

(809)

AMENDED RETURN SECTION 512(A)(7) REPEAL
Exempt Organization Business Income Tax Return
 (and proxy tax under section 6033(e))

Form 990-T

OMB No 1545-0687

For calendar year 2017 or other tax year beginning OCT 1, 2017, and ending SEP 30, 2018

2017

Open to Public Inspection for
501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A Check box if
address changed

B Exempt under section

501(c)(3)
 408(e) 220(e)
 408A 530(a)
 529(a)

Print
or
Type

Name of organization (Check box if name changed and see instructions.)

**AMERICAN ASSOCIATION OF MOTOR VEHICLE
ADMINISTRATORS**

Number, street, and room or suite no. If a P.O. box, see instructions.

4401 WILSON BOULEVARD, NO. 700

City or town, state or province, country, and ZIP or foreign postal code

ARLINGTON, VA 22203

D Employer identification number
(Employees' trust, see
instructions)

53-0172317

E Unrelated business activity codes
(See instructions)

541800

C Book value of all assets
at end of year

112,539,889.

F Group exemption number (See instructions.) ►

G Check organization type ► 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity. ►

SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

► Yes No

If "Yes," enter the name and identifying number of the parent corporation. ►

J The books are in care of ► **WENDY SIBLEY**

Telephone number ► (703) 908-2897

Part I Unrelated Trade or Business Income

(A) Income

(B) Expenses

(C) Net

1a	Gross receipts or sales			1c		
b	Less returns and allowances			2		
2	Cost of goods sold (Schedule A, line 7)			3		
3	Gross profit. Subtract line 2 from line 1c			4a		
4a	Capital gain net income (attach Schedule D)			4b		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4c		
c	Capital loss deduction for trusts			5		
5	Income (loss) from partnerships and S corporations (attach statement)			6		
6	Rent income (Schedule C)			7		
7	Unrelated debt-financed income (Schedule E)			8		
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)			9		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			10		
10	Exploited exempt activity income (Schedule I)			11	117,427.	54,554.
11	Advertising income (Schedule J)			12		
12	Other income (See instructions; attach schedule)			13	117,427.	54,554.
13	Total. Combine lines 3 through 12					

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)		14	
15	Salaries and wages		15	
16	Repairs and maintenance		16	
17	Bad debts		17	
18	Interest (attach schedule)		18	
19	Taxes and licenses		19	
20	Charitable contributions (See instructions for limitation rules)		20	
21	Depreciation (attach Form 4562)		21	
22	Less depreciation claimed on Schedule A and elsewhere on return		22a	
23	Depletion		23	
24	Contributions to deferred compensation plans		24	
25	Employee benefit programs		25	
26	Excess exempt expenses (Schedule I)		26	
27	Excess readership costs (Schedule J)		27	62,873.
28	Other deductions (attach schedule)		28	1,500.
29	Total deductions. Add lines 14 through 28		29	64,373.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	-1,500.
31	Net operating loss deduction (limited to the amount on line 30)		31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30		32	-1,500.
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)		33	1,000.
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32		34	-1,500.

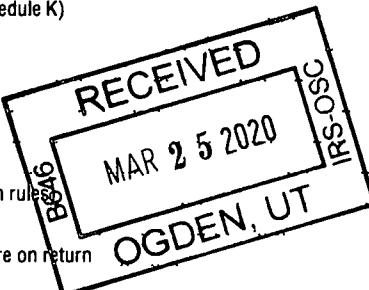
723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

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JUL 13 2020

Received in
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Part III Tax Computation

35 Organizations Taxable as Corporations See instructions for tax computation

Controlled group members (sections 1561 and 1563) check here ► See instructions and:

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) (2) (3)

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

36 Trusts Taxable at Trust Rates See instructions for tax computation Income tax on the amount on line 34 from:

Tax rate schedule or Schedule D (Form 1041)

37 Proxy tax See instructions

38 Alternative minimum tax

39 Tax on Non-Compliant Facility Income See instructions

40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies

	35c	0.
	36	
	37	
	38	
	39	
	40	0.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

41a		
41b		
41c		
41d		
41e		

b Other credits (see instructions)

c General business credit Attach Form 3800

d Credit for prior year minimum tax (attach Form 8801 or 8827)

e **Total credits** Add lines 41a through 41d

42 Subtract line 41e from line 40

43 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)

44 Total tax. Add lines 42 and 43

45a Payments: A 2016 overpayment credited to 2017

45a		
45b		
45c		
45d		
45e		
45f		
45g	9,206.	Total ► 9,206.

46 Total payments. Add lines 45a through 45g

SEE STATEMENT 5

46 9,206.

47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ►

47

48 Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed

48

49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49 9,206.

50 Enter the amount of line 49 you want: Credited to 2018 estimated tax ► Refunded ►

50 9,206.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ►

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
X	

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?

47

If YES, see instructions for other forms the organization may have to file.

X

53 Enter the amount of tax-exempt interest received or accrued during the tax year ► \$

Sign Here	<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.</p> <p>CHIEF FINANCIAL OFFICER</p> <p><i>Henry S. Smith</i></p> <p>Signature of officer</p>			<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Date	Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	FRANK H. SMITH	<i>Frank H. Smith</i>	03/11/20		P00639053
	Firm's name ► MARCUM, LLP			Firm's EIN ►	11-1986323
	1899 L STREET, NW, SUITE 850			Phone no (202) 227-4000	
	Firm's address ► WASHINGTON, DC 20036				

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Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

1 Inventory at beginning of year	1	6 Inventory at end of year	6
2 Purchases	2	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7
3 Cost of labor	3		
4a Additional section 263A costs (attach schedule)	4a	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
b Other costs (attach schedule)	4b		
5 Total. Add lines 1 through 4b	5		

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A) ►	Enter here and on page 1, Part I, line 7, column (B) ►
Total dividends-received deductions	Included in column 8		0.	0.

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

		Exempt Controlled Organizations			
1 Name of controlled organization	2 Employer identification number	3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
				Add columns 5 and 10 Enter here and on page 1 Part I line 8 column (A).	Add columns 6 and 11 Enter here and on page 1 Part I line 8 column (B).
Totals				0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
			Enter here and on page 1 Part I line 9 column (A)	Enter here and on page 1 Part I line 9 column (B)
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5 but not more than column 4)
(1)						
(2)						
(3)						
(4)						
			Enter here and on page 1 Part I line 10 col (A)	Enter here and on page 1 Part I line 10 col (B)		Enter here and on page 1 Part II line 26
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)

Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	0.	0.				0.

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1) MOVE MAGAZINE	117,427.	54,554.	62,873.	8,274.	235,284.	62,873.
(2)						
(3)						
(4)						
Totals from Part I ►	0.	0.				0.
	Enter here and on page 1 Part I line 11 col (A)	Enter here and on page 1 Part I line 11 col (B)				Enter here and on page 1 Part II line 27
Totals, Part II (lines 1-5) ►	117,427.	54,554.				62,873.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14	►		0.

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ADVERTISING, QUALIFIED TRANSPORTATION BENEFITS

TO FORM 990-T, PAGE 1

FOOTNOTES

STATEMENT 2

LINES 12 AND 19 WERE ELIMINATED ON THE AMENDED RETURN DUE TO THE REPEAL OF IRC SECTION 512(A)(7).

THE 2017 990-T IS BEING AMENDED DUE TO THE REPEAL OF IRC SECTION 512(A)(7) OF TAX CUTS AND JOBS ACT THAT IMPOSED A TAX ON NON-PROFIT ORGANIZATIONS THAT PROVIDED QUALIFIED TRANSPORTATION FRINGE BENEFITS, OTHERWISE KNOWN AS THE "PARKING TAX".

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3
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DESCRIPTION	AMOUNT
TAX PREPARATION FEES	1,500.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	1,500.

FORM 990-T	NET OPERATING LOSS DEDUCTION	STATEMENT 4		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
09/30/14	1,250.	0.	1,250.	1,250.
09/30/15	1,250.	0.	1,250.	1,250.
09/30/16	1,250.	0.	1,250.	1,250.
09/30/17	1,250.	0.	1,250.	1,250.
NOL CARRYOVER AVAILABLE THIS YEAR			5,000.	5,000.

FORM 990-T	OTHER CREDITS AND PAYMENTS	STATEMENT 5
DESCRIPTION	AMOUNT	
ORIGINAL 2017 990-T TAX PAID ON FRINGE BENEFITS		9,206.
TOTAL INCLUDED ON FORM 990-T, PAGE 2, PART IV, LINE 45G		9,206.