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# **€**Form 990-EZ

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public Inspection

OMB No 1545-1150

2009

Department of the Treasury Internal Revenue Service

04/01/09 03/31/10 For the 2009 calendar year, or tax year beginning . and ending Check if applicable Please C Name of organization **Employer identification number** use IRS Address change label or Missouri Asphalt Pavement Associati 43-1550605 Name change print or Number and street (or P O box, if mail is not delivered to street address) Telephone number Initial return type. Room/suite 573-635-6071 1221 Jefferson Street Termination Specific City or town, state or country, and ZIP + 4 Group Exemption Amended return Instruc-Jefferson City MO 65110 Number Application pending • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach Cash X Accrual Accounting method a completed Schedule A (Form 990 or 990-EZ). Other (specify) N/A Website: Check required to attach Schedule B (Form 990, 990-EZ, or 990-PF) if the organization is not **X** 501(c) ( 6 ) **◄** (insert no ) 4947(a)(1) or 527 Tax-exempt status (check only one) if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return 348,205 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 1 72,960 2 Program service revenue including government fees and contracts 2 See Statement 1 274,580 3 3 Membership dues and assessments 504 4 4 Investment income 5a Gross amount from sale of assets other than inventory 5a 5b b Less cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here of contributions Gross revenue (not including \$ reported on line 1) Less direct expenses other than fundraising expenses 6b Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c Gross sales of inventory, less returns and allowances 7a 7a 7b b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) C 7c ₩. 161 Other revenue (describe See Statement 2 8 29 348,205 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 **20** 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members RECEIVED **௴**2 160,462 12 Salaries, other compensation, and employee benefits 29,515 13 Professional fees and other payments to independent contractors 13 AUG 0 6 2010 14 Occupancy, rent, utilities, and maintenance 14 18,813 15 Printing, publications, postage, and shipping 15 Other expenses (describe > See Statement 3 127,167 16 16 ) 335,957 17 17 Total expenses. Add lines 10 through 16 12,248 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 226,803 19 end-of-year figure reported on prior year's return) 20 20 Other changes in net assets or fund balances (attach explanation) 239,051 21 Net assets or fund balances at end of year Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ (A) Beginning of year (B) End of year (See the instructions for Part II) 207,829 22 Cash, savings, and investments 193,000 22 23 23 Land and buildings 36,423 34,710 See Statement 4 24 24 Other assets (describe 229,423 242,539 25 25 Total assets 3,4<del>88</del> 2,620 See Statement 5 26 26 Total liabilities (describe 239,051

Form 990-EZ (2009)

226,803

27

27 Net assets or fund balances (line 27 of column (B) must agree with line 21) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	<u>alt Pavement A</u>					Page		
Part III ' Statement of Program Ser	vice Accomplishments	(See the instruc	tions for Part I	1.)	Ex	penses		
What is the organization's primary exempt purpose	?				(Required	for section		
Promote use of asphalt					501(c)(3) and 501(c)(4)			
Describe what was achieved in carrying out the org					organizations and section			
manner, describe the services provided, the number		4947(a)(1)	trusts, optional					
each program title					for others	)		
28 Dissemination of information to p	romote use of ashphalt	:		İ				
				,		224 226		
<u> </u>	mount includes foreign grants,	, check here	<u> </u>	28	a	334,030		
29								
			_	႕				
	nount includes foreign grants,	, check here		29	<u>a  </u>			
30								
(County D		ahaak hara	<b>.</b>	٠, ١				
	nount includes foreign grants	, check here		30	<u>a                                     </u>			
31 Other program services (attach schedule)	mount includes foreign grants	abook boro		$\Box$				
<u> </u>	nount includes foreign grants.	, cneck nere		<b>31</b> → 32		334,030		
32 Total program service expenses (add lines 28 Part IV List of Officers, Directors, Truste		and one even if not	companyated (Sec					
Fait iv List of Officers, Directors, Truste	es, and Key Employees. List	(b) Title and average			tributions to	(e) Expense		
(a) Name and addre	ess	hours per week devoted to position	(If not paid, enter -0)		penefit plans & compensation	account and other allowances		
David Yates	Jefferson City	Exec Dir	enter-oj	deletted 0	ompensauon	Other allowances		
1221 Jefferson Street	MO 65110	40.00	100,500		اه	,		
Brady Meldrem	Ottumwa	President	100,300			`		
PO Box 695	IA 52501	1.00	٥		0	(		
Jeff Bross	Hannibal	Vice Pres						
PO Box 430	MO 63401	1.00	٥		o	(		
Phil Hocher	St. Louis	Sec/Treas						
1620 Woodson Road	MO 63114	1.00	o		o	(		
Tom Held	Fenton	Director		·				
One Fabick Drive	MO 63026	1.00	۰ ا		0	(		
Kyle Phillips	St. Joseph	Director						
PO Box 1089	MO 64502	1.00	0		. 0			
John View III	Springfield	Director						
3003 E Chestnut Expressway, Ste 1200	мо 65802	1.00	0		0			
Keith Davenport	Kansas City	Director						
PO Box 9669	MO 64134	1.00	0		0			
Jerry Bushelman	Cape Girardeau	Director						
PO Box 880	MO 63702	1.00	0		0	(		
Bart Holmes	St. Louis	Director						
7345 Watson Road, Ste 202B	MO 63119	1.00	0		0			
David Guillaume	Overland Park	Director						
7355 W 162nd Terrace	KS 66283	1.00	0	<u> </u>	0	•		
Phil Hutchens	Cassville	Director						
1007 Main Street	MO 65625	1.00	0	<u> </u>	0			
Konn Wilson	Maryland Heights	Director	_					
PO Box 2501	MO 63043	1.00	0	<u> </u>	0			
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		<del></del>	<del>                                     </del>	<u> </u>		<del>                                     </del>		
			]					
		<del></del>						
		<del></del>	<del>                                     </del>	<del> </del>				

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Form **990-EZ** (2009)

				Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed				
	description of each activity		33		<u> </u>
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of the changes		34		x
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not r	eported			
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T				
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section				
	6033(e) notice, reporting, and proxy tax requirements?		35a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b	X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets				
	during the year? If "Yes," complete applicable parts of Schedule N		36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr		_		
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	•			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?		38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		_		
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9		_		
b	Gross receipts, included on line 9, for public use of club facilities		_		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				
	section 4911 ▶, section 4912 ▶, section 4955 ▶				
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	t			
	transaction during the year or is it 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		40b		ļ
C	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on				
	organization managers or disqualified persons during the year under sections 4912,				
	4955, and 4958 ►				
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c				
	reimbursed by the organization				
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		<u> </u>		<u> </u>
	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed None				
42a	1221 Jefferson St	•	3-63	5-6	071
_	Located at ▶ Jefferson City, MO	ZIP+4 ▶ 65	5110		
þ	At any time during the calendar year, did the organization have an interest in or a signature or other authority			r	T
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		[,-:	Yes	No
	account)?		42b		X
	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.				
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		42c		X
	If "Yes," enter the name of the foreign country		_		_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	, ,			
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43			
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			1	
	E				1 Y
4.5	Form 990-EZ		44	<del> </del>	X
45	Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		45		X

Name(s) shown on return

(Including Information on Listed Property)

**Depreciation and Amortization** 

OMB No 1545-0172

Identifying number

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No

	Missour	ri Asphalt	Pavement Ass	sociati			43-	<u> 155</u>	0605
	ess or activity to which this form relates ndirect Depreciat:	i on							
			perty Under Section	179					
			rty, complete Part V		u comp	lete Pa	art I.	_	
1	Maximum amount See the instruc	tions for a higher lim	nit for certain businesses					11	250,000
2	Total cost of section 179 property	placed in service (se	ee instructions)					2	
3	Threshold cost of section 179 prop	•	•	ctions)				3	800,000
4	Reduction in limitation Subtract lii		•					4	
_5	Dollar limitation for tax year Subtract lin							5	
<u>6</u>	(a) Description	n of property	(b) Co	st (business us	e only)	(c) E	lected cost		
	Listed property Enter the amount	from line 20			7				
7 8	Listed property Enter the amount Total elected cost of section 179 p		te in column (c) lines 6 a	nd 7				8	
9	Tentative deduction Enter the sm			iiu r				9	
10	Carryover of disallowed deduction							10	
11	Business income limitation Enter	•		zero) or line	5 (see in:	struction	s)	11	
12	Section 179 expense deduction A		•	•				12	
13	Carryover of disallowed deduction	•		•	13				
Note	: Do not use Part II or Part III below	for listed property	nstead, use Part V	•					
Pa	rt II Special Depreciati	ion Allowance a	nd Other Deprecia	tion (Do no	ot inclu	de liste	ed prope	erty.)	(See instr.)
14	Special depreciation allowance for	qualified property (d	other than listed property)	placed in ser	vice				
	during the tax year (see instruction	าร)						14	
15	Property subject to section 168(f)(	1) election						15	
16	Other depreciation (including ACR			(0 : 1				16	405
<u>Pa</u>	rt III MACRS Depreciat	ion (Do not incl	ude listed property.	(See instr	uctions	S.)			
	MAGDO 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		Section A					4-	0
17	MACRS deductions for assets pla					h1. h	$\mathbf{L}$	17	U
<u>18</u>	If you are electing to group any assets p		rvice During 2009 Tax Y					stem	
		(b) Month and year	(c) Basis for depreciation	(d) Recovery	1		<u>-</u>		
	(a) Classification of property	placed in service	(business/investment use only–see instructions)	period	(e) ·Con	vention	(f) Meth	nod	(g) Depreciation deduction
<u>19a</u>	3-year property	-							
b	5-year property	-					<del>-</del>		
<del>_</del>	7-year property	1		.	-				
	10-year property	1		-		<del></del>	<del></del>		· · · · · · · · · · · · · · · · · · ·
<del>_</del>	15-year property 20-year property	1			<del> </del>				
<del>_</del>	25-year property	1		25 yrs		1	S/L		
<u>s</u>	Residential rental			27 5 yrs	М	м	S/L		
	property			27 5 yrs		M	S/L		_
i	Nonresidential real			39 yrs	1	М	S/L		
	property				M	M_	S/L		
	Section C—As	ssets Placed in Ser	vice During 2009 Tax Ye	ar Using the	Alternati	ve Depr	eciation S	Syster	n
<u>20a</u>	Class life						S/L		
b	12-year			12 yrs	<u> </u>		S/L		
	40-year	<u> </u>		40 yrs	<u> </u>	M	S/L		
	irt IV Summary (See ins							_	4 885
21	Listed property Enter amount from							21	1,775
22	Total. Add amounts from line 12,	=		-		r here			2 100
22	and on the appropriate lines of your	· ·			s [ T			22	2,180
23	For assets shown above and plac portion of the basis attributable to	<del>=</del>	me current year, enter the	3	23				
	portion of the basis attributable to	SECTION ZOOM COSTS			23				1700

P	art V .	property use	erty (Include ed for entertai ehicle for which y ) through (c) of S	nment, re	ecreation of the state	on, or	amuse	ement.	) eductina	lease e	•	·		•	ers, an	d
			—Depreciation								nits for p	assenge	r auton	nobiles)		
24a	Do you h	ave evidence to supp	ort the business/inv	estment use	claimed?	7	Yes	No	24b	If "Yes,	" is the e	vidence	written	?	X Yes	N
	(a) of property t vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or bas	other		(e) is for depi siness/inv use onl	estment	(f) Recover period	·	(g) Method/ onvention		(h) Deprecia deducti		Elected	i) I section cost
25	Special	depreciation allow	ance for qualified	l listed prop	erty plac	ed in se	ervice du	ring the								
		and used more th				see inst	ructions	)	<u></u>		2:	5			L	
26		v used more than 5	50% in a qualified I	business (	use			-		$\overline{}$		Т	<del></del>		ī	
			100.00%	4	1,20	o	41	,200	5.	0 20	ODBM	ığ	1	.,775		
			%													
27	Property	y used 50% or less	ın a qualified bu	siness use												
											_					
	-		%			<del> </del>				S/	L.·	_			-	
			اره ا							S/I	l <u>-</u>					
28	Add am	ounts in column (h	) lines 25 throug	ıh 27 Enter	here an	d on line	e 21 nac	ne 1	L		2	R	1	,775	1	
29		ounts in column (i)	•				o 2. 1, paş	,				<u>-</u>		29		
		,					ation on	Use of	Vehicles					· •	•	•
		section for vehicle es, first answer the qu										n If you	provide	ed vehicle	es	
30	Total bu	ısıness/ınvestment	miles driven		(	a)	(	b)	(	;)	(	(d) (e)		(e) (f)		f)
	during t	he year ( <mark>do not</mark> ind	clude		Veh	cle 1	Veh	ıcle 2	Veh	cle 3	Veh	ıcle 4	Ve	hicle 5	Veh	icle 6
		ting miles)			ļ		<b>-</b>		ļ		<b>1</b>				<u> </u>	
31		mmuting miles driv	• •						1		<del>                                     </del>					
32		her personal (nonc	•	driven							+				-	
33		iles driven during ti through 32	ne year Add													
34		e vehicle available	for personal		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
-		ing off-duty hours?	•		1.55				1,44		1		1.00	1	1	
35		vehicle used prim														
	more th	an 5% owner or re	lated person?				<u> </u>								<u> </u>	
36	Is anoth	ier vehicle availabl	e for personal us	e?							<u></u>	<u>[</u>				
			Section C-Que	estions for	Employ	ers Who	o Provid	e Vehicl	es for U	se by T	heir Em	ployees				
		questions to deter	-	•	on to cor	npleting	Section	B for ve	hicles u	sed by e	employe	es who a	re not			
		owners or related	<del></del>			<del></del>									1	T
37	-	maintain a written	policy statement	that prohib	its all pe	rsonal u	ise of vei	nicles, in	cluding	commu	ting, by				Yes	No
38	•	iployees? maintain a written	nolicy statement	that prohib	ite neren	nal usa	of vehicl	es eve	nt comp	autina k	OV VOUE					
50	-	ees? See the instru	•	•	•				•							
39		treat all use of veh		-	•		0, 000.	,	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
40	Do you	provide more than	five vehicles to y	our employ	ees, obt	aın ınfoi	rmation f	rom you	r employ	ees ab	out the					
	use of t	he vehicles, and re	etain the informat	ion received	<b>d</b> ?											
41		meet the requirem	-	-				-		-						
		your answer to 37		1 is "Yes," o	do not co	mplete	Section	B for the	covere	d vehicle	es				ł	
	art VI	<u>Amortizatio</u>	<u>n</u>			<del></del>		<u> </u>				(e)	I			
		(a) Description of costs	s	(b Date amo beg	ortization			(c) ortizable mount			i) ode tion	Amortiza period percent	ation or	Amortiza	(f) ation for th	nis year
42	Amortiz	ation of costs that	begins during vo	ur 2009 tax	year (se	e instru	ictions)						I	·		
			<u> </u>		<u> </u>			_		-		-	T			
43		ation of costs that	-		•								43			
44	Total. A	dd amounts in col	umn (f) See the	instructions	for whe	re to rep	oort						44			

### **Federal Statements**

#### Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

Description		Amount
Dues & assessments MAIAP Assessments	\$	226,952 47,628
Total	\$_	274,580

#### Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description	<u></u> _	<u>mount</u>
Refunds & reimbursements	\$	161
Total	\$	161

#### Statement 3 - Form 990-EZ, Part I, Line 16 - Other Expenses

Amount
\$
2,074
15,030
17,802
57,867
1,644
6,173
1,381
55
15,100
2,926
107
63
260
15
4,567
2,103
\$ 127,167

#### Statement 4 - Form 990-EZ, Part II, Line 24 - Other Assets

Description		eginning of Year	 End of Year
Inventories for Sale or Use Prepaid Expenses and Deferred Charges	\$	2,044 947 60,253	\$ 2,044 863 60,803
Less Accumulated Depreciation Rounding	<del></del>	26,813 -8	 28,993 -7
		36,423	 34,710

43-4550605

## **Federal Statements**

#### Statement 5 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year			
Accounts Payable and Accrued Expenses	\$2,620	\$ 3,488			
	2,620	3,488			