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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

	110111011				,							
	For th	ne 2009 calen	dar year,	or tax year beg	inning	, 201	09, and endir		 	,		
В	Check if	f applicable	 	C				Dε	mployer Identi	fication Number		
	Ad	ldress change	Please use !RS label	CONSTRUCT	ION ADVANC	EMENT PROGRA	M OF	3	31-1212	701		
	Na	ame change	or print or type.	CENTRAL I				E Te	elephone numb	per		
	Пи	itial return	See specific			VENUE #1000		I ((317) 472-6777			
	\vdash	rmination	Instruc- tions.	INDIANAPO	LIS, IN 46	204			· /		_	
	1	nended return	""					ء ا	ross receipts \$	562,	360	
	\vdash		F Name (and address of princip	nal officer	•		H(a) Is this a group			X No	
	LJ AP	plication pending	l	•				H(b) Are all affiliate		Yes	H No	
				AS C ABOVE		[] .a.a		1 ''	a list (see ins		□.•0	
<u>!</u>		-exempt statu		(c) (6)·	(insert no.)	4947(a)(1) or	527	ļ				
<u>J</u>	Wet	bsite: ► N/						H(c) Group exempt	T			
<u>K</u>		of organization	X Corpora	ation Trust	Association	Other ►	L Year of Forma	tion 1987	M State of le	egal domicile IN		
	ırt I	Summa										
Revenue SCANN HIM Bes K Gov@nBrc2[[][1	Briefly descri	be the org	ganization's mis	sion or most sigi	nificant activities _	TO PROMO	TE THE COL	MMON_BU	SINESS	. _	
g 0		INTEREST	S OF I	HE CONSTRU	JCTION_INDU	STRY IN THE	STATE OF	INDIANA.				
-12-												
Ę												
ð,	2	Check this bo	x ► 🗍	if the organizati	on discontinued	its operations or di	sposed of mo	ore than 25% o	f its assets			
35					erning body (Par				3		3	
3	4	Number of in	dependen	it voting membe	ers of the govern	ing body (Part VI, Ii	ıne 1b)		4		_ 2	
٥			•	yees (Part V, In	•				5		0	
重	1			eers (estimate i					6		0	
3	1	-			•	column (C), line 12	2		7a		0.	
	b	Net unrelated	business	taxable income	from Form 990			· · · · · · · · · · · · · · · · · ·	7b		0.	
Ü				[]	RECEIV	20		Prior Y	'ear	Current Ye	ar	
(D)	8	Contributions	and gran	ts (Part VIII, Iւթ	o-1h)	78						
ž	9	Program service revenue (Part Villadine 29)					74	744,731.		179.		
ě					(A),MiAes まりん	Hd 7d) 6		1	2,396.	-23,	819.	
Œ					lines 5, 6d <u>, 8c, 9</u>							
						art VIII, column (A),	, line 12)	75	7,127.	562,	360.	
	13	Grants and s	mılar amo	ounts paid (Parl	IX-column (A),	lines 1-3)						
					IX, column (A), I			-				
						IX, column (A), Im	es 5.10)					
69							03 0 10)		-			
Ехрепэеэ					column (A), line			<u> </u>				
ន	Ь	Total fundrais	sing exper	nses (Part IX, c	olumn (D), line 2	5) •						
-	17	Other expens	expenses (Part IX, column (A), lines 11a-11d, 11f-24f)						8,034.	654,744.		
	18	Total expense	es Add III	nes 13-17 (mus	t equal Part IX, c	equal Part IX, column (A), line 25)				65 <u>4</u> ,	744.	
	19	Revenue less	expense	s Subtract line	18 from line 12			6	9,093.	-92,	384.	
h 8		_						Beginning	of Year	End of Yea	ar	
Net Assats or Fund Balancos	20	Total assets ((Part Y III	no 16)					2,093.	517,		
Bal		Total liabilitie							6,250.	211,		
15			-	-								
	22				line 21 from line	20		30	5,843.	305,	<u>635.</u>	
Ра	rt II	Signati	<u>ire Bloc</u>	:K		 				-		
		Under penaltie	s of perjury,	I declare that I have	examined this return, i	including accompanying so is based on all information	chedules and stat	tements, and to the tage	pest of my know	wledge and belief, it	IS	
		100,0010,4				, is based on an imprinate	on or winor prope	, X	ا ماڭ	1		
Sig	jn 💮		M	\mathcal{X} \mathcal{U} \mathcal{U}	И				11.51	/δ		
He	re	Signature	of officer	· yv	`			Date	•	ý		
		► CHARI	LES V.	KAHL				PRESIDEN	T			
		Type or pr	int name and	title			-					
		İ					Date	Check if	Pre	parer's identifying ni e instructions)	umber	
Pai	id	1	M	コイルカト	\ TD		C10 2	self.		e msu uctions)		
Pre		Preparer's signature	▶ '`\	works	~~~, 30		5-10-20	210 311,000	์ ∐ท⁄	/ A		
pa	rer's		r R J	PILE, LLC	\ 				14/			
Us	е	Firm's name (o			* 	200			N7 / 7			
On	ly	employed), address, and	· —		Q, SUITE 1			EIN ►		V 000 045		
		ZIP + 4		IANAPOLIS,	IN 46204-		<u>-</u>	Phone no	· · (317			
						(see instructions)				X Yes	No	
BA	A For	Privacy Act a	and Paper	work Reduction	n Act Notice, see	the separate instru	uctions.	TEEA	0113L 12/29/0	9 Form 990	(2009)	

Form 990 (2009) CONSTRUCTION ADVANCEMENT PROGRAM OF	31-1212701	Page 2
Part III Statement of Program Service Accomplishments		
1 Briefly describe the organization's mission TO PROMOTE THE COMMON BUSINESS INTERESTS OF THE CONSTRUCTION INDI INDIANA.	JSTRY IN THE STATE	<u>OF</u>
2 Did the organization undertake any significant program services during the year which were not listed or		
Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O	Yes X	No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program set If 'Yes,' describe these changes on Schedule O	rvices? Yes X	No
Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants are expenses and revenue, if any, for each program service reported	s by expenses Section 501(c) and allocations to others, the to)(3) tal
PROGRAMS ARE IN CONJUNCTION WITH BUILDING DIVISION - ICA, INC (FOR GENERAL CONTRACTORS OF INDIANA, INC.) TO EDUCATE AND ASSIST CONTRACTOR AND TECHNICAL MATTERS.	RACTORS WITH LEGAL,)
		- -
4b (Code) (Expenses \$ including grants of \$)	(Revenue \$)
		. – – –
	·	
4c (Code:) (Expenses \$ including grants of \$)	(Revenue \$)
		. – – –
		-
		-
		-
4d Other program services (Describe in Schedule O)		
(Expenses \$ including grants of \$) (Revenue \$	}	
4e Total program service expenses ►		

CONSTRUCTION ADVANCEMENT PROGRAM OF 31-1212701 Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes.' complete Schedulě A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 X 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 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II Δ Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D. 6 Х 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes.' complete Schedule D. Part III 8 Х Did the organization report an amount in Part X, line 21, 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 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? In Yes, complete Schedule D, Part V 10 Х is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D. Parts VI. VIII, IX, or X as applicable Х 11 Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII ● 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 169 If 'Yes,' complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 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? If Yes, 'complete Schedule D, Part X 12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E Х 13 14a Did the organization maintain an office, employees, or agents outside of the United States? X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I Х 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I 17 Х 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

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

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

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Form 990 (2009) CONSTRUCTION ADVANCEMENT PROGRAM OF
Part IV | Checklist of Required Schedules (continued)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		х
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
į	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
١	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transation 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? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
•	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
207		Form	oon /	2000

Form **990** (2009)

12a

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 1 a 0 0 1_b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 0 calendar year ending with or within the year covered by this return 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? Зa b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account) 4a **b** If 'Yes,' enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5 c Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b 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 7 a provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **7**f g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 q h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a **b** Did the organization make any 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 other members or shareholders 11 a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11 b

BAA Form 990 (2009)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) CONSTRUCTION ADVANCEMENT PROGRAM OF 31-1212701 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. **Governing Body and Management** Yes No 1a Enter the number of voting members of the governing body 1 a **b** Enter the number of voting members that are independent 1 b 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? Х 2 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 Did the organization make any significant changes to its organizational documents 4 since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Х X Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7 a Х b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? Х 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or 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 Х Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Does the organization have local chapters, branches, or affiliates? X 10a b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 Х 11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done X 12 c 13 Does the organization have a written whistleblower policy? Х 13 14 Does the organization have a written document retention and destruction policy? X 14 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 Х 15 a **b** Other officers of key employees of the organization 15_b X 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? Х 16a b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. **Disclosures** List the states with which a copy of this Form 990 is required to be filed > IN Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization

►BUILDING DIVISION-ICA 1 NORTH CAPITOL AVE # 1000 INDPLS IN 46204 (317) 472-6777

BAA

Form 990 (2009)

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees'
- 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, and 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 the organization did not compensate any current officer, director, or trustee (B) (c) (E) (F) (D) Average hours per week Position (check all that apply) Estimated amount of other compensation from the Reportable compensation from the organization (W-2/1099 MISC) Name and Title Reportable compensation from related organizations (W 2/1099-MISC) Highest Individual Institutional trustee Key employee employee organization and related organizations compensated trustee PHILIP G. KENNEY TREASURER Х 1 Х 0 0 0. HAROLD FORCE VICE PRESIDENT Х Х 1 0 0 0. CHARLES V. KAHL SECRETARY 1 X X 0 0 0.

TEEA0107L 11/10/09

· (A)	(B)	ł		(c)			(D)	(E)	- }	(F)	
Name and Title	Average hours			(chec	k all t	that a	pply)	Reportable compensation from	Reportable		Estimated	
•	nours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation fron related organization (W 2/1099-MISC)	'	nount of oth ompensation from the organization and related organizations	n I
				_						\perp		
		_										
										_		
1 b Total								0.		<u>). </u>		0.
2 Total number of individuals (including but not limite	d to tho	se li	stec	d ab	ove)	wh	o re	ceived more than	\$100,000 in rep	ortable c	ompensa	ition
from the organization • 0												
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such its	ndıvıdua	1	-		-			•		3	Yes	No X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t individual	portable han \$15	e cor 50,00	mpe)0?	nsa If 'Y	tion 'es'	and com	l oth iplet	er compensation e Schedule J for :	from such	4		X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	ompens hedule	atio I for	n fro	om a ch pe	any e <i>rso</i>	unre n	elate	ed organization for	services	5		X
Section B. Independent Contractors				_								
Complete this table for your five highest compensation from the organization	ed inde	pend	dent	cor	ntrac	ctors	tha		- · · · · · · · · · · · · · · · · · · ·			
Name and business addres	<u>s</u>							Description of	of Services	Com	(C) pensation	1
					_							
2 Total number of independent contractors (including	but not	lımı	ted	to th	าดรค	list	led a	above) who receiv	ed more than			
\$100,000 in compensation from the organization												

Pa	rt VIII Statement of Revenue			, <u></u>	
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S S	1a Federated campaigns 1a				
ANT	b Membership dues 1b				
20	c Fundraising events 1c				
FA	d Related organizations 1d				
S.A.	e Government grants (contributions) 1 e				
Sis					
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above				
₹ 0	g Noncash contribus included in lns 1a-1f: \$	_ = -			
ĕĕ	h Total. Add lines 1a-1f				1
	Business Code				j 1
3	2a MEMBERSHIP DUES & ASSESSMENTS	586,179.	586,179.		·
۵		300,179.	300,113.		
핑	~~~~~~ 				
Σ	d				
S	<u></u>				
RAI	e				
PROGRAM SERVICE REVENUE	f All other program service revenue	506 170			ļ
	g Totali 7 dd iiries 2a 2i	586,179.			
	Investment income (including dividends, interest and other similar amounts)	-22 010			22.010
	·	-23,819.			-23,819.
	4 Income from investment of tax-exempt bond proceeds			· 	
ł	5 Royalties (i) Real (ii) Personal				
	6a Gross Rents		>-		
ı					,
	b Less rental expenses	`			
	c Rental income or (loss)				
	d Net rental income or (loss)		-	· · · · · · · · · · · · · · · · · · ·	
	7a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory				
	b Less cost or other basis				
ĺ	and sales expenses				
	c Gain or (loss)		are a construent a		
	d Net gain or (loss)				
NUE	8a Gross income from fundraising events (not including \$				
2	of contributions reported on line 1c)				
2	See Part IV, line 18				
OTHER REVEN	b Less direct expenses b				į
°	c Net income or (loss) from fundraising events		THE SERVICE SERVICE SERVICES		
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b				·
	c Net income or (loss) from gaming activities				l—— ——— —— —— —— —— —— —— —— —— —— —— ——
- 1	10a Gross sales of inventory, less returns and allowances a				,
	b Less. cost of goods sold . b				}
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a				
	b				
	_		-		
	d All other revenue			_	<u> </u>
	e Total. Add lines 11a-11d				
	- · · · · <u> </u>	F62 360	FOC 170		02.010
- 1	12 Total revenue. See instructions	562,360.	586,179.	0.	-23,819.

Page 10

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (**D)** Fundraising (B) (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, Grants and other assistance to individuals in 2 the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees) a Management **b** Legal c Accounting d Lobbying e Prof fundraising svcs See Part IV. In 17 2,654 f Investment management fees g Other 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a OPERATING FEES 646,500 **b** MISCELLANEOUS 5,590 f All other expenses Total functional expenses. Add lines 1 through 24f 654,744 Joint costs. Check here ► X if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation BAA

Pa	<u>rt X</u>	Balance Sheet			
		,	(A) Beginning of year		(B) End of year
•	1	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments	261,813.	2	199,958.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
	}	and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
ŝ	7	Notes and loans receivable, net		7	
A S E T S	8	Inventories for sale or use	 	8	·
Ś	9	Prepaid expenses and deferred charges	·	9	
	10 a	Land, buildings, and equipment cost or other basis 10a			
		Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b		10 c	
	11	Investments — publicly-traded securities.	250,280.	11	317,265.
	12	Investments – other securities See Part IV, line 11	····	12	
	13	Investments - program-related See Part IV, line 11		13	<u> </u>
	14	Intangible assets.		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34).	512,093.	16	517,223.
	17	Accounts payable and accrued expenses		17	5,338.
	18	Grants payable		18	
	19	Deferred revenue		19	
į	20	Tax-exempt bond liabilities		20	
B	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ABILITIES	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
į		of Schedule L		22	
Š	23	Secured mortgages and notes payable to unrelated third parties	<u></u>	23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	206,250.	25	206,250.
	26	Total liabilities. Add lines 17 through 25	206,250.	26	211,588.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines			
		27 through 29 and lines 33 and 34.			the second of th
Ş	27	Unrestricted net assets	305,843.	27	305,635.
Ĕ	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ▶			
F020		lines 30 through 34.		.	
	30	Capital stock or trust principal, or current funds		30	
B	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
B4142 0mの	33	Total net assets or fund balances.	305,843.	33	305,635.
<u>\$</u>	34	Total liabilities and net assets/fund balances	512,093.	34	517,223.

 § 34 Total liabilities and net assets/fund balances
 512,093. 34
 517,223.

 BAA
 Form 990 (2009)

Part XI Financial Statements and Reporting				
•		Yes	No	
1 Accounting method used to prepare the Form 990 Cash X Accrual 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?	2a		Х	
b Were the organization's financial statements audited by an independent accountant?	2b	Х		
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?	2 c		х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis or both				
Separate basis X Consolidated basis Both consolidated and separate basis				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				
b 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	t 3 b			

ВАА

Form 990 (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

2009 Open to Public

Inspection

Maine of the orga							
CENTRAL	TION ADVANCEMENT PROGRAM IN., INC.		31-1212701				
Part I Or	ganizations Maintaining Dono e organization answered 'Yes' t	r Advised Funds or Other Similar Fun o Form 990, Part IV, Ime 6.	ds or Acc	ounts Complete	; if		
		(a) Donor advised funds	(b) F	unds and other acc	counts		
1 Total nu	mber at end of year						
	ite contributions to (during year)						
55 0	ite grants from (during year)						
4 Aggrega	ite value at end of year						
		nor advisors in writing that the assets held in do to the organization's exclusive legal control?	onor advised	Yes	No		
used or purpose	ly for charitable purposes and not for conferring impermissible private ben		any other	Yes	No		
Part II Co	nservation Easements Comple	ete if the organization answered 'Yes'	to Form 99	0, Part IV, line	7		
1 Purpose	(s) of conservation easements held b	y the organization (check all that apply)					
Pre	servation of land for public use (e.g., i	ecreation or pleasure) Preservation of	of an historica	ally important land	area		
Pro	ection of natural habitat	Preservation of	of certified his	storic structure			
Pre	servation of open space	-					
2 Comple	te lines 2a through 2d if the organizate	on held a qualified conservation contribution in	the form of a	a conservation ease	ement on the		
<u>last day</u>	of the tax year						
				Held at the End of	the Year		
a Total nu	mber of conservation easements		2a				
b Total ac	reage restricted by conservation ease	ments	2b				
c Number	of conservation easements on a certi	fied historic structure included in (a)	2c				
	of conservation easements included		2d				
		transferred, released, extinguished, or terminal		ganization during th	ne tax		
vear ►	·			3			
•	of states where property subject to co	onservation easement is located ►	_				
5 Does th	e organization have a written policy re	garding the periodic monitoring, inspection, hai	ndling of viola		□ .		
6 Staff an	orcement of the conservation easeme d volunteer hours devoted to monitori he year ►	nt it noids? ng, inspecting, and enforcing conservation ease	ements	Yes	∐ No		
7 Amount	-	nspecting, and enforcing conservation easemen	ts \$		_		
8 Does ea	•	n line 2(d) above satisfy the requirements of se	ction -	☐ Yes	— □ No		
				<u></u>	لبا		
ınclude,	 if applicable, the text of the footnote ation easements 	s conservation easements in its revenue and expent to the organization's financial statements that d	se statement, lescribes the	and balance sheet, organization's acco	and ounting for		
Part III O	rganizations Maintaining Colle omplete if the organization ans	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Sim 8.	nilar Assets			
treasure		r SFAS 116, not to report in its revenue stateme lic exhibition, education, or research in furthera ents that describes these items					
treasure		r SFAS 116, to report in its revenue statement a lic exhibition, education, or research in furthera					
(i) Rev	enues included in Form 990, Part VIII	, line 1		- \$			
(ii) Ass	ets included in Form 990, Part X			► \$			
	ganization received or held works of a s required to be reported under SFAS	irt, historical treasures, or other similar assets f 116 relating to these items	or financial g	gain, provide the fol	lowing		
a Revenu	es included in Form 990, Part VIII, line	e 1		► \$			
b Assets	ncluded in Form 990, Part X			► \$			

								•	
Schedule D (Form 990) 2009 CONS	TRUCTION :	ADVANC	EMENT PR	OGRA	M OF	31.	-1212701		Page 2
Part III Organizations Mainta									
3 Using the organization's acquisitionistic states (check all that apply)		-						_	
a Public exhibition			d Loan	or ex	change programs	•			
b Scholarly research			e Other		3-13				
c Preservation for future gener	ations		لسا						
4 Provide a description of the orga Part XIV		ections an	nd explain ho	w the	y further the orga	inization's exempt	purpose in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to t	be mainta	iined as part	of the	organization's co	ollection?	Ye		No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangement on Form	ents Co 1 990, P	mplete if o	orgar 21	nization answe	ered 'Yes' to Fo	rm 990, P	art IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian	n, or other	ıntermediar	y for c	ontributions or of	ther assets not			
b If 'Yes,' explain the arrangement	ın Part XIV ar	nd comple	ete the follow	una ta	hle		∐ Ye	S	No
an in the analogement	,	ia compie	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mig to	5.0		Amou		
c Beginning balance						1c	711100		
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance						1 f			-
2a Did the organization include an a	mount on Form	m 990. Pa	art X. line 21	?		L	Ye	S	No
b If 'Yes,' explain the arrangement			,,					ا ا	
Part V Endowment Funds Co		ganızatı	on answer	red 'Y	es' to Form 9	90. Part IV. line	e 10.		
	(a) Current y	1	(b) Prior yea		(c) Two years bad) Four yea	rs back
1 a Beginning of year balance					· · · · · · · · · · · · · · · · · · ·		,,,,	,	
b Contributions			~						
c Net Investment earnings, gains, and losses			_						
d Grants or scholarships							<u>-</u>		
Other expenditures for facilities and programs								`	
f Administrative expenses		<u> </u>							
g End of year balance	·—-								
2 Provide the estimated percentage	e of the year e	nd baland	e held as						<u> </u>
a Board designated or guasi-endow	•	50.0	8						
b Permanent endowment	**************************************	 .	`						
c Term endowment ►	 ₹								
3a Are there endowment funds not a organization by		on of the	organization	that a	are held and adm	inistered for the		Vaa	l Na
(i) unrelated organizations							200	Yes	No
(ii) related organizations							3a(i)		+
b If 'Yes' to 3a(ii), are the related of	organizations li	stad as re	anured on S	chadu	la D?		3a(ii) 3b	' 	+
4 Describe in Part XIV the intended							30		
Part VI Investments—Land, B	uildings an	d Fauir	ment Se	e For	m 990 Part X	line 10			
Description of investment		a) Cost or	other basis	(b)	Cost or other pasis (other)	(c) Accumulate Depreciation	d (d)	Book V	 ′alue
1a Land	-	,		:		2 oprodiation			
b Buildings	<u> </u>								
c Leasehold improvements	<u> </u>								
d Equipment	<u> </u>						-		

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Schedule **D** (Form 990) 2009

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

e Other

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Schedule D (Form 990) 2009 CONSTRUCTION ADVAI	NCEMENT PROGRAM O	F 31-1212701 Pa	ge 3
Part VII Investments-Other Securities See Fo	orm 990, Part X, line	12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other			
Total (Column (b) must equal Form 990 Part X, col (B) line 12.)	000 D 1 V 1	10)	-
Part VIII Investments-Program Related (See			
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		Cost of chid of year market value	
			
		· · · · · · · · · · · · · · · · · · ·	
	`		
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)		,	
Part IX Other Assets (See Form 990, Part X,	line 15) N/A		
(a) De	scription	(b) Book value	,
	· · · · · · · · · · · · · · · · · · ·		
			
Total. (Column (b) must equal Form 990, Part X, col (B), In		<u> </u>	
Part X Other Liabilities (See Form 990, Part	· · · · · · · · · · · · · · · · · · ·		 ,
(a) Description of Liability	(b) Amount	-	1
Federal Income Taxes	206 250		į
DUE TO AGCI	206,250.	-	
			į
		-	
		-[Ì
		-	(
	 	4	
		-	Ì
		-{	
		-	ļ
	200 000	-	į
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	206,250.	<u> </u>	
2. FIN 48 Footnote In Part XIV, provide the text of the foot for uncertain tax positions under FIN 48	note to the organization's	rinancial statements that reports the organization's liab	ollity

<u>Sc</u> he	edule D (Form 990) 2009 CONSTRUCTION ADVANCEMENT PROGRAM OF	31-1212701	Page 4
	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	ts	
1	Total revenue (Form 990, Part VIII,column (A), line 12)		562,360.
2	Total expenses (Form 990, Part IX, column (A), line 25).		654,744.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-92,384.
4	Net unrealized gains (losses) on investments		92,176.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
0			92,176.
10	Total adjustments (net) Add lines 4 through 8		-208.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	ny Boturn	-208.
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Keturn	CE4 526
1	Total revenue, gains, and other support per audited financial statements		654,536.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments 2a 92,1	.76.	
ŧ	Donated services and use of facilities 2b		
•	Recoveries of prior year grants		
(d Other (Describe in Part XIV)		
•	Add lines 2a through 2d	2e	92,176.
3	Subtract line 2e from line 1	3	562,360.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
`.	Investments expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b		
_		4c	FC2 360
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		562,360.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	CEA 744
_	Total expenses and losses per audited financial statements	1-1	654,744.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
ā	a Donated services and use of facilities 2a		
ł	Prior year adjustments 2b		
(Other losses 2c		
•	d Other (Describe in Part XIV)		
•	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	654,744.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
٠,	Investments expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV)		
	C Add lines 4a and 4b	4c	CEA 744
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	654,744.
Pai	t XIV Supplemental Information		
line -	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete the mation.	nis part to provide a	ny additional
BAA	TEEA3304L 02/02/10	Schedule D (F	form 990) 2009

Schedule D (Form 990) 2009 CONSTR	UCTION ADVANCEMENT	PROGRAM OF	31-3	1212701	Page 5
Part XIV Supplemental Informa	tion (continued)				
•					
				- 	
		-			
					_
					
				-	- -
					- -
				-	-
					
		-			
					-
-	· - 				
	·			- 	
				- 	- -
		_		·	-

TEEA3305L 07/10/09

Schedule **D** (Form 990) 2009

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990. P See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

(F)
Direct controlling
entity (F)
Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) N/A N/A Employer identification number 31-1212701 (E)
Public charity status
(if section 501(c)(3)) (E) End-of-year assets Identification of Disregarded Entities (Complete If the organization answered 'Yes' to Form 990, Part IV, line 33.) (D) Exempt Code section (**D)** Total income 501 (C) (6) 501(C)(6) (C) Legal domicile (state or foreign country) Legal domicile (state or foreign country) NI ZI ASSOCIATION ASSOCIATION (B) Primary activity Primary activity TRADE TRADE TRADE INC. CONSTRUCTION ADVANCEMENT PROGRAM OF CENTRAL IN., Name, address, and EIN of related organization ICA (A) Name, address, and EIN of disregarded entity ij INDIANA CONSTRUCTION ASSOCIATION HIGHWAY, HEAVY AND UTILITY DIV ONE NORTH CAPITOL AVENUE #1000 ONE NORTH CAPITOL AVENUE #1000 #1000 ONE NORTH CAPITOL AVENUE - ICA, INDIANAPOLIS, IN 46204 INDIANAPOLIS, IN 46204 INDIANAPOLIS, IN 46204 BUILDING DIVISION 1 Name of the organization 1 35-0409770 20-5329171 Parti Part II

Schedule R (Form 990) (2009)

TEEA5001L 02/05/10

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

N/A

501 (C) (6)

Z

ASSOCIATION

35-0906766

INC. Schedule R (Form 990) 2009 CONSTRUCTION ADVANCEMENT PROGRAM OF CENTRAL IN.,

Page 2.

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

		General or	er 2		8			!				
	<u>ਤ</u>	Gener	partn		Yes	 	 			 		
	€. (3)	Code V-UBI	20 of Schedule	Y	(Form 1065)		 					 -
	_	opor- ate	10ns ²		No		 					
	£	Lispropor-	allocat		Yes				-			
al · /	(9)	Share of end-of-year assets										
because it tian offer of those related organizations are as a partitle strip during the tax year.)	Ē	Share of total income Share of end-of-year				-						
כח מז מ למו ווכו אוו	(F)	Predominant income (related	unrelated, excluded	from tax under	sections 512-514)							
אוובמווטווא נוכמו	ē,		6									
מוכת סול	ව	Legal	(state or	foreign	country)							
חום חווחום נכו	(B)	Primary Activity										
Decause it lian	(A)	Name, address, and EIN of related organization				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	axable as a Cor	poration or Trust (C treated as a corpor	Complete if ation or tru	the organiz	ation answered 'Ye tax year.)	es' to Form 990, Pa	rt IV,
(A) Name, address, and EIN of related organization	(B) Primary Activity	(B) (C) (D) (D) Type of entity (C) corp, S corp, country) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(b) Direct Iling entity (C	(E) ype of entity corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
		-					
1							

Schedule **R** (Form 990) (2009)

TEEA5002L 02/05/10

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31-1212701

Schedule R (Form 990) 2009 CONSTRUCTION ADVANCEMENT PROGRAM OF CENTRAL IN., INC.

31-121

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

Note Complete	Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	ŝ
1 During the tax	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			
a Receipt of (i) in	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		×
b Gift, grant, or c	b Gift, grant, or capital contribution to other organization(s)	1 b		×
c Gift, grant, or o	c Gift, grant, or capital contribution from other organization(s)	1c		×
d Loans or loan	d Loans or loan guarantees to or for other organization(s)	1 d		×
e Loans or loan	Loans or loan guarantees by other organization(s)	1e		×
f Sale of assets	Sale of assets to other organization(s)	11		×
g Purchase of as	Purchase of assets from other organization(s)	ηg		×
	sets	1 1		×
i Lease of facilit	Lease of facilities, equipment, or other assets to other organization(s)	=		×
i Lease of facilit	l base of facilities equinoment or other accets from other organization(s)	-		>
k Performance o	Lease of facilities, equipment, or other assets from other organization(s). Performance of services or membership or fundraising solicitations for other organization(s).	ř		∢∣≍
I Performance o	Performance of services or membership or fundraising solicitations by other organization(s)	=		×
m Sharing of faci	m Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n Sharing of paid employees	employees	-l		×
Reimhirsemen	• Reimbilicement paid to other organization for expenses	,	×	į
		2		;
p Reimbursemen	p Reimbursement paid by other organization for expenses	- -		×
q Other transfer	q Other transfer of cash or property to other organization(s)	1		×
r Other transfer	Other transfer of cash or property from other organization(s)	1		×
2 If the answer to	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	sp		
	(B) Name of other organization type (a-r)	(C) Amount involved	(C) It involve	و ا
(1) INDIANA CONS	INDIANA CONSTRUCTION ASSOCIATION		576,500	00
(2) BUILDING DIVISION -	ISION - ICA, INC.		70,000	.000
(3)				
(4)				
(5)				
(9)				
ВАА	TEEA5003L 02/05/10 Schedule R (Form 990) (2009)	₹ (Form	2) (066	8

Page 4

31-1212701 Part VI Unrelated Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 37.) Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross

Yes No Schedule K.	(B) (C) (D) (E) (F) (F) (F) (G) (B) (F) (G) (F) (F) (G) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(B) Primary activity	(C) Legal domicile (State or foreign	(D) Are all partners section	(E) Share of end-of-year	(F) Dispropor-	Code V-UBI amount	(H) General or	al or
According to the control of the co				501(c)(3) organizations?	C D C C C C C C C C C C C C C C C C C C	allocations?	Schedule K-1 Form (1065)	partr	igra Jer 2
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TECHOOM: 02007/0		···		-					
TEMONON (2000)									
TEMOOR (00001)									
TEMORAL DOUGSTO		T				•			
TEMOROL DOUGSTO									
TEASON, 0205010									
TEPSOOM, 0005/10									
TEPSOOM, 0005710									
TERSORAL (2005)10									
TECKSOOQUE DOUGS/10									
TECHSORAL 0206710									
TECASOO4, 0205/10									
TEEASON4. 02/05/10									
TEEASOO4L 0205/10									
TEEASOAL 02/05/10									
TEEA5004L 02/05/10									
TEEA5004L 02/05/10									
TEEASGOAL 02/05/10									
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TEEA5004L 02/05/10		<u> </u>							
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Name of the organization CONSTRUCTION ADVANCEMENT PROGRAM OF	Employer identification number
CENTRAL IN., INC.	31-1212701
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
	TIME FORM OOG PROVIDED MO
DRAFT_FORM_990_PROVIDED_TO_MANAGEMENT_FOR_THEIR_REVIEWF	INAL FORM 990 PROVIDED 10
BOARD FOR THEIR REVIEW.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLIC	CLY AVAILABLE
MADE AVAILABLE UPON VERBAL OR WRITTEN REQUEST TO OFFICE.	
	
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		990) 2009				Page 2
		CONSTRUCTION CENTRAL IN.,	ADVANCEMENT	PROGRAM OF	Employer identification number 31-1212701	
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