

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE MISSION OF THE AMERICAN TRUCKING ASSOCIATIONS, INC IS TO EFFECTIVELY ADVOCATE AND COMMUNICATE EFFORTS DESIGNED TO IMPROVE SAFETY AND PROFITABILITY FOR OUR MEMBERS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data		

















4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data		

4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data		

4d	Other program services (Describe in Schedule O)	(Expenses \$	including grants of \$) (Revenue \$)
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4e Total program service expenses ▶

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	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 negotiation services? If "Yes," complete Schedule D, Part IV 	9	Yes
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	Yes
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	Yes
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f	Yes
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	Yes	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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.	109	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	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.	209	
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
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
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	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. 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	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
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 year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 152		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b Enter the number of voting members included in line 1a, above, who are independent	1b 152		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6	Yes	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		No

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	Yes
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	Yes
13 Did the organization have a written whistleblower policy?	13	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	Yes
b Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶	
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.	
20 State the name, address, and telephone number of the person who possesses the organization's books and records. ▶James R Duckworth 950 N Glebe Road Ste 210 Arlington, VA 22203 (703) 838-1959	

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

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

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

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

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

[illegible]

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

1b Sub-Total	▶			
1c Total from continuation sheets to Part VII, Section A	▶			
1d Total (add lines 1b and 1c)	▶	4,595,056	0	265,605

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 67

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
FREEMAN DECORATING CO, PO BOX 650036 DALLAS, TX 752650036	MEETING MANAGEMENT	1,549,686
PUBLISHERS PRESS INCORPORATED, PO BOX 37500 LOUISVILLE, KY 40233	PUBLISHING	843,467
STORY PARTNERS LLC, 1000 POTOMAC STREET NW SUITE 102 WASHINGTON, DC 20007	CONSULTING	354,779
GREENBERG TRAURIG LLP, 2101 L STREET NW SUITE 1000 WASHINGTON, DC 20037	CONSULTING	260,362
PERSONIFY INC, 1919 GALLOWES ROAD SUITE 400 VIENNA, VA 22182	SOFTWARE DEVELOPMENT	219,811

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 11

Part VIII **Statement of Revenue**Check if Schedule O contains a response or note to any line 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 campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	10,621				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	632,773				
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f ▶	643,394					
Program Service Revenue			Business Code				
	2a MEMBERSHIP DUES		900099	18,358,588	18,358,588		
	b PERIODICALS		541800	8,836,520	1,108,160	7,728,360	
	c MEETINGS		900099	10,484,577	10,484,577		
	d SPONSORSHIPS		900099	308,412	308,412		
	e SUBSCRIPTIONS		511120	46,584	46,584		
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶	38,034,681					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		472,481			472,481	
	4 Income from investment of tax-exempt bond proceeds ▶		0				
	5 Royalties ▶		2,334,304			2,334,304	
	6a Gross rents	(i) Real	(ii) Personal				
		2,226,619					
		b Less rental expenses	1,910,498				
	c Rental income or (loss)	316,121	0				
	d Net rental income or (loss) ▶			316,121		46,715	269,406
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		5,766,606	8,441				
		b Less cost or other basis and sales expenses	5,308,130	5,653			
	c Gain or (loss)	458,476	2,788				
	d Net gain or (loss) ▶			461,264			461,264
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a						
			0				
		b Less direct expenses b					
	c Net income or (loss) from fundraising events . . . ▶			0			
	9a Gross income from gaming activities See Part IV, line 19 a						
		0					
b Less direct expenses b							
c Net income or (loss) from gaming activities . . . ▶			0				
10a Gross sales of inventory, less returns and allowances . . . a							
		742,686					
	b Less cost of goods sold . . . b						
		204,552					
c Net income or (loss) from sales of inventory . . . ▶			538,134	527,641	10,493		
Miscellaneous Revenue		Business Code					
11a CONFERENCE SERVICES		561499	159,376	159,376			
b MISCELLANEOUS		900099	501	501			
c							
d All other revenue							
e Total. Add lines 11a-11d ▶			159,877				
12 Total revenue. See Instructions ▶			42,960,256	30,993,839	7,785,568	3,537,455	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	718,085			
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	3,414,129			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	14,270,580			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	460,440			
9 Other employee benefits.	3,189,538			
10 Payroll taxes.	1,279,713			
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	90,874			
c Accounting.	139,298			
d Lobbying.	826,014			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	63,806			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	2,260,515			
12 Advertising and promotion.	623,353			
13 Office expenses.	1,640,876			
14 Information technology.	731,132			
15 Royalties.	0			
16 Occupancy.	2,750,026			
17 Travel.	2,035,990			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	6,338,069			
20 Interest.	149,520			
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	2,216,810			
23 Insurance.	202,126			
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a PRINTING & PUBLICATIONS	1,011,467			
b BAD DEBT EXPENSE	382,062			
c MEMBER RELATED SERVICES	377,977			
d MEMBERSHIP DUES	210,942			
e All other expenses	35,100			
25 Total functional expenses. Add lines 1 through 24e.	45,418,442			
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		1,500,942	1	775,215
	2	Savings and temporary cash investments		0	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		4,148,370	4	3,972,840
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 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		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		175,471	8	135,950
	9	Prepaid expenses and deferred charges		4,198,281	9	4,015,881
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a 47,408,196			
	b	Less: accumulated depreciation	10b 21,357,172	27,880,495	10c	26,051,024
	11	Investments—publicly traded securities		22,362,511	11	22,624,100
	12	Investments—other securities. See Part IV, line 11		0	12	0
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		0	15	0
16	Total assets. Add lines 1 through 15 (must equal line 34)		60,266,070	16	57,575,010	
Liabilities	17	Accounts payable and accrued expenses		16,219,790	17	15,551,689
	18	Grants payable		0	18	0
	19	Deferred revenue		9,138,653	19	8,261,931
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		1,591,278	21	1,591,278
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		6,552,077	23	5,575,607
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		4,083,735	25	3,627,746
26	Total liabilities. Add lines 17 through 25		37,585,533	26	34,608,251	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		19,835,036	27	20,425,625
	28	Temporarily restricted net assets		2,845,501	28	2,541,134
	29	Permanently restricted net assets		0	29	0
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		22,680,537	33	22,966,759	
34	Total liabilities and net assets/fund balances		60,266,070	34	57,575,010	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	42,960,256
2	Total expenses (must equal Part IX, column (A), line 25)	2	45,418,442
3	Revenue less expenses Subtract line 2 from line 1	3	-2,458,186
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,680,537
5	Net unrealized gains (losses) on investments	5	1,478,708
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,265,700
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	22,966,759

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:

Software Version:

EIN: 53-0026970

Name: American Trucking Associations Inc

Form 990 (2017)

Form 990, Part III, Line 4a:

MEMBERSHIP TRAVELED THE COUNTRY TO RECRUIT AND RETAIN MEMBERS TO JOIN THE ASSOCIATION A DIVERSE MEMBERSHIP BASE IS ESSENTIAL WHEN EDUCATING POLITICIANS AND REGULATORS ABOUT THE INDUSTRY AS THEY DEVELOP RULES AND REGULATIONS THAT IMPACT TRUCKING

Form 990, Part III, Line 4b:

PERIODICALS TRANSPORT TOPICS PUBLISHED NATIONAL WEEKLY NEWSPAPER FOR THE TRUCKING INDUSTRY WITH A PAID CIRCULATION OF MORE THAN 23,500 AND A READERSHIP OF APPROXIMATELY 75,000 THIS PUBLICATION IS THE PRIMARY SOURCE OF INFORMATION FOR THE TRUCKING INDUSTRY

Form 990, Part III, Line 4c:

MEETINGS AND CONVENTIONS HELD SEVERAL ANNUAL MEETINGS FOR DIFFERENT SEGMENTS OF THE TRUCKING INDUSTRY AND VARIOUS EDUCATIONAL SEMINARS FOR SPECIFIC AREAS OF FINANCE, SAFETY, SECURITY, ENVIRONMENTAL, ETC MEETINGS WERE HELD IN ALL REGIONS OF THE U S

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL L AHART AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JASON H ANDRUS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
SCOTT BARNETT STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
RICHARD BARTOLIC STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
RICHARD BINKLEY CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
DONALD M BOWMAN JR PAST CHAIRMAN	1 0 0 0	X						0	0	0
ANDREW T BOYLE ATA AUDIT COMMITTEE CHAIRMAN	5 0 0 0	X						0	0	0
MARC D BOYLE CARRIER POLICY COMMITTEE CHAIR	1 0 0 0	X						0	0	0
THOMAS S BRENNAN STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
GREGORY D BROWN STATE VICE PRESIDENT	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KARY BRYCE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CARL BUMGARNER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CHRIS N BUNNING AT-LARGE MEMBER	1 0 0 0	X						0	0	0
KEVIN W BURCH IMMEDIATE PAST CHAIRMAN	5 0 0 0	X						0	0	0
JAMES BURG CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
FRED C BURNS JR PAST CHAIRMAN	1 0 0 0	X						0	0	0
JOHN BURNS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
PHILIP L BYRD SR PAST CHAIRMAN	1 0 0 0	X						0	0	0
BRUCE A CAMPBELL AT-LARGE MEMBER	1 0 0 0	X						0	0	0
MICHAEL S CARD ATA LITIGATION CENTER CHAIRMAN	5 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
W TOBIN CASSELS AT-LARGE MEMBER	1 0 0 0	X						0	0	0
WILLIAM T CASSELS JR PAST CHAIRMAN	1 0 0 0	X						0	0	0
RANDALL J CLIFFORD AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID S CONGDON AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JOHN R CONKIN ALLIED MEMBER	1 0 0 0	X						0	0	0
CHRISTOPHER RONALD COOPER AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DONALD COX STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
DENNIS DELLINGER AT-LARGE MEMBER	1 0 0 0	X						0	0	0
BRENDA DITTMER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JAMES H DIXON EMERITUS MEMBER	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SAMUEL C FAUCETTE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JAMES FIELDS AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ALVIN LEON FOLEY AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID G FREE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ERIC FULLER AT-LARGE MEMBER	1 0 0 0	X						0	0	0
SHERRI GARNER BRUMBAUGH VICE CHAIRMAN	5 0 0 0	X		X				0	0	0
CHARLES WAYNE GAUMER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
SCOTT GEORGE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CHRIS GILTZ CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
RICHARD GIROUX STATE VICE PRESIDENT	1 0 0 0	X						0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH A GREENSTEIN STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
RANDY P GUILLOT SECOND VICE CHAIRMAN	10 0 0 0	X		X				0	0	0
ROBERT F HAAG CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
ROBERT HAMILTON STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CRAIG HARPER AT-LARGE MEMBER	1 0 0 0	X						0	0	0
KENDRA HEMS TAEC REPRESENTATIVE	1 0 0 0	X						0	0	0
MATTHEW BRIAN HITCHCOCK CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
G TOMMY HODGES PAST CHAIRMAN	1 0 0 0	X						0	0	0
JOHN N HOFSTETTER CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
STEVE HOLTGEERTS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICK HOOGENDOORN STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
GREG HUMES AT-LARGE MEMBER	1 0 0 0	X						0	0	0
D MITCHELL JACKSON AT-LARGE MEMBER	1 0 0 0	X						0	0	0
WILLIAM E JAYNE III AT-LARGE MEMBER	1 0 0 0	X						0	0	0
WILLIAM E JAYNE JR EMERITUS MEMBER	1 0 0 0	X						0	0	0
THOMAS F JENSEN AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ROYAL JONES AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DEAN E KAPLAN ATA TRUCK PAC CHAIRMAN	10 0 0 0	X						0	0	0
KATE KILLORY STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
KEITH R KLEIN AT-LARGE MEMBER	1 0 0 0	X						0	0	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KEVIN P KNIGHT AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ROBERT J KORTENHAUS CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
WILLIAM T KRETSINGER SR AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JEFFREY C LANG CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
THOMAS LEE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
KEVIN LHOTAK STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
L DUANE LONG PAST CHAIRMAN	1 0 0 0	X						0	0	0
ROBERT E LOW AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID LOWRY AT-LARGE MEMBER	1 0 0 0	X						0	0	0
BRUCE DD MACRAE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD C MADDOX STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JAMES MALTBY CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
DAVID MANNING CHAIRMAN	20 0 0 0	X		X				0	0	0
RICHARD C MCARDLE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID G MCCORKLE PAST CHAIRMAN	1 0 0 0	X						0	0	0
C JAMES MCCORMICK PAST CHAIRMAN	1 0 0 0	X						0	0	0
JUDY R MCREYNOLDS ATRI CHAIRMAN	5 0 0 0	X						0	0	0
EDWIN A MEYER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
MICHAEL L MILLER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
EDWIN J NAGLE III AT-LARGE MEMBER	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DENNIS A NASH AT-LARGE MEMBER	1 0 0 0	X						0	0	0
RICHARD O'DELL AT-LARGE MEMBER	1 0 0 0	X						0	0	0
HOWARD J O'MALLEY JR AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DANNY OPIE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
DANIEL L OREN AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DONALD G OREN AT-LARGE MEMBER	1 0 0 0	X						0	0	0
TONN M OSTERGARD AT-LARGE MEMBER	1 0 0 0	X						0	0	0
GREGORY L OWEN AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ANDREW M OWENS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
DAVID R PARKER AT-LARGE MEMBER	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
G CLIFTON PARKER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
ROBERT A PETERSON STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
LOUIS E PFRANGLE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CHARLES PHILLIPS CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
BARRY E POTTLE FIRST VICE CHAIRMAN	15 0 0 0	X		X				0	0	0
CHELSEA POTTLE DEMMONS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CHARLES RAMORINO PAST CHAIRMAN	1 0 0 0	X						0	0	0
WILLIAM H REED JR CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
JOWELL RIVERA STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
EDWARD A ROCHA EMERITUS MEMBER	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
EVERETT ROEHL AT-LARGE MEMBER	1 0 0 0	X						0	0	0
RICHARD ROEHL STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JOHN ROSWICK SR STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
STEPHEN J RUSH CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
NANCY SAWYER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JOHN R SCHAUPP AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID SCHROYER STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
LEE PHILIP SHAFFER PAST CHAIRMAN	1 0 0 0	X						0	0	0
JOHN M SMITH SECRETARY	5 0 0 0	X		X				0	0	0
BILLY STEWART CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KEITH TUTTLE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
WILLIAM A USHER JR AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DANIEL L VAN ALSTINE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
GREG VENABLE CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
STEPHEN WADHAMS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JOEL WALLACE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JAMES E WARD AT-LARGE MEMBER	1 0 0 0	X						0	0	0
SCOTT D WARE CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
JAMES L WELCH AT-LARGE MEMBER	1 0 0 0	X						0	0	0
THOMAS A WHITAKER TAEC REPRESENTATIVE	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES L WHITTINGTON PAST CHAIRMAN	1 0 0 0	X						0	0	0
PAUL WILL AT-LARGE MEMBER	1 0 0 0	X						0	0	0
DAVID R WILLIAMS CARRIER POLICY COMMITTEE CHAIR	5 0 0 0	X						0	0	0
KIRK A WILLIAMS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
MICHAEL P WILSON STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
BARBARA J WINDSOR PAST CHAIRMAN	1 0 0 0	X						0	0	0
LAWRENCE W WOOLSON AT-LARGE MEMBER	1 0 0 0	X						0	0	0
ROBERT A YOUNG III EMERITUS MEMBER	1 0 0 0	X						0	0	0
THOMAS CONNERY AT-LARGE MEMBER	1 0 0 0	X						0	0	0
RICHARD COYLE AT-LARGE MEMBER	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN K ELLIOTT II AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JOSEPH K FILIPIAK CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0
MARK H GEORGE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
SCOTT HICKS STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
JASON HIGGINBOTHAM AT-LARGE MEMBER	1 0 0 0	X						0	0	0
WILLIAM HILL STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
BRIAN KINSEY STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
DEREK J LEATHERS AT-LARGE MEMBER	1 0 0 0	X						0	0	0
RUBY MCBRIDE AT-LARGE MEMBER	1 0 0 0	X						0	0	0
KATHLEEN MCCANN CONFERENCE VICE PRESIDENT	1 0 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ELI MCCORMICK AT-LARGE MEMBER	1 0 0 0	X						0	0	0
CRAIG MCCUTCHEON AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JOHN PAUGH STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
STEVEN PONDER ALLIED MEMBER	1 0 0 0	X						0	0	0
JAMES REED AT-LARGE MEMBER	1 0 0 0	X						0	0	0
KENNETH J REED AT-LARGE MEMBER	1 0 0 0	X						0	0	0
TRACY ROSSER AT-LARGE MEMBER	1 0 0 0	X						0	0	0
JEFFREY SMITH STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
TIM THORNE STATE VICE PRESIDENT	1 0 0 0	X						0	0	0
CHRISTOPHER SPEAR PRESIDENT AND CEO	25 0 15 0			X				824,852	0	29,393

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DONALD G LYNN SENIOR VICE PRESIDENT	40 0 0 0					X		230,026	0	20,433
WILLIAM GRAVES PRESIDENT AND CEO	30 0 0 0						X	769,808	0	8,206

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activities	OMB No 1545-0047
	For Organizations Exempt From Income Tax Under section 501(c) and section 527	2017
Department of the Treasury Internal Revenue Service	▶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 <u>www.irs.gov/form990</u>.	Open to Public Inspection

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

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

If the organization answered "Yes" 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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization American Trucking Associations Inc	Employer identification number 53-0026970
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")	
2	Political campaign activity expenditures (see instructions)	▶ \$ 288,066
3	Volunteer hours for political campaign activities (see instructions)	

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

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

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)**(a)** Filing
organization's
totals**(b)** Affiliated
group totals**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)**b** Total lobbying expenditures to influence a legislative body (direct lobbying)**c** Total lobbying expenditures (add lines 1a and 1b)**d** Other exempt purpose expenditures**e** Total exempt purpose expenditures (add lines 1c and 1d)**f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)**h** Subtract line 1g from line 1a If zero or less, enter -0-**i** Subtract line 1f from line 1c If zero or less, enter -0-**j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?☐ **Yes** ☐ **No****4-Year Averaging Period Under section 501(h)****(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)****Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	18,358,588
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	2,522,708
b	Carryover from last year	2b	
c	Total	2c	2,522,708
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	2,570,202
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-47,494

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
American Trucking Associations Inc

Employer identification number
53-0026970

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

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

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☒ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☒ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☒

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b

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

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

4

Describe in Part XIII the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		150,204		150,204
b Buildings		28,289,024	7,658,373	20,630,651
c Leasehold improvements		11,805,931	8,151,140	3,654,791
d Equipment		1,532,521	1,271,069	261,452
e Other		5,630,516	4,276,590	1,353,926
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				26,051,024

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII

Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. Federal income taxes	0
DEFERRED RENT EXPENSE	3,459,196
CAPITAL LEASE LIABILITY	168,550
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	3,627,746

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 ☒

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

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.

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

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 53-0026970
Name: American Trucking Associations Inc

Supplemental Information

Return Reference	Explanation
ESCROW AGREEMENT	SCHEDULE D, PART IV, LINE 2B A REAL ESTATE SALE AGREEMENT REQUIRED ATA TO DEPOSIT FUNDS IN A SOIL MANAGEMENT ESCROW ACCOUNT HELD IN TRUST BY A LEGAL FIRM TO PAY HALF OF THE EXPENSES RELATING TO SOIL REMOVAL, TESTING AND DISPOSAL ON PREVIOUSLY OWNED PROPERTY

Supplemental Information

Return Reference	Explanation
FIN 48 (ASC 740) FOOTNOTE	SCHEDULE D, PART X, LINE 2 THE AMERICAN TRUCKING ASSOCIATIONS' (ATA) ACCOUNTING POLICY FOR EVALUATING UNCERTAIN TAX POSITIONS IS TO RECOGNIZE TAX POSITIONS IF THEY WILL MORE LIKELY THAN NOT BE ULTIMATELY REALIZED ATA DOES NOT BELIEVE THERE ARE ANY UNRECOGNIZED TAX BENEFITS OR LIABILITIES THAT SHOULD BE RECORDED IN THE EVENT ATA WERE TO RECOGNIZE INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS, IT WOULD BE RECOGNIZED IN THE FINANCIAL STATEMENTS AS AN INCOME TAX EXPENSE TAX YEARS 2014 THROUGH 2017 ARE OPEN TO EXAMINATION BY THE FEDERAL AND STATE TAXING AUTHORITIES THERE ARE NO INCOME TAX EXAMINATIONS CURRENTLY IN PROCESS

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493318136548	
Schedule I (Form 990)		Grants and Other Assistance to Organizations, Governments and Individuals in the United States			
Department of the Treasury Internal Revenue Service		OMB No 1545-0047			
Name of the organization American Trucking Associations Inc		2017			
		Open to Public Inspection			
		Employer identification number 53-0026970			
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.					
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990 .					

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
GRANTS AND ASSISTANCE	SCHEDULE I, PART II THE AMERICAN TRUCKING ASSOCIATIONS, INC DOES NOT GIVE GRANTS TO THIRD PARTIES THE AMOUNTS LISTED ON PART II ARE CONTRIBUTIONS TO THE LISTED ORGANIZATIONS

Additional Data

Software ID:
Software Version:
EIN: 53-0026970
Name: American Trucking Associations Inc

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN TRANSPORTATION RESEARCH INSTITUTE 950 N GLEBE ROAD SUITE 210 ARLINGTON, VA 22203	53-2039775	501(c)(3)	563,500				CONTRIBUTION
CALIFORNIA TRUCKING ASSOCIATION 4148 EAST COMMERCE WAY SACRAMENTO, CA 95834	95-1028780	501(c)(6)	50,000				CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMERICAL VEHICLE SAFETY ALLIANCE 1101 17TH STREET NW SUITE 803 WASHINGTON, DC 20036	91-1212247	501(c)(3)	10,000				CONTRIBUTION
IOWA MOTOR TRUCK ASSOCIATION 717 EAST COURT AVENUE DES MOINES, IA 50309	42-0333061	501(c)(6)	10,000				CONTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PREVENT CANCER FOUNDATION 1600 DUKE STREET SUITE 500 ALEXANDRIA, VA 22314	52-1429544	501(c)(3)	7,000				CONTRIBUTION
NATIONAL DEMOCRATIC CLUB 30 IVY STREET SE WASHINGTON, DC 20003	53-0233594	501(c)(7)	6,000				CONTRIBUTION

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization
American Trucking Associations Inc

Employer identification number

53-0026970

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </div> <div> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </div> </div>		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </div> <div> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </div> </div>		
4 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: <div style="margin-left: 20px;"> a Receive a severance payment or change-of-control payment? </div>	4a	No
<div style="margin-left: 20px;"> b Participate in, or receive payment from, a supplemental nonqualified retirement plan? </div>	4b	No
<div style="margin-left: 20px;"> c Participate in, or receive payment from, an equity-based compensation arrangement? </div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 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: <div style="margin-left: 20px;"> a The organization? </div>	5a	
<div style="margin-left: 20px;"> b Any related organization? </div> If "Yes," on line 5a or 5b, describe in Part III.	5b	
6 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: <div style="margin-left: 20px;"> a The organization? </div>	6a	
<div style="margin-left: 20px;"> b Any related organization? </div> If "Yes," on line 6a or 6b, describe in Part III.	6b	
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

See Additional Data Table

[illegible]

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
CHAIRMAN TRAVEL	PART I, LINE 1A T THE CHAIRMAN AND CHAIRMAN'S SPOUSE MAY TRAVEL FIRST CLASS DUE TO HEAVY TRAVEL SCHEDULES. THE POSITION IS AN UNPAID ONE YEAR POSITION.
PRESIDENT TRAVEL	PART I, LINE 1A THE PRESIDENT & CEO MAY TRAVEL FIRST CLASS DUE TO A HEAVY TRAVEL SCHEDULE.
SPOUSE TRAVEL	PART I, LINE 1A THE PRESIDENT & CEO'S SPOUSE MAY TRAVEL FIRST CLASS TO MEETINGS FOR BUSINESS PURPOSES.
SERVICE AWARDS	PART I, LINE 1A SERVICE AWARDS TO ALL STAFF ARE GROSSED UP FOR TAXES. TWO OF THE LISTED EMPLOYEES RECEIVED SERVICE AWARDS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
American Trucking Associations Inc

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

53-0026970

990 Schedule O, Supplemental Information

Return Reference	Explanation
RELATIONSHIPS	FORM 990, PART VI, LINE 2 - DONALS M BOWMAN, JR AND JAMES E WARD, JR HAVE A BUSINESS RELATIONSHIP - ANDREW T BOYLE AND MARC D BOYLE HAVE A FAMILY RELATIONSHIP - W TOBIN CASSELS, III AND WILLIAM T CASSELS, JR HAVE A FAMILY AND BUSINESS RELATIONSHIP - W TOBIN CASSELS, III AND G CLIFTON PARKER HAVE A BUSINESS RELATIONSHIP - ERIC FULLER, JOHN STOMPS AND BILLY STEWARD HAVE A BUSINESS RELATIONSHIP - SCOTT GEORGE AND DAVID MANNING HAVE A BUSINESS RELATIONSHIP - JOSEPH A GREENSTEIN AND JOHN ROSWICK, SR HAVE A BUSINESS RELATIONSHIP - ELI MCCORMICK, C JAMES MCCORMICK AND SHEPARD DUNN HAVE A FAMILY RELATIONSHIP - JUDY R MCREYNOLDS AND TIM THORNE HAVE A BUSINESS RELATIONSHIP - LEE PHILIP SHAFFER AND DENNIS A NASH HAVE A BUSINESS RELATIONSHIP

990 Schedule O, Supplemental Information

Return Reference	Explanation
MEMBERS	FORM 990, PART VI, LINE 6 THE AMERICAN TRUCKING ASSOCIATION, INC IS A TRADE ASSOCIATION CONSISTING OF DUES PAYING MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
ELECTING A GOVERNING BOARD	FORM 990, PART VI, LINE 7A THE AMERICAN TRUCKING ASSOCIATIONS, INC (ATA) BOARD OF DIRECTORS, AS OF DECEMBER 31, 2017, CONSISTS OF ONE HUNDRED THIRTY-THREE MEMBERS PLUS NINETEEN EMERITUS MEMBERS FOR A TOTAL OF ONE HUNDRED FIFTY-TWO VOTING MEMBERS SIXTY-THREE OFFICERS AND VICE PRESIDENTS AT LARGE ARE ELECTED BY THE BOARD ITSELF ANNUALLY FOURTEEN COMMITTEE CHAIRS ARE APPOINTED ANNUALLY BY THE CHAIRMAN, WHO SERVES A ONE YEAR TERM FIFTY-SIX STATE ASSOCIATIONS, AFFILIATED CONFERENCES REPRESENTING INDUSTRY SEGMENTS, AND OTHER RELATED ORGANIZATIONS EACH ELECT ONE ATA MEMBER AS THEIR REPRESENTATIVE TO THE BOARD EMERITUS MEMBERS ARE EX-OFFICIO LIFETIME MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 REVIEW	FORM 990, PART VI, LINE 11B DRAFT VERSIONS OF THE 990 TAX RETURNS ARE REVIEWED BY THE CHIEF FINANCIAL OFFICER OF THE ORGANIZATION AND THEN FORWARDED TO AN INDEPENDENT ACCOUNTING FIRM FOR REVIEW FINAL DRAFTS ARE GIVEN TO THE MANAGEMENT COMMITTEE OF THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING THE MANAGEMENT COMMITTEE IS AUTHORIZED BY THE 152 MEMBER BOARD TO ACT ON ALL FINANCIAL AND ADMINISTRATIVE AFFAIRS OF THE ORGANIZATION THE RETURN IS THEN MADE AVAILABLE TO ALL BOARD MEMBERS ON THEIR WEB PAGE

990 Schedule O, Supplemental Information

Return Reference	Explanation
CONFLICT OF INTEREST	FORM 990, PART VI, LINE 12C THE AMERICAN TRUCKING ASSOCIATIONS, INC REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY ALL CONTRACTS GO THROUGH AN EXTENSIVE REVIEW PROCESS ALL ACCOUNTS PAYABLE CHECKS ARE REVIEWED AND APPROVED BY EITHER THE CHIEF FINANCIAL OFFICER OR THE ASSISTANT CONTROLLER BEFORE THEY ARE RELEASED IF AN EMPLOYEE IS MADE AWARE OF A CONFLICT THEY ARE INSTRUCTED TO DISCLOSE THE SITUATION THROUGH THE PROPER CHAIN SO THAT THE APPROPRIATE ACTION MAY TAKE PLACE

990 Schedule O, Supplemental Information

Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINES 15A AND 15B THE AMERICAN TRUCKING ASSOCIATIONS (ATA) USES AN OUTSIDE COMPENSATION CONSULTANT TO CONDUCT AN ANNUAL REVIEW OF THE PRESIDENT & CEO'S COMPENSATION THE PROCESS INCLUDES A REVIEW OF THE CURRENT CASH COMPENSATION (BASE SALARY PLUS INCENTIVE BONUS AND BENEFITS) SECONDLY, THE CONSULTANT CONDUCTS A MARKET ANALYSIS COMPARING THE CEO'S COMPENSATION WITH THE COMPENSATION OF CEO'S OF COMPARABLE TRADE ASSOCIATIONS THE ATA COMPENSATION COMMITTEE IS A SUBCOMMITTEE OF THE ATA EXECUTIVE COMMITTEE, A SUBCOMMITTEE OF THE ATA BOARD OF DIRECTORS THE COMPENSATION COMMITTEE CONSIDERS THE RESULTS OF THESE ANALYSES WHEN DETERMINING COMPENSATION LEVELS OF THE CEO THE SENIOR STAFF'S COMPENSATION IS COMPARED TO COMPENSATION OF COMPARABLE POSITIONS IN A COMPARATOR GROUP OF TRADE ASSOCIATIONS AND REVIEWED BY THE PRESIDENT AND CEO

990 Schedule O, Supplemental Information

Return Reference	Explanation
AVAILABILITY OF GOVERNING DOCUMENTS TO THE PUBLIC	FORM 990, PART VI, LINE 19 THE AMERICAN TRUCKING ASSOCIATIONS, INC MAKES GOVERNING DOCUMENTS, FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY AVAILABLE TO THE BOARD MEMBERS THE CONFLICT OF INTEREST POLICY IS ALSO AVAILABLE TO STAFF AND GOVERNING DOCUMENTS ARE AVAILABLE TO MEMBERS TAX RETURNS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
RECONCILIATION OF NET ASSETS	Form 990, Part XI, line 9 Change in value of Pension Equity Charge \$1,265,700

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
American Trucking Associations Inc

Employer identification number
53-0026970

Part I

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)American Transportation Research Institutu 950 N Glebe Road Ste 210 Arlington, VA 22203 54-2039775	Research	VA	501 (C) 3	7	ATA	Yes	

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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) ATA Services Inc and Subsidiary 950 N Glebe Road Ste 210 Arlington, VA 22203 52-1066416	Computer Serv	VA	NA	C Corp			100 000 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "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**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	No
d 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)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	1o Yes	
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q Yes	
r Other transfer of cash or property to related organization(s)	1r	No
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 this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)AMERICAN TRANSPORTATION RESEARCH INSTITUTE	b	563,500	ACTUAL CONTRIB
(2)AMERICAN TRANSPORTATION RESEARCH INSTITUTE	l	200,000	BUDGETED FEE
(3)AMERICAN TRANSPORTATION RESEARCH INSTITUTE	o	1,213,626	ACTUAL COSTS
(4)AMERICAN TRANSPORTATION RESEARCH INSTITUTE	q	1,561,198	ACTUAL TRANSFER

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

[illegible]

Part VII **Supplemental Information**

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