the

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Ineeds of the automotive industry Alliance of Automobile Manufacturers CA PAC (b) Primary Activity. To support and encourage the election of persons

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