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Form **990**

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047

Open to Public/Inspection

| | For t | he 2009 calend | dar year, o | or tax year b | eginning | <u>Jul 1</u> | | <u>, 2009, a</u> | ınd endin | g Jun | 30 | | , 2010 | |
|---|----------|-------------------------------|-------------------------|------------------|--|-----------------|---|------------------|---------------|----------------|---------------------------------------|---|--------------------------------------|---------------|
| В | Check | if applicable | | C Name of o | rganization | | | | | | D Employ | er iden | tification Num | ber |
| | | ddress change | Please use IRS label | TEXAS C | ONSTRU | CTION A | ASSOCIATI | ON | | | 74- | 2885 | 694 | |
| | \vdash | ame change | or print or type. | | | | l is not delivered to | |) Room/s | uite | E Telepho | | | |
| | | - | See | | | | | | 330 | | 1 | | 173-377 | 3 |
| | | itial return | specific Instruc- | 1011 SA | | NIO PL | <u> </u> | State 3 | ZIP çode + 4 | | \'J_T | <i>2 </i> | 173-377. | |
| | ₽™ | ermination | tions. | 1 | or country | | | | • | • | | | | 000 |
| | L A | mended return | | AUSTIN | | | | TX | 78701 | | G Gross r | | | 086. |
| | | pplication pending | F Name a | and address of p | rincipal officei | • | | | | | a group retui | | filiates? | Yes X No |
| | | | RAYMON | DRISK 602 | 2 W. 13TH | STREET A | AUSTIN | TX | <u> 78701</u> | | ll affiliates inc .' attach a list | | structions) | Yes No |
| ı | Tax | c-exempt statu | ıs 🛛 501 | (c) (6 |)◄ (inse | rt no) | 4947(a)(1 | or 🗍 | 527 | " ''' | ottaon a not | (300 111 | 34 400001107 | |
| J | We | bsite: ► WW | W.TEXC | CON.ORG | | | | | | H(c) Group | exemption n | umber ^I | > | |
| ĸ | Forn | n of organization | X Corpora | | t Asso | ciation | Other ► | L Ye | ar of Forma | | | | legal domicile | TX |
| | | Summa | | | <u>: </u> | | | , | | | | | | |
| <u>, «</u> | 1 | | | anization's | mission or | most siani | ficant activities | EDU | JCATIO | N AND | ADVOCA | CY F | OR CONS' | TRUCTION |
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| Activities & Governance | | | | | | | | | | | | | | |
| r. | | | | | | | | | | | | | . – – – – | |
| ē. | 2 | Check this bo | ~~ □ □ | of the organi | zation disc | ontinued i | ts operations o | r disnose | ed of mor | e than 25 | | | | |
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| 8 | 4 | | | | | | g body (Part V | I. line 1b | . | | | 4 | 16 | |
| <u> </u> | 5 | Total number | | _ | | o govo | g coup (i air v | , | • | • • • • | | 5 | 3 | |
| Ě | 6 | Total number | | | | sarv) | _ | | | • | | 6 | 25 | |
| Ac | | | | | | | column (C), ıne | 12 | | | | 7 a | | 24,000. |
| | | Net unrelated | | | | | | | | | | 7 b | | 783. |
| ⊇ | | THOSE GITT GRACEGO | . Duomooc | taxasis iiis | | 0 | ., | | _ | | Prior Year | | | ent Year |
| 70 III | | Cantributions | and aran | to (Dort VIII | luno 1h\ | | | | | | rior rear | | Curre | iii rear |
| , e | 8 | Contributions | _ | | | | | | | | 347,3 | 61 | | 366,467. |
| Revenue | 9 | Program serv Investment in | | | | | d 7d\ | | | | 30,0 | | | 11,730. |
| Re & | 10 | | | | | | | | • • | | 762,2 | | | 432,889. |
| ן ר | 11 | | | | - | | , 10c, and 11e) | | 12) | 1 | 1,139,4 | | | 311,086. |
| <u> </u> | 12 | | | | | | t VIII, column | A), iiie | 12) | - | 1,135, | 130. | | 50,000. |
| נ | 13 | Grants and si | | | | | | • | • • | | | | | 50,000. |
| <u> </u> | 14 | Benefits paid | | = | | | | • | | | 346,729. | | | |
| 9 | 15 | Salaries, other | er comper | nsation, emp | loyee bene | efits (Part I | X, column (A), | lines 5- | 10) | ļ | | | | 393,311. |
| Expenses | 16 a | Professional | fundraisin | ng fees (Part | IX, column | n (A), line | 11e) | | | L. | | | | |
| ֓֞֞֞֓֓֓֓֓֓֓֟֟֓֓֓֓֟֟֓֓֓֓֟֟֓֓֓֓֓֓֓֟֓֓֓֟֓֓ | ь | Total fundrais | sına exper | nses (Part I) | C. column (| D), line 25 | () > | | | 1430 | | | | 2090 |
| D 0 | | Other expens | | - | | | | | | | 409, | | | 439,660. |
| | | Total expens | Add I | non 12 17 (n | ny, illies i i | Doct IV | lump (A) lung | 251 | | ` | 755, | | | 382,971. |
| | 18 | Total expense | es Auu III | nes 13-17 (11 | ilust equal | | EIVED ine | 23) | • | | | | | |
| _ | 19 | Revenue less | expense | s Subtract I | ine latron | i line 12 | | 잃 | | - | 383, | | | -71,885. |
| Net Assets or Fund Balancos | | | | | | 11011 | | | | | inning of \ | | | of Year |
| 200 | 20 | Total assets | - | | 8 | NOV | 2 2 <u>2</u> 010 | 3 | • | | 1,380, <u>9</u> | 976. | 1,3 | 309,091. |
| ₹ Ā | 21 | Total liabilitie | s (Part X | , line 26) | 1. | | | % | | | | | | |
| ž2 | 22 | Net assets or | fund bala | ances. Subtr | act line 21 | from line | 20 NI LIT | | | | 1,380,9 | 976. | 1,3 | 309,091. |
| Pa | irt II. | Signati | ure Blo | ck | | 000 | L14, 01 | | | | | | | |
| | | Under penaltie | es d'Oeriury. | I declare that I | have examine | d this return, | including accompar) is based on all inf | ving sched | ules and sta | tements, an | d to the best | of my kr | nowledge and b | belief, it is |
| | | true, correct, a | | e Peckeration of | preparer (other | er than officer |) is based on all inf | ormation of | winch prep | arer nas any | , knowledge | | | |
| Sig | ın | ▶ | KIK | sellh | | | | | | | 160 | 400 | 2010 | |
| He | re | Signature | of officer | | | | | | | | ate | | | |
| | | ► K _n | | o Kisk | Pres | r He | . | | | | | | | |
| | | Type or pr | rint name an | • • • | , , , , , | ACAP (C) | | · | | | | | | |
| | | | | | | | | Da | ıte | Τ. | Charled | TF | reparer's ident | ufving number |
| Pa | : A | | | ()t | Λ . | ^ | | | | [: | Check if self- | | Preparer's ident see instruction: | 5) |
| Pre | | Preparer's | | | 100 | () _ | CPA | | | | employed P | X | | |
| | rer's | signature | | 190 | <u>2-11</u> | | _, | 11 | 1/08/1 | .0 | | | _ | |
| Us | | Firm's name (| or <u>All</u> | man and | Associ | ates | | | | | | | | |
| On | | yours if self- employed), | ▶ 960 | 0 Great | Hills | Trail, | Suite 15 | OW | | | EIN <u></u> | | | |
| | | address, and ZIP + 4 | Aus | tin | | | TX | 78759 |) | | Phone no | (51 | 2) 502- | -3077 |
| May | / the | | | | arer show | n above? (| see instruction | | | ` | | | X Yes | |

| _ | 1 990 (2009) TEXAS CONSTRUCTION ASSOCIATION | 74-2 | 88569 | 4 | ! | age 2 |
|-----|--|---------------|--------------|----------------|-------------------------|---------|
| Pai | rt III Statement of Program Service Accomplishments | | | | | |
| 1 | Briefly describe the organization's mission | | | | | |
| | EDUCATION AND ADVOCACY FOR CONSTRUCTION | | | | | |
| | BUCKLION AND ASYCCACLICAL CONDITION TO THE TOTAL CONDITION TO THE TO | | | | | |
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| 2 | Did the organization undertake any significant program services during the year which were not listed or | the prior | | | | |
| | Form 990 or 990-EZ? | | | Yes | X | No |
| | If 'Yes,' describe these new services on Schedule O. | | | | _ | |
| _ | · | 3 | | V | $\overline{\mathbf{x}}$ | M- |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any-program ser | vices | <u>.</u> | -Yes | | No |
| | If 'Yes,' describe these changes on Schedule O. | | | | | |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services | s by expense | s. Secti | on <u>5</u> 01 | (c)(3) | |
| | and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants an | d allocations | to other | rs, the | total | |
| | expenses, and revenue, if any, for each program service reported | | | | | |
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| | O L Company of the co |) (Davidania | ć | | | |
| 43 | a (Code:) (Expenses \$ including grants of \$ |) (Revenue | ې | | | —, |
| | PROVIDED SERVICES TO MEMBER FIRMS AND 16 ASSOCIATION | | | | | . – – - |
| | MEMBERS TO KEEP THEM INFORMED OF LEGISLATIVE DEVELOPMENTS | | | | | |
| | AND ADVOCATE ON THEIR BEHALF. MEMBERS TOTAL APPROXIMATE | | | | | |
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| 41 | b (Code) (Expenses \$ including grants of \$ |) (Revenue | \$ | | |) |
| | PUBLISHED NEWSLETTERS, ALERTS, AND WEB PAGES FOR EDUCATION | | | | | |
| | OF MEMBERS CONCERNING STATE LAWS THAT AFFECT THEIR | | | | | |
| | COMPANIES AND THE CONSTRUCTION INDUSTRY. | | | | | |
| | COMPANIES AND THE CONSTRUCTION INDUSTRIE | | - | | | |
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| 7 | | | | | | —′ |
| | INCREASED AWARENESS OF TEXAS LEGISLATURE CONCERNING ISSUES | | - | | . — — - | |
| | THAT IMPACT CONTSTRUCTION SUBCONTRACTS AND SUPPLIERS AS | | | | | |
| | WELL AS EDUCATED LEGISLATORS ABOUT THE ROLE OF SUBCONTRACTORS | | | | | |
| | AND SUPPLIERS IN CONSTRUCTION. | | | | | . – – - |
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| 4 | d Other program services (Describe in Schedule O) | | | | | |
| | (Expenses \$ including grants of \$) (Revenue | Ś | | | , | |
| | | Ψ | | | / | |
| | e Total program service expenses > | | | | | |

Form 990 (2009) TEXAS CONSTRUCTION ASSOCIATION

Part IV | Checklist of Required Schedules

| | | | Yes | No |
|-----|---|-----|-----|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A | 1 | | x |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | х_ |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II | - 4 | | - |
| 5 | 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 | |
| 6 | 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, Part I | 6 | | x |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i> | 7_ | | <u>x</u> |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 8 | | <u>x</u> |
| 9 | 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 Schedule D, Part IV | 9 | | x |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V | 10 | | x |
| 11 | Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, IX, or X as applicable | 11 | | X |
| • | 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 16? 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 | | | |
| • | P 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 | | | |
| | 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 | |
| 124 | AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No | | | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X |
| | i Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| | 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 | 14b | | х |
| 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? <i>If 'Yes,' complete Schedule F, Part II</i> | 15 | | x |
| 16 | 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 | | <u>x</u> |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I | 17 | | x |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | | _x_ |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III | 19 | | x |
| 20 | Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H | 20 | l | X |

74-2885694 TEXAS CONSTRUCTION ASSOCIATION Page 4 Form 990 (2009) Part IV Checklist of Required Schedules (continued) No Yes 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 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 Х IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 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 23 X Schedule 1 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, 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 24b **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) 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 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 25b Schedule L, Part I 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 X 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 X 27 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): 28a Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L. Part IV 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 X X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 31 X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Schedule N. Part II Х 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 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 X line 1 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 35 Х

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? 38 Note. All Form 990 filers are required to complete Schedule O

Form 990 (2009)

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38

Statements Regarding Other IRS Filings and Tax Compliance 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 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 Х (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 calendar year ending with or within the year covered by this return 2b X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3а this return? 3Ь X b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X **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 5 a X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b X c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X 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 X deductible? 6 b 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 Х 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 X 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 X 7 f X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g 7 h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 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 9b b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 10 a a Initiation fees and capital contributions included on Part VIII, line 12 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 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

BAA

Form 990 (2009)

Page 6

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.

| Sec | tion A. | Governing Body and Manage | gement | | | | |
|------|--------------------|--|---|---|-------|-------------|-------------|
| | | | | 1 1 | | Yes | No |
| 1 a | Enter the | number of voting members of the g | overning body . | 1a 17 | | _ , [| 4. |
| | | number of voting members that are | • | 16 16 | . , | 4.5 | |
| . 2 | Did any officer, d | fficer, director, trustee, or key emplo rector, trustee or key employee? | byee have a family relationship or a business rel | ationship with any other | 2- | - <u></u> | X |
| 3 | Did the o | ganization delegate control over ma | inagement duties customarily performed by or un byees to a management company or other person | nder the direct supervision | 3 | x | |
| 4 | | | inges to its organizational documents | | 4_ | | X |
| | since the | prior Form 990 was filed? . | | | | | |
| 5 | Did the d | ganization become aware during the | e year of a material diversion of the organization | 's assets? . | 5 | | X |
| 6 | Does the | organization have members or stoc | kholders? | | 6 | Х | |
| 7 a | Does the | organization have members, stockh j body? | olders, or other persons who may elect one or m | nore members of the | 7a | х | |
| b | Are any | lecisions of the governing body subj | ect to approval by members, stockholders, or oth | ner persons? . | 7b | Х | |
| 8 | Did the o | ganization contemporaneously docuing: | iment the meetings held or written actions under | taken during the year by | | , , | |
| а | The gove | rning body? | • | , | 8a | X | |
| b | Each co | nmittee with authority to act on beha | If of the governing body? | | 8ь | X | |
| 9 | Is there | ny officer, director or trustee, or key ion's mailing address? If 'Yes,' prov | employee listed in Part VII, Section A, who can ide the names and addresses in Schedule O | not be reached at the | 9 | | _x_ |
| Sec | tion B. | | equests information about policies not | required by the Internal | ' | | |
| Reve | enue Code |) | | | | | |
| | | | | | | Yes | No |
| | | organization have local chapters, bi | | | 10 a | | X |
| | and brar | ches to ensure their operations are | olicies and procedures governing the activities of consistent with those of the organization? | • | 10b | | |
| | | • | Form 990 to all members of its governing body b | | 11 | 51.745 | <u> </u> |
| | | | ised by the organization to review this Form 990 | • | 10 kg | | <u> </u> |
| | | | of interest policy? If 'No,' go to line 13 | | 12a | X | |
| | to conflic | ts? . | nployees required to disclose annually interests . | | 12b | X | |
| | | | ntly monitor and enforce compliance with the pol | ıcy? If 'Yes,' describe in | 12c | x | |
| 13 | | organization have a written whistlet | | | 13 | X | |
| 14 | | organization have a written docume | | •• | 14 | X | <u> </u> |
| 15 | | | n of the following persons include a review and a neous substantiation of the deliberation and dec | approval by independent ision? | 44 | - | |
| | | nization's CEO, Executive Director, | | | 15 a | X | <u> </u> |
| t | | cers of key employees of the organ | | | 15b | , | X |
| | | | ss in Schedule O. (See instructions.) | | 1 | | / |
| 16 a | Did the o | rganization invest in, contribute ass ring the year? | ets to, or participate in a joint venture or similar . | arrangement with a taxable | 16 a | | X |
| t | in joint v | enture arrangements under applicab | en policy or procedure requiring the organization le federal tax law, and taken steps to safeguard | to evaluate its participation the organization's exempt | | · · · · · · | |
| Cas | | th respect to such arrangements? | · | | j 16b | | |
| | | Disclosures tates with which a copy of this Form | 2000 is required to be filed > | | | | |
| | | ' * | | | | | |
| 18 | inspection | n. Indicate how you make these ava | _ | nd 990-1 (501(c)(3)s only) ava | шарте | ior pu | DIIC |
| | | website Another's wel | | sonte conflict of interest nation | , | finana | leir |
| | stateme | ts available to the public | ow) the organization makes its governing docum | | | | ,ıdi |
| | | | none number of the person who possesses the b | | | | 3773 |
| | | | | | | | |

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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

- 1a 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 no | t compens | ate ar | у сі | ırrer | nt of | ficer, | direc | ctor, or trustee | | |
|---|------------------------------|--------------------------------------|-------------------------|--------|----------------|-------------------------------|-----------|---|--|--|
| (A) | (B) | | | • | c) | | | (D) | (E) | (F) |
| Name and Title | Average hours per week | Po andividual frances or director | o anstitutional trustee | Offi-1 | a key employee | High est compensated employee | y) Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| RICHARD MCCORMACK | | | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | | | | 0. | 0. | 0. |
| KEITH COLVIN | | | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | | | | 0. | · 0. | 0. |
| CAROLYN BARTEN | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| KEN BOEN | _ | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | ļ | | | 0. | 0. | 0. |
| MACKIE BOUNDS | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| BRIAN CHESTER | | | | | ļ | | | | | |
| SECRETARY | 2.00 | Х | | X | | | | 0. | 0. | 0. |
| MONTY OEHRLEIN | _[| | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | | | | 0. | 0. | 0. |
| TODD HEWITT | _[| | | | | | | | , | |
| VICE-CHAIR | 2.00 | Х | | Х | | | | 0. | 0. | 0. |
| PAUL HOLDEN | _ | | | | | | ļ | | | |
| TREASURER | 2.00 | Х | | X | | | | 0. | 0. | 0. |
| MIKE KANETZKY | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| JERRY KELLY | | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| VICTOR LONGO | <u>.</u> | | | | | Ì | Ì | | | |
| DIRECTOR | 2.00 | X | | | | | | 0. | 0. | 0. |
| STEVE RIANS | _ | | | | | | | | , | |
| CHAIR | 2.00 | Х | | X | <u> </u> | | | 0. | 0. | 0. |
| GLENN RANDLE | _ | | | | | | | | | |
| DIRECTOR | 2.00 | Х | | | | | | 0. | 0. | 0. |
| ALLAN WOODRUFF | | | | | | | | | | |
| DIRECTOR | 2.00 | X_ | | | | | | 0. | 0. | 0. |
| JERRY WRIGHT | . | | | | | | | | | |
| DIRECTOR | 2.00 | X | | | | L | | 0. | 0. | 0. |
| RAYMOND RISK | . | | | | 1 | | | | | |
| PRESIDENT/CEO | 40.00 | X | | X | | <u> </u> | | 364,629. | 0. | 0. |

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364,629. 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization

- Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*
- For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such ındıvıdual
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

| | res | NO |
|-----|-----|----|
| | THE | |
| 3 | | X |
| *** | | |
| 4 | X | |
| | | |
| 5 | | X |

0.

Section B. Independent Contractors

1 b Total

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

| (A) Name and business address | | | (B) Description of Services | (C) Compensation |
|---|----------------|-------|-----------------------------|---------------------|
| WILLIAM HAROLD FREEMAN 411 W. ST ELMO ROAD #40 AUSTIN | TX | 78745 | CONSULTANT | 142,061. |
| · · · · · · · · · · · · · · · · · · · | · - | | | |
| | | | | |
| | _ | | | |

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



| rai | t VIII Statement of Revenue | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|---|--|---------------------------------------|----------------------|--|---|---|
| CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns: 1 a b Membership dues . 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e f All other contributions, gifts, grants, and similar amounts not included above 1 f g Noncash contribns included in Ins 1a-1f . \$ h Total. Add lines 1a-1f | > | - | | | y , |
| Œ | | Business Code | | | | |
| PROGRAM SERVICE REVENUE | 2a MEMBERSHIP DUES | 900099 | 313,634. | 313,634. | 0. | 0. |
| RE | b EDUCATIONAL SEMINARS | 900099 | 8,183. | 8,183. | 0. | 0. |
| JCE. | | 900099 | 2,000. | 2,000. | 0. | 0. |
| Ä | d MEMBER MEETINGS/GOLF | 900099 | 42,650. | 42,650. | 0. | 0. |
| ¥. | e | | | , | | |
| 8 | f All other program service revenue | | | | | |
| 8 | g Total. Add lines 2a-2f | > | 366,467. | ~. | | <i>18</i> * |
| | Investment income (including dividends other similar amounts) Income from investment of tax-exempt | . • | 11,730. | 0. | 0. | 11,730. |
| | 5 Royalties | > > > > > > > > > > > > > > > > > > > | 408,889. | 0. | 0. | 408,889. |
| | (i) Real | (II) Personal | 100,003. | <u> </u> | | 100/0051 |
| | 6a Gross Rents | (4) | | | | |
| | b Less. rental expenses | | | * \$ * | | |
| | · • • • • • • • • • • • • • • • • • • • | · · · · · · · · · · · · · · · · · · · | | 1980 Xv | | 14. |
| | c Rental income or (loss) | | | | | * |
| | d Net rental income or (loss) | | | | | |
| | 7a Gross amount from sales of assets other than inventory (i) Securities | (II) Other | | | | |
| | b Less: cost or other basis and sales expenses | | | | , % | ` |
| | c Gain or (loss) | | | | | · · · · · · · · · · · · · · · · · · · |
| | d Net gain or (loss)8a Gross income from fundraising events | | | | | |
| ÆNUE | (not including \$ | | | | | |
| E E | 0 0 10/1 10 | a | | | | |
| OTHER REVEN | | b | | | | |
| 6 | c Net income or (loss) from fundraising e | | | | | · · · · · · · · · · · · · · · · · · · |
| | 9a Gross income from gaming activities. | a | - | | | |
| | b Less: direct expenses | Ь | | | | |
| | c Net income or (loss) from gaming activ | ities ► | | | | |
| | 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 inve | ntony • | | | | |
| | Miscellaneous Revenue | Business Code | | | | ···· |
| | 11a ADVERTISING | 541800 | 12,000. | 0. | 12,000. | 0. |
| | b ADMINISTRATIVE SERVICES | | 12,000. | 0. | 12,000. | 0. |
| | P WRITHISTWILLY SERVICES | 201000 | 12,000. | 0. | 12,000. | |
| | d All other revenue | | | - | | |
| | d All other revenue . | | 24 000 | | | |
| | e Total. Add lines 11a-11d | • | 24,000. 811,086. | 366,467. | 24 000 | 420,619. |
| | 12 Total revenue. See instructions | | OTT' ORP' | 300,40/. | 24,000. | 1 420,019. |

Form **990** (2009)

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Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do r | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|------|---|-----------------------|---------------------------------------|-------------------------------------|----------------------------------|
| 1 | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | 50,000. | | | |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S See Part IV, lines 15 and 16 | | - | magali yi nga ngananan naun dananan | |
| | Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees | 319,988. | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) | 315,3300 | | | |
| 7 | Other salaries and wages . | 67,811. | | | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits . | | | | |
| 10 | Payroll taxes | 5,512. | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management . | 114,000. | | | |
| b | Legal . | 33,814. | | | |
| c | : Accounting | 5,500. | | | |
| d | Lobbying | 79,000. | | | |
| е | Prof fundraising svcs. See Part IV, In 17 | | ····· | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 12 | Advertising and promotion | 30,000. | | | |
| 13 | Office expenses | 37,396. | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy . | 64,125. | | | |
| 17 | Travel | 20,004. | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 42,403. | | | |
| 20 | Interest . | | | | |
| 21 | Payments to affiliates . | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| | Insurance | 3,452. | | | |
| 24 | 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.) | | | : | |
| а | DUES & SUBSCRIPTIONS | 7,541. | | | |
| b | MISCELLANEOUS | 2,425. | · · · · · · · · · · · · · · · · · · · | | |
| c | : | | | | |
| c | _ | | | | |
| e | | | | | |
| f | All other expenses . | | | <u> </u> | |
| 25 | Total functional expenses. Add lines 1 through 24f | 882,971. | | | |
| 26 | Joint costs. Check here 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 | | | | Form 990 (2009) |

Part X **Balance Sheet** (B) End of year (A) Beginning of year 122,062. 5,408 1 Cash - non-interest-bearing Savings and temporary cash investments 1,375,568. 2 1,187,029. 3 Pledges and grants receivable, net 4 Accounts receivable, net . . Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 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 7 Notes and loans receivable, net Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis 10a Complete Part VI of Schedule D **b** Less accumulated depreciation. 10b 10 c 11 11 Investments - publicly-traded securities 12 Investments - other securities See Part IV. line 11 12 13 Investments - program-related See Part IV, line 11. 13 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) 1,380,976. 16 1,309,091 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities. Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0. 26 0. Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 1,380,976. 27 Unrestricted net assets 27 1,309,091. 28 Temporarily restricted net assets . 29 Permanently restricted net assets. 29 Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 33 1,380,976. Total net assets or fund balances 1,309,091. 34 Total liabilities and net assets/fund balances 1,380,976. 1,309,091. Form 990 (2009) BAA

Form 990 (2009) Part XI | Financial Statements and Reporting Yes No 1 Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain 0, 34, 5 ın Schedule O 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2b **b** Were the organization's financial statements audited by an independent accountant? . c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, 2<u>.</u>c review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain ın 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: X Separate basis 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-1337 . . 3 a X

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.

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Form 990 (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 2009

Open to Public inspection?

Department of the Treasury Internal Revenue Service If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

end 'Vac ' to Form 000 Part IV line 5 (Prove Tay) then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete

| | , | ganizations: Complete Part III | CII | | |
|-----|--|--|---|--|--|
| | of organization | gariizations. Complete Fart III | | Employer identification | ation number |
| TEX | AS CONSTRUCTION AS | SOCTATION | | 74-288569 | 4 |
| Pai | t I-A Complete if the or | rganization is exempt under section | on 501(c) or is a s | | |
| 1 | | organization's direct and indirect political ca | | | |
| 2 | Political expenditures | | | ► \$ | } |
| 3 | Volunteer hours | | | | |
| Par | t:I-B Complete if the or | rganization is exempt under section | on 501(c)(3). | - | |
| 1 | | se tax incurred by the organization under se | | ▶\$ | |
| 2 | Enter the amount of any exci | se tax incurred by organization managers u | nder section 4955 | ▶\$ | |
| 3 | | section 4955 tax, did it file Form 4720 for t | | | . Yes . No |
| 4 a | Was a correction made? | | | | Yes No |
| ŧ | If 'Yes,' describe in Part IV | | | | |
| Pai | t-I-C Complete if the or | rganization is exempt under section | on 501(c) , except | t section 501(c)(3). | |
| 1 | Enter the amount directly exp | pended by the filing organization for section | 527 exempt function | activities ►\$ | |
| 2 | Enter the amount of the filing function activities . | organization's funds contributed to other or | ganizations for section | on 527 exempt ► \$ | I |
| 3 | Total of exempt function expeline 17b | enditures Add lines 1 and 2. Enter here and | d on Form 1120-POL, | ►\$ | 1 |
| 4 | Did the filing organization file | Form 1120-POL for this year? | | | . Yes No |
| 5 | made For each organization contributions received that we | and employer identification number (EIN) or listed, enter the amount paid from the filing ere promptly and directly delivered to a sep e (PAC). If additional space is needed, pro- | ı organızatıon's funds arate political organız | Also enter the amount ation, such as a separa | of political |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds if none, enter-0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| | _ | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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

Schedule C (Form 990 or 990-EZ) 2009

| Schedule C (Form 990 or 990-EZ) 200 | 9 TEXAS CONS | TRUCTION ASSOCIAT | ION | 74-2885 | |
|--|---------------------------------------|--|---|--|-----------------------------|
| Part II-A Complete if section 501(| tne organizatio h)). | n is exempt under sec | tion 50 I(c)(3) and | 1 111ea Form 5766 (el | ection under |
| | | ongs to an affiliated group. | | | · — <u>—</u> |
| B Check ► I If the filin | ng organization che | cked box A and 'limited conti | rol' provisions apply. | , | |
| (The term | Limits on Lobbyi 'expenditures' me | ng Expenditures — ans amounts paid or incurre | d.) | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expenditu | ires to influence pu | blic opinion (grass roots lobb | ying) | | |
| b Total lobbying expenditu | ires to influence a l | egislative body (direct lobbyi | ng) | | |
| c Total lobbying expenditu | ires (add lines 1a a | nd 1b) | | | |
| d Other exempt purpose e | expenditures | | | | |
| e Total exempt purpose ex | xpenditures (add lir | nes 1c and 1d) | | | |
| f Lobbying nontaxable am both columns | nount Enter the am | ount from the following table | ın | | |
| If the amount on line 1e, colo | umn (a) or (b) is: | The lobbying nontaxable an | nount is | , and the second | 3 8. |
| Not over \$500,000 | | 20% of the amount on line 1e | | , | |
| Over \$500,000 but not over \$1, | ,000,000 | \$100,000 plus 15% of the excess | over \$500,000 | 1 / | 3 |
| Over \$1,000,000 but not over \$ | 1,500,000 | \$175,000 plus 10% of the excess | over \$1,000,000 | 3 / | |
| Over \$1,500,000 but not over \$ | 17,000,000 | \$225,000 plus 5% of the excess or | ver \$1,500,000. | , , , | |
| Over \$17,000,000 | | \$1,000,000 | <u></u> | 1 | |
| g Grassroots nontaxable a | amount (enter 25% | of line 1f) | | | |
| h Subtract line 1g from lin | e 1a If zero or less | s, enter -0- | | | |
| i Subtract line 1f from line | e 1c. If zero or less | , enter -0 | | | |
| j If there is an amount oth section 4911 tax for this | ner than zero on eit year? | her line 1h or line 1i, did the | organization file Form | 4720 reporting | Yes No |
| (Son | ne organizations th colum | 4-Year Averaging Period U at made a section 501(h) ele ns below. See the instruction | nder Section 501(h) ection do not have to ons for lines 2a throug | complete all of the five h 2f.) | |
| | Lob | bying Expenditures During | 4-Year Averaging Per | iod | |
| Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2a Lobbying non-taxable amount | | | | | |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | , , , | | | | |
| c Total lobbying expenditures | | | | | |
| d Grassroots nontaxable amount | | | | | |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | , ', , , | | | | |
| f Grassroots lobbying | | | | | |

| Schedule C (Form 990 or 990-EZ) 2009 TEXAS CONSTRUCTION ASSOCIATION Part II-B Complete if the organization is exempt under section 501(c)(3) and has NC | | 74-2885694 T filed Form 5768 | | | |
|---|----------|--|--|--|--|
| (election under section 501(h)). | | - | | | |
| | Yes | No | (b) Amount | | |
| | + | | | | |
| During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | , | , , , , , , , , , , , , , , , , , , , | | |
| a Volunteers? | _ | | Mark : lijohudu a ratani, yik da | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | and the state of t | | |
| c Media advertisements? | | | | | |
| d Mailings to members, legislators, or the public? | | | | | |
| e Publications, or published or broadcast statements? | <u> </u> | | | | |
| f Grants to other organizations for lobbying purposes? | | | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | · | | | | |
| i Other activities? If 'Yes,' describe in Part IV | | | | | |
| j Total Add lines 1c through 1i | | | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | 200 x, 44 - 15 - 1 | | |
| b If 'Yes,' enter the amount of any tax incurred under section 4912 | | 33 | | | |
| c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 | <u></u> | <u>`````</u> | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 50 | <u> </u> | | 17/11/20 12/20 1 | | |
| | | | | | |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | | Yes No | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? . | | | 2 X | | |
| 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 3 X | | |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line | 3 is a | nswe | ered 'Yes.' | | |
| 1 Dues, assessments and similar amounts from members | • | 1 | 313,634. | | |
| 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). | | ,, | | | |
| a Current year | | 2a | 136,295. | | |
| b Carryover from last year . | • | 2b | | | |
| c Total | | 2c | 136,295. | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | 172,500. | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess | z | - | | | |
| does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polit | ical | | | | |
| expenditure next year? | | 4 | | | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | | 5 | 0. | | |
| Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; an | d Part I | I-B lin | e 1ı | | |
| Also, complete this part for any additional information | | | | | |
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| Schedule C (Form 990 or 990-EZ) 2009 TEXAS CONSTRUCTION ASSOCIATION | 74-2885694 | Page 4 |
|--|------------|---------------|
| Schedule C (Form 990 or 990-EZ) 2009 TEXAS CONSTRUCTION ASSOCIATION Part IV Supplemental Information (continued) | - | |
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Name | of the organization | | | Employer Identification number |
|------|--|---|-----------------------------------|---|
| | | | | |
| TEX | KAS CONSTRUCTION ASSOCIATION | | | 74-2885694 |
| Pa | t 🔯 Organizations Maintaining Donor | Advised Funds or Other Similar Fu | nds or Acc | ounts Complete_if |
| | the organization answered 'Yes' to | Form 990, Part IV, line 6. | | · |
| | | (a) Donor advised funds | (b) F | unds and other accounts |
| 1 | Total number at end of year | | _ | · <u>-</u> |
| 2 | Aggregate contributions to (during year) . | | | |
| 3 | Aggregate grants from (during year) | | | |
| 4 | Aggregate value at end of year | | <u> </u> | |
| 5 | Did the organization inform all donors and dono funds are the organization's property, subject to | or advisors in writing that the assets held in do to the organization's exclusive legal control? | nor advised | Yes No |
| 6 | Did the organization inform all grantees, donors used only for charitable purposes and not for the purpose conferring impermissible private benefits. | ne benefit of the donor or donor advisor or for a | ls may be any other | Yes No |
| Pa | tilla Conservation Easements Comple | ete if the organization answered 'Yes | to Form 99 | 90, Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by | | | |
| | Preservation of land for public use (e.g , re | | of an historica | ally important land area |
| | Protection of natural habitat | Ħ | of certified his | storic structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization last day of the tax year. | n held a qualified conservation contribution in | the form of a | conservation easement on the |
| | | | 180 | Held at the End of the Year |
| | Total number of conservation easements | | 2a | |
| 1 | Total acreage restricted by conservation easem | nents | 2b | |
| • | Number of conservation easements on a certification | ed historic structure included in (a) | 2c | |
| | Number of conservation easements included in | • • • | 2d | |
| 3 | Number of conservation easements modified, to | ransferred, released, extinguished, or terminat | ed by the orga | enization during the tax |
| _ | year > | | | |
| 4 | Number of states where property subject to cor | servation easement is located > | | |
| 5 | Does the organization have a written policy reg and enforcement of the conservation easement | it holds? | - | ons, Yes No |
| | Staff and volunteer hours devoted to monitoring during the year | | _ | |
| | Amount of expenses incurred in monitoring, ins during the year ▶ | | \$ <u>_</u> | |
| 8 | Does each conservation easement reported on $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$? | line 2(d) above satisfy the requirements of sec | ction | Yes No |
| 9 | In Part XIV, describe how the organization repo- include, if applicable, the text of the footnote to conservation easements. | orts conservation easements in its revenue and the organization's financial statements that di | d expense stat escribes the or | ement, and balance sheet, and rganization's accounting for |
| Pa | Organizations Maintaining Colle Complete if the organization answ | ctions of Art, Historical Treasures, c | or Other Sin | nilar Assets |
| 1; | If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen | c exhibition, education, or research in furthera | ent and balanc nce of public s | e sheet works of art, historical service, provide, in Part XIV, |
| I | If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items. | SFAS 116, to report in its revenue statement a c exhibition, education, or research in furthera | and balance sh nce of public s | neet works of art, historical service, provide the following |
| | (i) Revenues included in Form 990, Part VIII, | line 1 . | | ► \$ |
| | (ii) Assets included in Form 990, Part X | | • • | . ►\$ |
| 2 | If the organization received or held works of art amounts required to be reported under SFAS 1 | t, historical treasures, or other similar assets f 16 relating to these items | or financial ga | in, provide the following |
| i | a Revenues included in Form 990, Part VIII, line | 1 | | > \$ |
| 1 | Assets included in Form 990. Part X | | | . ▶\$ |

| Schedule D (Form 990) 2009 TEXA | | | | | | | 4-2885 | | | Page 2 |
|---|---|-----------------------|--|----------------|--|----------------------------|------------|-----------------|-------------|-------------|
| Part III Organizations Mainta | ining Colle | ections | of Art, Histo | orica | Treasures, or | Other Simil | ar Ass | ets (co | ontinu | ıed) |
| 3 Using the organization's acquisitilitems (check all that apply). | on accession | and other | er records, chec | k any | of the following that | are a signific | ant use o | f its col | lection | |
| a Public exhibition d Loan or exchange programs | | | | | | | | | | |
| b Scholarly research | | | e 🗌 Other | | | | | | | |
| c Preservation for future generation | | | | | | | | | | |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. | | | | | | | | | | |
| 5 During the year, did the organizar assets to be sold to raise funds ra | tion solicit or ather than to | receive of be main | donations of art, tained as part of | histo the o | rical treasures, or o rganization's collect | ther similar tion? | | Yes | Г | No |
| Part IV Escrow and Custodia 9, or reported an amo | l Arrangen | nents (| Complete if c | rgan | | | orm 99 | 0, Pai | rt IV, | line |
| 1a is the organization an agent, trus included on Form 990, Part X? | tee, custodiai | n, or oth | er intermediary f | for co | ntributions or other | assets not | [| Yes | | No |
| b If 'Yes,' explain the arrangement | in Part XIV a | nd comp | lete the followin | g tabl | e: | | | | | |
| | | | | | | | | Amount | | |
| c Beginning balance | | | | | | 1c | | | | |
| 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 | | m 990, F | Part X, line 21? | | | | L | Yes | L | No |
| b If 'Yes,' explain the arrangement | | | ation once | a d 13 | Yeal to Farm 000 |) Dart IV 1 | 10 | | | |
| Part V Endowment Funds Co | | | | | | | | 1 4 > 5 | | |
| 1 a Beginning of year balance | (a) Current | t year | (b) Prior year | | (c) Two years back | (d) Three yo | | (e) F | our year | S Dack |
| b Contributions | | | | | <u> </u> | | , 3/ | <u> </u> | | |
| | | | | | 4 / | , | | , | | |
| c Net Investment earnings, gains, and losses | | | | | * 、* , * , * , * , * , * , * , * , * , * , | | , | | | |
| d Grants or scholarships | | | | | | : , | | | 5, 3 | , |
| e Other expenditures for facilities | | - | | | · · · · · | | X 500 | , ° 47 | - 17 | <i>77</i> . |
| and programs f Administrative expenses | | | | | | , , , | <u>^</u> 2 | - ; | . * , | |
| g End of year balance | | | | | | | ` | | | |
| • | of the year (| and hala | nce held as: | | | <u>l</u> | | <u> </u> | | |
| 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment % | | | | | | | | | | |
| b Permanent endowment | *************************************** | | • | | | | | | | |
| c Term endowment ► | | | | | | | | | | |
| | | | | | | | | | | |
| 3a Are there endowment funds not in organization by: | 1 the possess | sion of th | e organization ti | nat are | e neid and administ | ered for the | | Γ | Yes | No |
| (i) unrelated organizations | | | | | | | | 3a(i) | | |
| (ii) related organizations | | | | | | | | 3a(ii) | | |
| b if 'Yes' to 3a(ii), are the related o | rganizations ! | listed as | required on Sch | edule | R? | | | 3b | | |
| 4 Describe in Part XIV the intended | uses of the o | organizat | tion's endowmer | nt func | is. | | | | | |
| Part VI Investments-Land, B | uildings, a | and Eq | ui <mark>pment.</mark> See | For | m 990, Part X, | line 10. | | | | |
| Description of investment | | | t or other basis vestment) | | Cost or other casis (other) | (c) Accumula Depreciati | | (d) B | Book Va | alue |
| 1 a Land | | | | | | | | | | |
| b Buildings | | <u> </u> | | | | | ļ. | | | |
| c Leasehold improvements | • | <u> </u> | | | | | | | | |
| d Equipment . | | | | | | | | | | |
| e Other | | <u> </u> | | | | | | | | |
| Total. Add lines 1a through 1e (Column | ı (d) must eqi | ual Form | 990, Part X, co | lumn | (B), line 10(c)) | | <u> </u> | | | |
| BAA | | | | | | | Schedi | ule D (F | orm 99 | 90) 2009 |

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Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 TEXAS CONSTRUCTION ASSOCIATION

74-2885694

Page 3

| Part XI Reconciliation of Change in Net Assets from Form 990 to I | Financial Statements | | |
|--|---|------------------------------------|-----------------------------|
| 1 Total revenue (Form 990, Part VIII,column (A), line 12) | | ļ | 811,086. |
| 2 Total expenses (Form 990, Part IX, column (A), line 25) | • | | 882,971. |
| 3 Excess or (deficit) for the year Subtract line 2 from line 1 | | · | -71,885. |
| 4 Net unrealized gains (losses) on investments | | ļ | |
| 5 Donated services and use of facilities | | | |
| 6 Investment expenses | | | |
| 7 Prior period adjustments | • • | | |
| 8 Other (Describe in Part XIV) | • • • • | | |
| 9 Total adjustments (net) Add lines 4 through 8 | ••• | | |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 | | | -71,885. |
| Rart XII Reconciliation of Revenue per Audited Financial Statemen | its With Revenue per H | return | 700 050 |
| 1 Total revenue, gains, and other support per audited financial statements | • • | . 1 | 788,850. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 | 1 - 1 | | |
| a Net unrealized gains on investments | 2a | - 32 | |
| b Donated services and use of facilities | 2b | - | |
| c Recoveries of prior year grants | . 2c | | |
| d Other (Describe in Part XIV) | 2d | _ | |
| e Add lines 2a through 2d | • | 2e | |
| 3 Subtract line 2e from line 1 | | 3 | 788,85 <u>0</u> . |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1. | | | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | - [::::# | |
| b Other (Describe in Part XIV) | 46 22,236 | | 00 000 |
| c Add lines 4a and 4b . | • • | 4c | 22,236. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12). | | 5 | 811,086. |
| Part XIII Reconciliation of Expenses per Audited Financial Statement | ents with Expenses pe | r Keturn | 060 725 |
| 1 Total expenses and losses per audited financial statements | • | 2.00000 | 860,735. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a Donated services and use of facilities | 2a | - 253 | |
| b Prior year adjustments | 2b | - [4] | |
| c Other losses . | 2c | - 133 | |
| d Other (Describe in Part XIV) | 2d | | |
| e Add lines 2a through 2d | • | . 2e | 0.60 735 |
| 3 Subtract line 2e from line 1 | 1 1 | 3 | 860,735. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a Investments expenses not included on Form 990, Part VIII, line 7b | 4a | - | |
| b Other (Describe in Part XIV) | 4b 22,236 | <u>-</u> | 00 000 |
| c Add lines 4a and 4b | • | 5 | 22,236. |
| 5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18) | | 1 5 1 | 882,971. |
| Part XIV Supplemental Information | | | |
| Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Par ine 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and and 4b; and Part XIII, lines 2d and 4b; and Part XIIII, lines 2d and 4b; and 4b | rt III, lines 1a and 4; Part IV, nd 4b. Also complete this pai | lines 1b and 2 rt to provide ar | b, Part V, ny additional |
| Pt XII Line 4b EVENT EXPENSES OF \$22,236 | | · – – – – | |
| Pt_XIII_Line_4bEVENT_EXPENSES_OF_\$22,236 | | | |
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Page 4

Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 TEXAS CONSTRUCTION ASSOCIATION

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| Schedule D | (Form 990) 2009 TEXAS CONSTRUCTION ASSOCIATION | /4-2885694 | Page 5 |
|-------------------|--|--------------|--------------|
| Part XIV | (Form 990) 2009 TEXAS CONSTRUCTION ASSOCIATION Supplemental Information (continued) | | |
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SCHEDULE I

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| epartment of the Treasury ternal Revenue Service | |
| ວ⊆ | 1 |

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

| 1545-0047 | 600 |
|-----------|-----|
| OMB No | 7 |

*# Open to Public

ջ □ X Yes Employer identification number 74-2885694 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Partil® General Information on Grants and Assistance TEXAS CONSTRUCTION ASSOCIATION Name of the organization

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use

| A | (h) Purpose of grant or assistance | CONTRIBUTION | CONTRIBUTION | | | | | | Schedule I (Form 990) 2009 |
|---|---|--|---|---|--|---|---|---|---|
| | (g) Description of non-cash assistance | N/A | N/A | - | | - | _ | | Sche |
| | (f) Method of valuation (book, FMV, appraisal, other) | 0. N/A | N/A | | | | | | 02/10/10 |
| | (e) Amount of non-cash assistance | 0. | 0. | | | | | - | TEEA3901 |
| pepea | (d) Amount of cash grant | 25,000. | 25,000. | | | | | | uctions for Form 990. |
| tional space is r | (c) IRC section if applicable | 501(c)(3) | 501(c)(3) | | | | | ganizations | the Instructions for |
| orm 990) if add | (b) EIN | 76-0270942 | 74-1590489 | | | | | and government or | ction Act Notice, see |
| Part IV and Schedule I-1 (Form 990) if additional space is needed | 1 (a) Name and address of organization or government | BOYS & GIRLS CLUBS OF GRE 1520-A AIRLINE DRIVE | TEXAS_TECH_LAW_SCHOOL_FOU. 1802_HARTFORD_AVENUE LUBBOCK_TX_79409 | | | | | 2 Enter total number of section 501(c)(3) and government organization3 Enter total number of other organizations . | BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instr |

Part III

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) TEXAS CONSTRUCTION ASSOCIATION REGARDING THE USE OF FUNDS PROVIDED. THE BOYS & GIRLS CLUB OF GREATER HOUSTON AS WELL AS THE TEXAS TECH UNIVERSITY LAW SCHOOL FOUNDATION WILL REPORT PERIODICALLY TO THE (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Part IV

BAA

Schedule I (Form 990) 2009

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

..........

TEXAS CONSTRUCTION ASSOCIATION

Part I Questions Regarding Compensation

Employer identification number 74-2885694

| | | | Yes | No |
|---|--|-----|-----------------------|-------------|
| 1a Check the appropriate box(es) if the organization provide VII, Section A, line 1a Complete Part III to provide any | ded any of the following to or for a person listed in Form 990, Part relevant information regarding these items. | | | |
| First-class or charter travel | Housing allowance or residence for personal use | | | |
| Travel for companions | Payments for business use of personal residence | | | |
| Tax indemnification and gross-up payments | Health or social club dues or initiation fees | | | |
| Discretionary spending account | Personal services (e.g., maid, chauffeur, chef) | | | |
| | | | | |
| b If any of the boxes on line 1a are checked, did the organ reimbursement or provision of all of the expenses described. | anization follow a written policy regarding payment or ribed above? If 'No,' complete Part III to explain | 1 b | Transistada emplesas. | |
| 2 Did the organization require substantiation prior to rein trustees, and the CEO/Executive Director, regarding the | nbursing or allowing expenses incurred by all officers, directors, e items checked in line 1a? | 2 | | |
| 3 Indicate which, if any, of the following the organization CEO/Executive Director Check all that apply. | uses to establish the compensation of the organization's | | | |
| X Compensation committee | Written employment contract | | | |
| Independent compensation consultant | Compensation survey or study | | * | İ |
| Form 990 of other organizations | X Approval by the board or compensation committee | | | |
| | _ | - A | <u>\</u> | |
| During the year, did any person listed in Form 990, Par or a related organization: | rt VII, Section A, line 1a with respect to the filing organization | | | |
| a Receive a severance payment or change-of-control pay | yment? | 4a | | X |
| b Participate in, or receive payment from, a supplementa | al nonqualified retirement plan? | 4b | | X |
| c Participate in, or receive payment from, an equity-base | ed compensation arrangement? . | 4c | | X |
| If 'Yes' to any of lines 4a-c, list the persons and provid | e the applicable amounts for each item in Part III. | | | \ \ \ \ \ \ |
| | | | | |
| Only section 501(c)(3) and 501(c)(4) organizations mu | st complete lines 5-9. | , | á. | |
| 5 For persons listed in Form 990, Part VII, Section A, line contingent on the revenues of. | e 1a, did the organization pay or accrue any compensation | | | |
| a The organization? | | 5a | | |
| b Any related organization? | | 5b | | |
| If 'Yes' to line 5a or 5b, describe in Part III | | | | |
| 6 For persons listed in Form 990, Part VII, Section A, line contingent on the net earnings of. | e 1a, did the organization pay or accrue any compensation | | | |
| a The organization? | | 6a | | |
| b Any related organization? | | 6b | | |
| If 'Yes' to line 6a or 6b, describe in Part III. | | | | |
| 7 For person listed in Form 990, Part VII, Section A, line described in lines 5 and 6? If 'Yes,' describe in Part III | 1a, did the organization provide any non-fixed payments not . | 7 | | |
| 8 Were any amounts reported in Form 990, Part VII, paid contract exception described in Regs. section 53 4958- | d or accrued pursuant to a contract that was subject to the initial 4(a)(3)? If 'Yes,' describe in Part III | 8 | | |
| If 'Yes' to line 8, did the organization also follow the re section 53 4958-6(c)? | buttable presumption procedure described in Regulations | 9 | | |

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

Schedule J (Form 990) 2009

Page 2

74-2885694

TEXAS CONSTRUCTION ASSOCIATION Schedule J (Form 990) 2009

Part¹It. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| | | | - | | | | į |
|-----------------|--------------------------|---|---|--|---|---|---|
| | (IS) Breakdown of | (15) Breakdown of W-Z and/or 1099-MISC compensation | compensation | (C) Retirement and | (D) Nontaxable | (E) lotal of columns | reported in prior |
| (A) Name | (i) Base compensation | (ii) Bonus and incentive compensation | (iii) Other reportable compensation | compensation | 2 | (2) (3/2) | Form 990 or Form 990-EZ |
| | (1) 239, 988. | 80,000. | 44,641. | 0 | 0. | 364, 629. | 301,058. |
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047 2009

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.

Open to Public

| Name of the organization | Employer identification number |
|---|--------------------------------|
| TEXAS CONSTRUCTION ASSOCIATION | 74-2885694 |
| Pt VI-A, Line 3 THE ASSOCIATION DELEGATED CONTROL TO THE PRESI | DENT/CEO |
| TO PROVIDE MANAGEMENT SERVICES. | |
| Pt_VI-A, Line 6 THE ASSOCIATION HAS OVER 2,100 MEMBERS IN THE | CONSTRUCTION |
| INDUSTRY. | |
| Pt VI-A, Line 7a THE MEMBER ASSOCIATIONS ELECT REPRESENTATIVES | TO THE |
| BOARD OF DIRECTORS. | |
| Pt VI-A, Line 7b ANY CHANGES TO THE BYLAWS MUST BE APPROVED BY A | A VOTE |
| OF THE MEMBER ASSOCIATIONS. | |
| Pt VI-B, Line 11A THE TREASURER IS PROVIDED A COPY OF THE FORM 9 | 90 FOR REVIEW |
| PRIOR TO ITS FILING. | |
| Pt VI-B, Line 12c THE PRESIDENT AND THE BOARD ARE REQUIRED TO DIS | SCLOSE |
| ANY CONFLICTS OF INTEREST. | |
| Pt VI-B, Line 15 THE EXECUTIVE COMMITTEE SERVES AS THE COMPENSA | rion committee |
| AND IS MADE UP OF INDEPENDENT PERSONS. THEY RE | VIEW AND |
| DETERMINE THE COMPENSATION OF THE PRESIDENT/CE | D |
| Pt VI-C, Line 19 THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLIC | I OF INTEREST |
| POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE | TO MEMBERS |
| UPON REQUEST. | |
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SCHEDULE R (Form 990)

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.

** Open to Public

2009

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OMB No 1545-0047

(F)
Direct controlling
entity Employer Identification number 74-2885694 (E) End-of-year assets **Part** জি Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) **(D)** Total income (C) Legal domicile (state or foreign country) (B) Primary activity (A) Name, address, and EIN of disregarded entity TEXAS CONSTRUCTION ASSOCIATION Department of the Treasury Internal Revenue Service Name of the organization

| Part II I Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during | ons (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had ring the tax year.) | yanization answere | d 'Yes' to Form 990 |), Part IV, line 34 b | ecause it had |
|---|---|---|------------------------------------|--|-------------------------------|
| (A) Name, address, and EIN of related organization | (B) Primary activity | (C) Legal domicile (state or foreign country) | (b) Exempt Code section | (E) Public charity status (if section 501(c)(3)) | (F) Direct controlling entity |
| TEXAS_CONSTRUCTION ASSOCIATION PAC 05-0634633 POLITICAL ACTION 1011 SAN JACINTO BLVD, #330, AUSTIN TX 78701 COMMITTEE | POLITICAL ACTION COMMITTEE | ТХ | 527 | N/A | N/A |
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| BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. | structions for Form 990. | 1 1 1 | TEEA5001 02/05/10 | Schedi | Schedule R (Form 990) (2009) |

Page 2

| Partills | Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 (A)

| 1 | ≿ 6 - | ام ا | | | | 1 | | |
|---|---|-------------------|------|---|--|---|--|--|
| | General or managing partner? | No | | | | | | |
| | | Yes | | | | | | |
| | Code V-UBI amount in box 20 of Schedule K-1 | (Form 1065) | | | | | | |
| | por- ate | ş | | | | • | | |
| | (H) Disproportionate allocations? | Yes | | | | | | |
| ar.) | (G) Share of end-of-year assets | | | • | | , | | |
| rreated as a partnership during the tax year.) | (F) Share of total income | | | | | | | |
| ed as a parmersni | (E) Predominant income (related, unrelated, excluded from fax inder | sections 512-514) | | | | | | |
| anizations treal | (C) (D) Legal Direct domicile controlling entity faste or foreign | | · | | | | | |
| lated orga | CC Legal domicile (state or | country) | | | | | | |
| one or more re | (B) Primary Activity | | | | | | | |
| Decause it had one or more related organizations in | (A) Name, address, and EIN of related organization | | | | | | | |

| PartiVe Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answering Identification of the organization answer.) | Faxable as a Coled organizations | rporation or Tr | rust (Complete | of the organizers or the control of | a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, it ons treated as a corporation or trust during the tax year.) | ss' to Form 990, Pa | art IV, |
|---|----------------------------------|---|---|---|---|---|--------------------------|
| (A) Name, address, and EIN of related organization | (B) Primary Activity | (C) Legal domicile (state or foreign country) | Legal domicile Direct Type of entity (State or foreign controlling entity (C corp, S corp, country) | (E) Type of entity (C corp, S corp, or trust) | Share of total income Share of end-of-year assets | (G) Share of end-of-year assets | (H) Percentage ownership |
| TEXAS CONSTRUCTION TRUST 20-6268612 | | | | | | | |
| 1011 SAN JACINTO BLVD, #330 | INSURANCE | | | | | | |
| AUSTIN, TX 78701 | TRUST | TX | N/A | T | 0 | 0. | 0.00 |
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Schedule **R** (Form 990) (2009)

TEEA5002 02/05/10

BAA

74-2885694

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

| | | \vdash | Ι. |
|--|----------------------------|-------------------------------------|-------|
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | Tes No | - 154 |
| | | 1 a X | 7 |
| A receipt of Winterest (i) an induced by the logarity of the l | | | ı |
| b Cirt., grant, or capital contribution to other organization(s) | • | + | ī |
| c Gift, grant, or capital contribution from other organization(s) | | ر ارد | 1 |
| d Loans or loan guarantees to or for other organization(s) | | X PL | |
| e Loans or loan quarantees by other organization(s) | : | 1e X | |
| | | 4 | ı |
| f Sale of assets to other organization(s) | | 11 X | 1 |
| | | 1 ₀ | 1 |
| | - | | 1 |
| n Exchange of assets | | | ı |
| i Lease of facilities, equipment, or other assets to other organization(s) | | i- | ** |
| | | 4 | 7 |
| j Lease of facilities, equipment, or other assets from other organization(s) | | † | -1 |
| k Performance of services or membership or fundraising solicitations for other organization(s) | | | - 1 |
| I Performance of services or membership or fundraising solicitations by other organization(s) | | 1 × | - 1 |
| m Sharing of facilities, equipment, mailing lists, or other assets | | 1m X | - 1 |
| n Sharing of paid employees | : | 1n X | ١ |
| | | | 7.4 |
| o Reimbursement paid to other organization for expenses | | 10 X | - 1 |
| p Reimbursement paid by other organization for expenses | • | . 1p X | |
| | | | 1 |
| a Other transfer of cash or property to other organization(s) | - | Jq X | |
| r Other transfer of cash or property from other organization(s) | | 1r × | 1 |
| 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | nd transaction thresholds | | |
| | (2) | Ç | i |
| (A) Name of other organization | (b) Transaction type (a-r) | Amount involved | ı |
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| (3) | - | | 1 |
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| (4) | | | 1 |
| (5) | | | - 1 |
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| (9) TEEA5003 02/05/10 | Schedule | Schedule R (Form 990) (2009) | 16 |

Schedule R (Form 990) 2009 TEXAS CONSTRUCTION ASSOCIATION

PartVIN 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 revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| (A) Name, address, and EIN of entity | (B) Primary activity | (C) Legal domicile (state or foreign country) | Are all partners section 501(c)(3) organizations? | (E) Share of end-of-year assets | (F) Disproportionate allocations? | (G) Code V-UBI amount In box 20 of Schedule K-1 Form (1065) | (H) General or managing partner? | l <u>-</u> _ |
|--------------------------------------|----------------------|---|---|---------------------------------|-----------------------------------|---|---|--------------|
| | | | Yes No | | Yes No | | Yes No | ا ا |
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Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4d (continued)

4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code: ______ Description: MAINTAINED A CONSTRUCTION CLAUSE LIBRARY FOR USE OF MEMBER

| Code: | Description: | MAINTAINED A CONSTRUCTION CLAUSE LIBRARY FOR USE OF MEMBER |
|-----------|--------------|--|
| Expenses | | FIRMS THROUGH INTERNET ACCESS ON-ASSOCIATION'S WEB-SITE. |
| Grants Of | | |
| Revenue . | | |
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