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DLN: 93493314035871

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

2010

OMB No 1545-0047

Open to Public Inspection

			lendar year, or tax year begind C Name of organization	nning 01-01-2010 and ending 12-31-2	010	D Employer	identification number
_		pplicable	PORTLAND CEMENT ASSOCIATION	N			
_	fress ch	-	Doing Business As			36-1638	940
_	ne cha	-				E Telephone	e number
_	ial retu minate		Number and street (or P O box 5420 OLD ORCHARD ROAD	ıf mail is not delivered to street address)	Room/suite	(847) 96	6-6200
– <sub>Am</sub>	ended	return	City or town, state or country, a	and ZIP + 4		<b>G</b> Gross recei	pts \$ 55,208,259
_		n pending	SKOKIE, IL 600771083				
74	nication	i pending	F N		1		
			<b>F</b> Name and address of BRIAN MCCARTHY	principal officer	H(a) Is this	a group return for affi	liates? Yes V No
			5420 OLD ORCHARD RO		H(b) Are al	l affiliates include	d?
			SKOKIE,IL 600771083	3	If "N	o," attach a lis	t (see instructions)
r Ta	x-exem	npt status		◀ (insert no )	H(c) Grou	up exemption r	number ►
		•	/W PORTCEMENT ORG	, , , , , , , , , , , , , , , , , , , ,	$\dashv$		
					<u>                                     </u>		
			Corporation Trust Associ	ation Other 🕨	L Year of fo	rmation 1971	<b>M</b> State of legal domicile IL
Pa	rt I	Sum	mary				
				ssion or most significant activities			
e e	:	<u>IMPROV</u>	E & EXPAND USES OF POR	TLAND CEMENT & CONCRETE THRO	UGH EDUCATIO	ONAL SUPPO	RT & PROMOTION
<b>≌</b>	-						
Ē							
Governance	2	Check th		n discontinued its operations or dispose	d of more than 2	25% of its net	assets
			•	erning body (Part VI, line 1a)		з	54
<b>ර</b> ර			-	ers of the governing body (Part VI, line :		. 4	53
ĕ			•	ın calendar year 2010 (Part V, line 2a)	•	5	121
Activities &			mber of volunteers (estimate	·		6	0
မှ			•	n Part VIII, column (C), line 12		7a	48,953
				ne from Form 990-T, line 34		7b	0
		Tree anne	Tacca Basiness taxable incon	101111111111111111111111111111111111111	Drie	or Year	Current Year
	8	Control	butions and grants (Part VIII	( line 1h)	FIRE	2,510,459	42,000
9	9			I, line 2g)	•	36,141,075	34,424,443
Revent	10	_	•	umn (A), lines 3, 4, and 7d)	•	842,908	1,049,206
Æ	11		·	A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•	3,549,519	3,129,235
	12			11 (must equal Part VIII, column (A),	line	3,349,319	3,129,233
	12		=			43,043,961	38,644,884
	13	Grants	and similar amounts paid (P	art IX, column (A), lines 1-3)		2,250,793	258,714
	14	Benefit	ts paid to or for members (Pa	rt IX, column (A), line 4)		0	0
46	15	Salarıe	es, other compensation, empl	oyee benefits (Part IX, column (A), line	s 5-		40.057.070
δ		10)				14,851,568	13,867,873
Expenses	16a		- ,	IX, column (A), line 11e)		0	0
五	b		ndraising expenses (Part IX, column		_		
	17			A), lines 11a-11d, 11f-24f)		24,618,065	23,683,748
	18			must equal Part IX, column (A), line 25	-	41,720,426	37,810,335
(7)	19	Reven	ue less expenses Subtract li	ne 18 from line 12		1,323,535	834,549
Net Assets of Fund Balances					_	g of Current Year	End of Year
5 <u>č</u>	20	Total a	assets (Part X, line 16)			31,985,329	31,449,325
2 B	21					14,728,025	13,254,291
200	22			act line 21 from line 20		17,257,304	18,195,034
Pai	t II		ature Block				
		_		mined this return, including accompanying	schedules and s	tatements, and	to the best of my
	ledge a ledge.		f, it is true, correct, and comple	ete. Declaration of preparer (other than off	icer) is based on	all information	of which preparer has any
		****	**		20	011-11-10	
Sign	1	Signa	ature of officer			ate	
Here			N MCCARTHY CEO				
			or print name and title				
		Print/Type		Preparer's signature LEGACY	Date	Check if self-	PTIN
Paid		preparer's	PROFESSIONALS LLP	PROFESSIONALS LLP		employed 🕨 🦵	
<sup>O</sup> repa	arer	Firm's nar	me LEGACY PROFESSIONALS LLP				Firm's EIN
Use (		Firm's add	iress   311 S WACKER DRIVE STE	4000			Phone no • (312) 368-
	- 1		CHICAGO II 60606				0500

May the IRS discuss this return with the preparer shown above? (see instructions) . . . .

Par		tement of Program Service Ac			
1	Briefly des	cribe the organization's mission			
IMPR PRO	ROVED WHI GRAMS OF	EXPAND THE USES OF PORTLAND CE CH CONTRIBUTES TO A BETTER ENV MARKET DEVELOPMENT,EDUCATION ERS (CEMENT COMPANIES IN THE U	'IRONMENT IN PRACTICE, I,RESEARCH,TECHNICAL SE	THIS MANDATE MEANS V	VELL-ROUNDED
2	_	anızatıon undertake any sıgnıfıcant prog rm 990 or 990-EZ?	ram services during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," de	scribe these new services on Schedule	0		
3	_	anızatıon cease conductıng, or make sıç	<del>-</del>	nducts, any program	┌ Yes ┌ No
	If "Yes," de	scribe these changes on Schedule O			
4	Section 50	ee exempt purpose achievements for ea 1(c)(3) and 501(c)(4) organizations and to others, the total expenses, and reve	d section 4947(a)(1) trusts a	re required to report the am	· · · · · · · · · · · · · · · · · · ·
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	RESOURCES	EMENT ASSOCIATION (PCA) IS A VOLUNTARY AS , PROMOTIONAL MATERIAL, MARKET RESEARCH ND ITS MEMBER ORGANIZATIONS			
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	PCA'S PUBLI	CATIONS AND DESIGN AIDS MAKE IT EASIER TO	BUILD WITH CONCRETE AND INCLU	DE THE LATEST INFORMATION ON	I QUALITY
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
4d	Other pro	gram services (Describe in Schedule O	)		
	(Expense:	•	•	) (Revenue \$	)
40	Total proc	ram service evnenses#4			

Part TV	Checklist	of Re	auired	Schedules
	CIICCNIISC	01 110	uun cu	Schodules

			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		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
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 U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		Νο
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		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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 Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

	Check if Schedule O contains a response to any question in this Part V	•	•1	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	1a 15			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
3	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			
b	return			
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
3	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	Yes	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N (
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	-		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	5c 6a		N
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	, , , , , ,	9b		
)	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3				
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	13c	ء ما		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		l No

**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a respo						

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax  vear			
ь	year			
U	independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
	other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
a b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9			162	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
r	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		, 03	
·	describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	161		
	ection C. Disclosure	16b		
	List the States with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization LAURA NEDLI

5420 OLD ORCHARD ROAD SKOKIE, IL 600771083

(847) 966-6200

# 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 organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 neither the organ		elated o	ated organization compensa					sated any current officer, director, or trustee					
(A) Name and Title	(B) A verage hours	Posi	(C Position (			(C) sition (check all that apply)					( <b>D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	<b>(F)</b> Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
See Additional Data Table													
-													
			<u> </u>										

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

	<b>(A)</b> Name and Title	(B) A verage hours per	1	(tion that a	•				( <b>E</b> Repor comper from	table Isation	(E) Reportable compensation from related	,	(F) Estima amount o compens	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	organiza 2/1099	tion (W-	organizations (W- 2/1099- MISC)	c	from t organizati relat organiza	the on and ed
See A	addıtıonal Data Table													
												+		
				$\vdash$								-		
				-			<del>                                     </del>					+		
				-										
1b	Sub-Total					٠.	٠	<b>&gt;</b>						
С	Total from continuation sheet						F							
d	Total (add lines 1b and 1c)							<u> </u>		,705,847		0	;	340,488
2	Total number of individuals (in \$100,000 in reportable compe					ted	above	) who	received	more tha	in			
													Yes	No
3	Did the organization list any <b>fc</b>	<b>ormer</b> officer, direc	tor or t	ruste	e, k	ey e	mploy	ee, c	or highest	compens	ated employee		res	140
	on line 1a? If "Yes," complete S					•	•	•				3		Νo
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1	a receive or accri	ue comi	- oensa	- ation	fror	n anv	unre	lated orga	nızatıon o	or individual for	-4	res	
	services rendered to the organ										•	5		Νo
	ection B. Independent Co  Complete this table for your five		nsated	ındep	ende	ent o	ontra	tors	that rece	ıved mor	e than			
	\$100,000 of compensation fro	m the organizatio		•										
	N	(A) ame and business add	dress							Descr	( <b>B</b> ) ription of services		(C Comper	
												$\dashv$		
									-					

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ▶0

Form 9		(2010)  Statement of Revenu	10				Pa	ge <b>9</b>
		statement of Revent	16		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections
								513, or 514
Contributions, gifts, grants and other similar amounts		Federated campaigns	<b>1a</b>					
gr. mot		Membership dues						
ĭfts, aral		Fundraising events						
s, g mik		Related organizations  Government grants (contributions)						
tíon ar sí		All other contributions, gifts, grants,	1e	42,000				
ribu othe		sımılar amounts not ıncluded above	2	42,000				
onti	_	Noncash contributions included in li	_		42.000			
<u>ं</u>	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·	T	42,000			
nue	2a			Business Code				
Program Serwce Revenue		MEMBERSHIP DUES		541900		33,414,186		
ce F	b c	INCOME FROM SERVICES CONTRACT REVENUE		541900 541900	455,163 279,583			
er vi	d			541900	275,511	275,511	40,333	
m S	е							
ogra	f	All other program service rev	/enue					
<u>Ā</u>	g	Total. Add lines 2a-2f			34,424,443			
	3	Investment income (includin			427,529			427,529
	4	and other similar amounts) Income from investment of tax-exe			427,329			427,329
	5	Royalties						
		[	(ı) Real	(II) Personal				
		Gross Rents	921,725					
	_	Less rental expenses						
		Rental income or (loss)	921,725					
	d	Net rental income or (loss)		1 () 2.1	921,725			921,725
	7a	Gross amount	(i) Securities 16,808,038	(II) O ther 71,184				
		from sales of assets other						
	ь	than inventory Less cost or	16,184,505	73,040				
		other basis and sales expenses						
		Gain or (loss)	623,533	-1,856				
		Net gain or (loss)		1	621,677			621,677
Other Revenue	oa	Gross income from fundraisir (not including	ig events					
¥		\$ of contributions reported on I	ine 1c)					
Ř		See Part IV, line 18	•					
the	h	Less direct expenses	a . b					
Ò		Net income or (loss) from fur						
	9a	Gross income from gaming a	ctivities See Part IV, line 19 . a					
		Less direct expenses		ь				
		Net income or (loss) from ga  Gross sales of inventory, les		1				
		returns and allowances .	3					
			a	1,176,641				
		Less cost of goods sold .  Net income or (loss) from sa		305,830	870,811	870,811		
	_	Miscellaneous Revenue	·······	Business Code	,	, -		
	11a	SPECIAL ASSESSMENT		900099	808,879	808,879		
	Ł	MISCELLANOUS		900099	527,820	527,820		
	c							
		d All other revenue						
	e	Total. Add lines 11a-11d .	· · · · · · •		1,336,699			
	12	Total revenue. See Instruction	ons		20 644 004		40.053	1 070 021
					38,644,884	36,583,000		1,970,931

	990 (2010)				Page <b>10</b>
Par	Statement of Functional Expenses  Section 501(c)(3) and 501(c)(4) organizations mus	t commists = II -	olumna		
А	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	215,107			
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	43,607			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,416,687			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	9,107,731			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	732,988			
0		<u> </u>			
9	Other employee benefits	757,381			
10	Payroll taxes	853,086			
а	Fees for services (non-employees) Management				
b	Legal	931,563			
С	Accounting	59,768			
d	Lobbying	694,867			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	20,661			
g	Other	4,240,225			
12	Advertising and promotion	534,083			_
13	Office expenses	768,866			_
14	Information technology	262,119			
15	Royalties				_
16	Occupancy	2,187,515			
17	Travel	1,325,197			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	950,847			
20	Interest	350			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	380,239			
23	Insurance	242,502			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	ALLIED INDUSTRY EXPENSE	10,287,068			
ь	DUES AND SUBSCRIPTIONS	518,887			
С	EDUCATION	112,403			
d	LITERATURE	104,637			
е	FOREIGN EXCHANGE DIFFER	56,433			
f	All other expenses	5,518			
25	Total functional expenses. Add lines 1 through 24f	37,810,335			
26	<b>Joint costs.</b> Check here ► □ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				200 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			5,677,807	1	6,875,094
	2	Savings and temporary cash investments			1,352,000	2	119,841
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			4,230,340	4	6,332,946
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$ , and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	mploy	ers, and			
S S		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use			1,371,470	8	1,095,805
	9	Prepaid expenses and deferred charges			1,001,956	9	845,288
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	11,681,014			
	ь	Less accumulated depreciation	10b	9,538,461	1,863,573	10c	2,142,553
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			7,519,608	12	7,636,082
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			8,968,575	15	6,401,716
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			31,985,329	16	31,449,325
	17	Accounts payable and accrued expenses .			2,852,058	17	2,550,467
	18	Grants payable			1,562,500	18	375,000
	19	Deferred revenue			415,450	19	247,154
	20	Tax-exempt bond liabilities				20	
Se	21	Escrow or custodial account liability Complete Part IV of Schedul				21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties		•		23	_
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			9,898,017	25	10,081,670
	26	Total liabilities. Add lines 17 through 25			14,728,025	26	13,254,291
- N		Organizations that follow SFAS 117, check here ▶ ☐ and comp	let e l	ines 27			
⊕⊃l		through 29, and lines 33 and 34.					
Fund Balances	27	Unrestricted net assets				27	
Ва	28	Temporarily restricted net assets			28	_	
рu	29	Permanently restricted net assets				29	
Fu		Organizations that do not follow SFAS 117, check here ▶ 🔽 ar	ıd con	ıplete			
ō		lines 30 through 34.			_		_
	30	Capital stock or trust principal, or current funds			0		0
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			0	H	0
	32	Retained earnings, endowment, accumulated income, or other fu	ınds		17,257,304		18,195,034
Net	33	Total net assets or fund balances			17,257,304	33	18,195,034
	34	Total liabilities and net assets/fund balances			31,985,329	34	31,449,325

Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		38,6	544,88
2	Total expenses (must equal Part IX, column (A), line 25)	2		· ·	310,33
3	Revenue less expenses Subtract line 2 from line 1	3			34,54
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		17,2	257,30
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1	103,18
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		18,1	195,034
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in	n			
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

# Software ID: Software Version:

**EIN:** 36-1638940

Name: PORTLAND CEMENT ASSOCIATION

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Posi t	tion ( hat a	(che	)			( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
BRIAN MCCARTHY CEO/PRESIDENT	40 00	Х		х				493,813	0	147,251
ARIS J PAPADOPOULOS CHAIR	1 00	Х						0	0	0
GILBERTO PEREZ VICE CHAIR	1 00	X						0	0	0
STEVE AMBROSE DIRECTOR	1 00	Х						0	0	0
MARK ANDERSON DIRECTOR	1 00	X						0	0	0
THOMAS BECK DIRECTOR	1 00	Х						0	0	0
OLIVIER BIEBUYCK DIRECTOR	1 00	X						0	0	0
JAMES BRASLETON DIRECTOR	1 00	Х						0	0	0
MEL BREKHUS DIRECTOR	1 00	Х						0	0	0
CARY COHRS DIRECTOR	1 00	Х						0	0	0
ROBERT COOPER DIRECTOR	1 00	Х						0	0	0
FRANK CRADDOCK DIRECTOR	1 00	Х						0	0	0
JAMES DERKATCH DIRECTOR	1 00	Х						0	0	0
GEORGE DOUMET DIRECTOR	1 00	Х						0	0	0
GARY EATHORNE DIRECTOR	1 00	Х						0	0	0
MARTIN FALLON DIRECTOR	1 00	Х						0	0	0
ENRIQUE ESCALANTE DIRECTOR	1 00	Х						0	0	0
DUNCAN GAGE DIRECTOR	1 00	Х						0	0	0
SYLVAIN GARNAUD DIRECTOR	1 00	Х						0	0	0
JAMES GATENS DIRECTOR	1 00	Х						0	0	0
JOSEPH GOSS DIRECTOR	1 00	Х						0	0	0
GEORGE GREGORY DIRECTOR	1 00	Х						0	0	0
ALLEN HAMBLEN DIRECTOR	1 00	Х						0	0	0
DANIEL M HARRINGTON DIRECTOR	1 00	Х						0	0	0
JUAN CARLOS HERRERA DIRECTOR	1 00	Х						0	0	0
JUAN CARLOS HERRERA										_

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		tion ( hat a	che	)		ı	( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
FA INNIS DIRECTOR	1 00	×						0	0	0	
R MICHAEL JOHNSON DIRECTOR	1 00	х						0	0	0	
ROBERT KIDNEW DIRECTOR	1 00	×						0	0	0	
DAVID LOOMES DIRECTOR	1 00	х						0	0	0	
ERIK MADSEN DIRECTOR	1 00	Х						0	0	0	
KIMBALL MCCLOUD DIRECTOR	1 00	Х						0	0	0	
GERRY MCKERVEY DIRECTOR	1 00	х						0	0	0	
JASON MORIN DIRECTOR	1 00	х						0	0	0	
DAVID NEPERENY DIRECTOR	1 00	х						0	0	0	
PAUL OSTRANDER DIRECTOR	1 00	х						0	0	0	
ANDRES OSUNA DIRECTOR	1 00	х						0	0	0	
SCOTT PALMER DIRECTOR	1 00	х						0	0	0	
SILVIO PANSERI DIRECTOR	1 00	х						0	0	0	
LUC PAPILLON DIRECTOR	1 00	х						0	0	0	
JAMES REPMAN DIRECTOR	1 00	х						0	0	0	
KARI SARAGUSA DIRECTOR	1 00	х						0	0	0	
RAYMOND SEIPP DIRECTOR	1 00	Х						0	0	0	
SATISH SHETH DIRECTOR	1 00	х						0	0	0	
GUY SIDOS DIRECTOR	1 00	х						0	0	0	
ROGER SMITH JR DIRECTOR	1 00	Х						0	0	0	
CHARLES SUNDERLAND DIRECTOR	1 00	х						0	0	0	
CHRISTOPHE TEMPIER DIRECTOR	1 00	х						0	0	0	
BERNARD TERVER DIRECTOR	1 00	х						0	0	0	
FRANCISCO UZCATEGUI DIRECTOR	1 00	х						0	0	0	
ALLEN WALSH DIRECTOR	1 00	×						0	0	0	

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

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
KARL WATSON JR DIRECTOR	1 00	Х						0	0	0
GEORGE M WELLS DIRECTOR	1 00	Х						0	0	0
STEVE WISE DIRECTOR	1 00	Х						0	0	0
WALTER WULF JR DIRECTOR	1 00	Х						0	0	0
STEVE ZELLMER DIRECTOR - PAST	1 00	Х						0	0	0
CRAIG STARKEY DIRECTOR - PAST	1 00	Х						0	0	0
DAVE HUMMEL DIRECTOR - PAST	1 00	Х						0	0	0
ALAN KREISBERG DIRECTOR - PAST	1 00	Х						0	0	0
ANDREW O'HARE VP REGULATORY AFFAIRS	40 00			х				194,664	0	23,743
DAVID HUBBARD VP LEGISLATIVE AFFAIRS	40 00			х				168,317	0	12,486
JOHN SHAW SENIOR VP GOVERNMENT AFFAI	40 00			х				238,059	0	23,743
JAN FARNSWORTH CORP SEC'Y	40 00			х				108,625	0	7,200
LAURA NEDLI CFO	40 00			х				204,292	0	12,895
PIERRE BOUCHER PAST PRESIDENT CANADIAN OPERATI	40 00				x			353,569	0	15,529
MICHAEL MCSWEENEY PRESIDENT CANADIAN OPERATI	40 00				х			220,019	0	3,415
JOHN PRENTICE SENIOR VP	40 00					Х		137,253	0	17,639
EDWARD SULLIVAN CHIEF ECONOMIST	40 00					Х		178,220	0	32,583
STEPHEN SZOKE DIR OF CODES & STANDARDS	40 00					Х		138,212	0	12,442
STEVEN KOSMATKA VP	40 00					Х		124,586	0	16,908
MARK JUSTMAN VP	40 00					Х		146,218	0	14,654

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DLN: 93493314035871

# OMB No 1545-0047

## **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

**Political Campaign and Lobbying Activities** 

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

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

- ◆ 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

Se   Se   If th	ection 501(c)(3) organizations that ection 501(c)(3) organizations that	have filed Form 5768 (election und have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 ( cations, Complete Part III	ler section 501(h)) n under section 501	Complete Part II-A Do n I(h)) Complete Part II-B	ot co	omplete not co	e Part II-B mplete Part	II-A
Na	me of the organization	adione complete rare in		Employer	ıde	ntıfıc a	tion numbe	er
POI	RTLAND CEMENT ASSOCIATION			26 1620	0.40			
Par	t I-A Complete if the or	ganization is exempt unde	r section 501(	36-1638 c) or is a section			anizatio	n.
1	<u> </u>	ganization's direct and indirect pol						
2	•	janization's direct and indirect por	itical campaign ac	LIVILIES III PAIL IV		_		40.750
3	Political expenditures			•	'	\$		40,750
3	V olunteer hours							0
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(	c)(3).				
1	Enter the amount of any excise	tax incurred by the organization (	under section 495!	5	۰	\$		
2	Enter the amount of any excise	tax incurred by organization man	agers under sectio	n 4955	١	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?				☐ Yes	 Г No
4a	Was a correction made?	,	,				Yes	□ No
ь	If "Yes," describe in Part IV						,	,
		ganization is exempt unde	r section 501(	c) except section	50	1(c)	(3).	
1	•	nded by the filing organization for	-	•	<b>&gt;</b>	\$		
2	, .	rganization's funds contributed to				Ψ		
_	exempt funtion activities		other organization	5 101 50001011 527	F	\$		
3	Total exempt function expendit	ures Add lines 1 and 2 Enter her	re and on Form 112	20-POL. line 17b	Þ			
	·			· ·, ·····		\$ <u> </u>		
4	Did the filing organization file <b>F</b>	,					,	,
5	organization made payments F amount of political contribution	d employer identification number for each organization listed, enter is received that were promptly and political action committee (PAC)	the amount paid fr directly delivered	om the filing organizati to a separate political	on's orga	funds anızatı	Also ente ion, such a	rthe
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fro		con	A mount of stributions i and promptl	received

(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
(1) PORTLAND CEMENT ASSOCIATION POLITICAL ACTION COMMITTEE	500 NEW JERSEY AVENUE NORTHWEST 7T WASHINGTON, DC 20001	36-1638940	0	44,250

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a			)		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns						
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		have to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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

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

### Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	26,687,15	1
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).			_
а	Current year	2a	1,931,40	3
b	Carryover from last year	2b	17,97	7
С	Total	2c	1,949,38	ō
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	1,921,47	5
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	27,90	5
5	Taxable amount of lobbying and political expenditures (see instructions)	5	,	_

#### 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, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN		CONTRIBUTIONS TO CANDIDATES FOR OFFICE IN THE GREAT LAKES REGION
ACTIVITIES		

DLN: 93493314035871

OMB No 1545-0047

Open to Public Inspection

### **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, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization PORTLAND CEMENT ASSOCIATION

**Employer identification number** 36-1638940

Pa	rt I Organizations Maintaining Donor Adorganization answered "Yes" to Form 99		unds or Accounts. Complete if the
	organization anowered Tes to Form 95	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny other purpose Yes No
Pai	<b>Conservation Easements.</b> Complete	ıf the organization answered "Yes" t	o Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the o  Preservation of land for public use (e.g., recreated Protection of natural habitat  Preservation of open space  Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	historically importantly land area certified historic structure of a conservation
	easement on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d
3	Number of conservation easements modified, transfe	ı erred released extinguished or terminate	ed by the organization during
	the taxable year 🕨	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
4	Number of states where property subject to conserve	ation easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of violations, and <b>Yes No</b>
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents during the year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during the year ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	(d) above satisfy the requirements of sec	Tyes No
9	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financial	
Par	<b>t III</b> Organizations Maintaining Collection Complete if the organization answered		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>►</b> \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

**b** Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2010

anization's accession and other all that apply)  chibition  research  tion for future generations cription of the organization's car, did the organization solicity sold to raise funds rather than the solicity of the solici	or receive donation to be maintained as gements. Complete mount on Form 9 dian or other interm  To and complete the	d e ain hor s of ar part of ete if 90, Po ediary efollow	w they for the or art X, or for cor	oan or exclother  further the or rical treasurganization and treasurganization and treasurganization and treasurganization and treasurganization and treasurganizations of the second and treasurgan	hange programs organization's e ires or other sir 's collection? n answered "\	xempt purpose milar Yes" to Form 9	ın <b>Yes</b>	□ No
tion for future generations cription of the organization's c ar, did the organization solicit sold to raise funds rather than bw and Custodial Arrang V, line 9, or reported an a zation an agent, trustee, custo orm 990, Part X? ain the arrangement in Part XI lance ring the year during the year ce ization include an amount on F ain the arrangement in Part XI wment Funds. Complete	or receive donation to be maintained as gements. Complement on Form 9 odian or other intermally and complete the form 990, Part X, lings	e ain hor s of ar s part of ete if 90, Prediary e follow	w they for the or the or art X, for cor	other further the of rical treasurganization ganization line 21.	organization's e ires or other sir 's collection? n answered "V or other assets 1c 1d 1e	xempt purpose nilar Yes" to Form 9 not	「Yes 990, 「Yes mount	<u>,                                     </u>
tion for future generations cription of the organization's of ar, did the organization solicit sold to raise funds rather than by and Custodial Arrang V, line 9, or reported an a ration an agent, trustee, custo orm 990, Part X? ain the arrangement in Part XI lance ring the year during the year ce ization include an amount on F ain the arrangement in Part XI wment Funds. Complete	or receive donation to be maintained as gements. Complement on Form 9 odian or other intermally and complete the form 990, Part X, lings	s of arginal spart of the spart	w they for the or art X, for cor	rical treasurganization	or other assets  1c  1d  1e	rot rollar	「Yes 990, 「Yes mount	<u>,                                     </u>
ar, did the organization's car, did the organization solicity sold to raise funds rather than the arrangement in Part XI with a arrangement in Part XI with	or receive donation to be maintained as gements. Complement on Form 9 odian or other intermally and complete the form 990, Part X, lings	s of arginal spart of the spart	t, histo of the o the or art X, for cor	rical treasurganization ganization Ine 21. htributions (	or other assets  1c  1d  1e	rot rollar	「Yes 990, 「Yes mount	<u>,                                     </u>
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w and Custodial Arrange V, line 9, or reported an a section an agent, trustee, custodorm 990, Part X? ain the arrangement in Part XI lance ring the year during the year ce ization include an amount on Fain the arrangement in Part XI wment Funds. Complete year balance	gements. Complete mount on Form 9 or other interm  IV and complete the form 990, Part X, linus  V  If the organization	ete If 90, Pa ediary follow	the or art X, for cor	ganization line 21.	or other assets  1c 1d 1e	not	☐ Yes	□ No
orm 990, Part X? ain the arrangement in Part XI lance ring the year during the year ce ization include an amount on F ain the arrangement in Part XI wment Funds. Complete	IV and complete the Form 990, Part X, lir V If the organizatio	ne 21?	ving tab		1c 1d 1e		mount	□ No
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ization include an amount on F ain the arrangement in Part XI <b>wment Funds.</b> Complete year balance	v ıf the organizatio	n ans			<u> </u>		 ☐ Yes	
ain the arrangement in Part XI  wment Funds. Complete  year balance	v ıf the organizatio	n ans					ı Yes	
wment Funds. Complete	ıf the organizatio						,	No
year balance					Fauna 000 P			
	(a) carrent rear		)Prior Ye			rt IV, line 10. )Three Years Back	(e)Four \	ears Back
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arnings or losses								
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stimated percentage of the ye	ar end balance held	as						
ated or quasi-endowment 🕨								
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scription of investment					basis (other)	depreciation	( <b>d)</b> B	ook value
					215,683			215,683
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rovements						+	_	653,798
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1	organizations	dowment funds not in the possession of the organization organizations	dowment funds not in the possession of the organization by organizations	flowment funds not in the possession of the organization that are by organizations	dowment funds not in the possession of the organization that are held and a by organizations	Towment funds not in the possession of the organization that are held and administered for by organizations	lowment funds not in the possession of the organization that are held and administered for the by organizations	As a recommendation of the organization that are held and administered for the organizations organizations organizations organizations organizations organizations organizations listed as required on Schedule R? organizations organizations listed as required on Schedule R? organizations organizations endowment funds  **Stments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.**  **Scription of investment organizations is endowment funds  **Stments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.**  **Scription of investment organizations is endowment funds  **Stription of i

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end-of-year market value
(2)Closely-held equity interests (3)Other		
(A) MARKETABLE SECURITIES	7,636,082	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	7,636,082	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(2, 2 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cost or end-of-year market value
<b>Table</b> (Colored (I) should and Fore 2000 Back V and (D) back 2000	<u> </u>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. See Form 990, Part X, li	<u> </u>	
(a) Descri		(b) Book value
(1) INVESTMENT IN SUSIDIARY	F	6,166,876
(2) DIVIDENDS RECEIVABLE		200,000
(3) ACCRUED INTEREST AND DIVIDENDS		31,425
(4) DUE FROM RELATED PARTY		100
(5) DUE FROM ACPA		3,315
Tabel (Caluman (b) abouted annual Farma 2000 Bank V. ant (B) time	15.)	6 401 716
Total. (Column (b) should equal Form 990, Part X, col.(B) line		<b>▶</b> 6,401,716
Part X Other Liabilities. See Form 990, Part		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
LIABILITY FOR PENSION BENEFIT	9,790,092	
DEFERRED CLAIMS RESERVE	150,000	
DUE TO RELATED ORGANIZATIONS	141,578	
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	10.001.670	
Total (Column (b) should equal Form 530, Falt A, COI (B) IIIIe 23 )	10,081,670	

1 Total revenue (Form 990, Part XII, column (A), line 12)	Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
3   Excess or (deficit) for the year Subtract line 2 from line 1   3   4   4   4   4   4   4   4   4   4	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
## Net unrealized gains (losses) on investments ## 4	2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
5	3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
6 Investment expenses 6 7 Prior period adjustments 7 Prior period adjustments 7 Prior period adjustments 8 7 Prior period adjustments (net) Add lines 4 - 8 9 9 10 10 10 10 10 10 10 10 10 10 10 10 10	4	Net unrealized gains (losses) on investments	4	
7 Prior period adjustments	5	Donated services and use of facilities	5	
8 Other (Cescribe in Part XIV) 9 Total adjustments (net) Add lines 4 - 8 9 Total adjustments (net) Add lines 4 - 8 10 Excess or (deficit) for the year par financial statements Combine lines 3 and 9 10 Total revenue, gains, and other support per audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements With Revenue per Return 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments 2b D	6	Investment expenses	6	
9 Total adjustments (net) Add lines 4 - 8  10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9  10 Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return  1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12  a Net unrealized gains on investments	7	Prior period adjustments	7	
10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9  Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return  1 Total revenue, gains, and other support per audited financial statements	8	Other (Describe in Part XIV)	8	
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return  1 Total revenue, gains, and other support per audited financial statements	9	Total adjustments (net) Add lines 4 - 8	9	
1 Total revenue, gains, and other support per audited financial statements	10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
A mounts included on line 1 but not on Form 990, Part VIII, line 12  a Net unrealized gains on investments	Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Reti	urn
a Net unrealized gains on investments	1	Total revenue, gains, and other support per audited financial statements	1	
b Donated services and use of facilities	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
C   Recoveries of prior year grants   2c   2d   2d   2d   2d   2d   2d   2d	а	Net unrealized gains on investments		
Mathematical Content   Mathematical Content	ь	Donated services and use of facilities		
e       Add lines 2a through 2d       2e         3       Subtract line 2e from line 1       3         4       Amounts included on Form 990, Part VIII, line 12, but not on line 1       4a         a       Investment expenses not included on Form 990, Part VIII, line 7b       4a         b       Other (Describe in Part XIV)       4b         c       Add lines 4a and 4b       4c         5       Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)       5         Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return         1       Total expenses and losses per audited financial statements with Expenses per Return         1       Total expenses and losses per audited financial statements with Expenses per Return         1       Total expenses and losses per audited financial statements with Expenses per Return         2       Amounts included on line 1 but not on Form 990, Part IX, line 25         a       Donated services and use of facilities       2a         b       Prior year adjustments       2b         c       Other (Describe in Part XIV)       2d         c       Other (Describe in Part XIV)       2d         e       Add lines 2a through 2d       2e         3       3         4 <t< th=""><th>c</th><th>Recoveries of prior year grants</th><th></th><th></th></t<>	c	Recoveries of prior year grants		
3 Subtract line 2e from line 1	d	Other (Describe in Part XIV) 2d		
A mounts included on Form 990, Part VIII, line 12, but not on line 1  a Investment expenses not included on Form 990, Part VIII, line 7b . 4b  b Other (Describe in Part XIV)	e	Add lines 2a through 2d	2e	
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a   4b   4b   4c   4c   4d   4b   4c   4c   4c   4c   4c   4c   4c	3	Subtract line <b>2e</b> from line <b>1</b>	3	
b Other (Describe in Part XIV)	4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
C Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	]	
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	b	Other (Describe in Part XIV)	]	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return  1	С	Add lines <b>4a</b> and <b>4b</b>	4c	
1 Total expenses and losses per audited financial statements				
statements			per Re	eturn
A mounts included on line 1 but not on Form 990, Part IX, line 25  a Donated services and use of facilities	1		<sub>1</sub>	
Donated services and use of facilities	2		<del>-</del> +	
c Other losses				
d Other (Describe in Part XIV)	ь	Prior year adjustments	1	
d Other (Describe in Part XIV)	c	Other losses	1	
Subtract line 2e from line 1	d		1	
A mounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b 4a  b Other (Describe in Part XIV)	e	Add lines <b>2a</b> through <b>2d</b>	2e	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	3	Subtract line <b>2e</b> from line <b>1</b>	3	
b Other (Describe in Part XIV)	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	]	
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	b	Other (Describe in Part XIV)		
	c	A dd lines <b>4a</b> and <b>4b</b>	4c	
Part XIV Supplemental Information			5	
	Par	t XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		PCA, INCLUDING ACTIVITIES OF THE REGIONAL DIVISIONS AND CANADA FILE FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, AND FORM 990-T, EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN, WITH THE INTERNAL REVENUE SERVICE THESE RETURNS ARE SUBJECT TO EXAMINATION UNTIL THE APPLICABLE STATUTE OF LIMITATIONS EXPIRE

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DLN: 93493314035871

OMB No 1545-0047

Open to Public Inspection

## **SCHEDULE F** (Form 990)

Department of the Treasury

Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

**Statement of Activities Outside the United States** 

Name of the organization

**Employer identification number** 

OKI	LAND CEMENT ASSOCIATION	I			36-1638940	
Par	<b>General Informatio</b> "Yes" to Form 990, Pa	n on Activiti rt IV, lıne 14t	es Outside t	he United States. (	Complete if the organiz	ation answered
	<b>For grantmakers.</b> Does the cassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or assi	stance, and the select	tion criteria used to awa	
	<b>For grant makers.</b> Describe in Pa United States	rt V the organiz	zation's procedu	res for monitoring the us	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed	)		
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	<b>(f)</b> Total expenditures for region/investments in region
	CANADA	5	39		IMPROVE AND EXPAND THE USES OF PORTLAND CEMENT AND CONCRETE THROUGH EDUCATIONAL SUPPORT AND PROMOTION	5,460,246
	-				I KOTTO TION	
_	Cub total		39			5,460,246
	Sub-total Total from continuation sheets		39			5,460,246

c Totals (add lines 3a and 3b)

5,460,246

(a) Name of againzation and ETN (f applicable)  NORTH AMERICA CONTRIBUTION 10,000 CHECK  NORTH AMERICA CONTRIBUTION 10,	Pa	Part IV, I	line 15, for any		nizations or Entitice eived more than \$5,					
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	1		section and EIN (if	(c) Region			cash	of non-cash	of non-cash	(i) Method of valuation (book, FMV, appraisal, other)
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter				NORTH AMERICA	CONTRIBUTION	10,000	CHECK			
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter			1		_					
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter										
3 Enter total number of other organizations or entities	2	Enter total nur tax-exempt by	mber of recipie the IRS, or fo	ent organizations li	sted above that are i	recognized as charit ovided a section 50:	ties by the foreign c 1(c)(3) equivalency	ountry, recognized letter	as . ►	
Schedule F (Form 990) 2010	3	Enter total nur	mber of other	organızatıons or er	ntities					37

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>.                                    </u>		!		
			<u>.                                    </u>			1	
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			1		!		
			1		,		

# Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	<b>▽</b>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	V	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier Fault Part I | Part

Identifier	ReturnReference	Explanation
METHOD USED TO ACCCOUNT		SCHEDULE F, PART I, LINE 3 ACCRUAL - US GAAP
FOR EXPENDITURES		
- CK EXT ENDITORED		
		<del> </del>

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Schedule I (Form 990)

# Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2010

DLN: 93493314035871

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990

Inspection

Employer identification number

PORTLAND CEMENT ASSOCIA	NOITA					36-1638940	
Part I General Inform	nation on Grants	and Assistance				30-1030940	
<ol> <li>Does the organization mains the selection criteria used</li> <li>Describe in Part IV the organization</li> </ol>	ntain records to subs I to award the grants (	tantiate the amount of th		·			√ Yes
Form 990, Part I'	V, line 21 for any r	Governments and received ded	d more than \$5,000.	. Check this box if n	o one recipient rec	ceived more than \$5,	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) IOWA STATE UNIVERSITY3906 ADMINISTRATIVE SERVICES BUILDING AMES,IA 500113609	42-6004224	115	60,000				RESEARCH
(2) CITIZENS FOR BILL BRADY3130 PINE TREE ROAD LANSING,MI 48911	37-1286071		25,000				CONTRIBUTION
(3) PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION 5420 OLD ORCHARD ROAD SKOKIE,IL 60077	36-4486749	501C3	82,226				EDUCATION
2 Ententatel number of seat	501/-)/3)	vernment erganizations				•	<u> </u>

Enter total number of other organizations .

Part III	Grants and Other Assistance to Individuals in the United States.	. Complete if the organization	answered "Yes	s" to Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	· · · · · · ·			

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(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.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE BOARD CAREFULLY REVIEWS ALL REQUESTS FOR DONATIONS AND GRANTS
MONITORING GRANTS		PRIOR TO THEIR APPROVAL AND DISBURSEMENT APPROVAL IS GRANTED ONLY TO REPUTABLE ORGANIZATIONS
IN THE U S		WHO HAVE SATISFIED THE BOARD'S DUE DILIGENCE NORMALLY, THE BOARD PERFORMS NO SUBSEQUENT
		MONITORING REGARDING THE USE OF DONATIONS AND GRANTS ADDITIONALLY, THERE IS A GOVERANCE
		STRUCTURE IN PLACE THAT REGULARLY REPORTS TO THE EXECUTIVE COMMITTEE AND BOARD OF DIRECTORS
		ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE MAINTAINED AT THE LOCAL OFFICE

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DLN: 93493314035871

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization PORTLAND CEMENT ASSOCIATION **Employer identification number** 

36-1638940

Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any 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 idemnification 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 in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	▼ Compensation committee     ▼ Written employment contract			1
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		<u> </u>
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies 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

(A) Name	,	(B) Breakdown of	fW-2 and/or 1099-MIS	SC compensation	(C) Retirement and			
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) BRIAN MCCARTHY	(ı) (ıı)	386,250 0	83,794 0	23,769 0	125,000	22,251 0	641,064	0 C
(2) ANDREW O'HARE	(ı) (ıı)	180,250 0	4,708 0	9,706	0	23,743 0	218,407	0 C
(3) DAVID HUBBARD	(ı) (ıı)	155,500 0	9,827 0	2,990	0	12,486 0	180,803	0 C
(4) JOHN SHAW	(ı) (ıı)	216,300 0	17,599 0	4,160 0	0	23,743 0	261,802 0	0 C
(5) LAURA NEDLI	(ı) (ıı)	160,000 0	25,216 0	19,076 0	0	12,895 0	217,187	0 C
(6) PIERRE BOUCHER	(ı) (ıı)	156,425 0	0	197,144	0	15,529 0	369,098	0 C
(7) MICHAEL MCSWEENEY	(ı) (ıı)	220,019 0	0	0 0	0	3,415 0	223,434	0 C
(8) JOHN PRENTICE	(ı) (ıı)	137,253 0	0	0 0	0	17,639 0	154,892 0	0 C
(9) EDWARD SULLIVAN	(ı) (ıı)	172,215 0	3,355 0	2,650 0	0	32,583 0	210,803	0 C
(10) STEPHEN SZOKE	(ı) (ıı)	138,212 0	0	0 0	0	12,442 0	150,654	0
(11) MARK JUSTMAN	(ı) (ıı)	146,218 0	0	0 0	- I	14,654 0	160,872	0
( 12 )			1					
(13)		1	1	1				
( 14 )		1	[					
(15)							<u> </u>	
( 16 )				<u> </u>			1	

## Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	PART I, LINE 4B	PCA MADE THE FOLLOWING CONTRIBUTIONS TO A SERP BRIAN MCCARTHY - 125,000

Schedule J (Form 990) 2010

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DLN: 93493314035871

OMB No 1545-0047

2010

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization PORTLAND CEMENT ASSOCIATION

**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

36-1638940

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		THE FOLLOWING ARE ALL BUSINESS RELATIONSHIPS ENRIQUE ESCALANTE, STEVE AMBROSE AND ANDRES OSUNA ALL WORK FOR GCC OF AMERICA GILBERTO PEREZ, FRANK CRADDOCK, JUAN CARLOS HERRERA, STEVE WISE, SATISH SHETH, KARL WATSON JR, FRANCISCO UZCATEGUI ALL WORK FOR CEMEX JAMES A BRASELTON, SYLVAIN GARNAUD, JOSEPH GOSS, OLIVIER BIEBUYCK, ROBERT COOPER AND MARK ANDERSON ALL WORK FOR LAFARGE NORTH AMERICA FA INNIS, DAVID LOOMES, JASON MORIN AND BERNARD TERVER ALL WORK FOR HOLCIM (US) AND PAUL OSTRANDER WORKS FOR HOLCIM (CANADA) JAMES DERKATCH, KARI SARAGUSA AND DANIEL M HARRINGTON WORK FOR LEHIGH HANSON AND ROBERT KIDNEW WORKS FOR TEXAS-LEHIGH GARY LEATHORNE, ALLEN HAMBLEN AND JAMES A REPMAN ALL WORK FOR CALPORTLAND JAMES GATENS WORKS FOR ASH GROVE TEXAS AND CHARLES T SUNDERLAND, GEORGE M WELLS WORK AT ASH GROVE GEORGE GREGORY AND SILVIO PANSERI WORK AT ESSROC DAVID A NEPERENY AND RAY MOND SEIPP WORK FOR BUZZI UNICEM USA R MICHAEL JOHNSON AND THOMAS BECK WORK FOR CONTINENTAL CEMENT COMPANY ROGER SMITH JR AND SCOTT PALMER WORK FOR SALT RIVER CEMENT COMPANY GUY SIDOS AND CHRISTOPHE TEMPIER WORK FOR NATIONAL CEMENT COMPANY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		CEMENT INDUSTRY MEMBERS ANY BUSINESS ORGANIZATION OR GROUP OF BUSINESS ORGANIZATIONS UNDER COMMON OWNERSHIP, GOVERNMENT AGENCY, OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OR SALE OR PORTLAND CEMENT IN THE UNITED STATES, ITS TERRITORIAL POSSESSIONS, CANADA, OR MEXICO SHALL BE ELIGIBLE TO BECOME A CEMENT INDUSRY MEMBER, SUBJECT TO A MINIMUM PAYMENT OF DUES TO BE ESTABLISHED ANNUALLY BY THE BOARD OF DIRECTORS IN THE CASE OF MEMBERSHIP APPLICANTS LOCATED IN A COUNTRY OTHER THAN THE UNITED STATES OR CANADA, ASSOCIATION MEMBERSHIP MAY BE GRANTED TO A CEMENT INDUSTRY TRADE ASSOCIATION REPRESENTING A MAJORITY OF CEMENT COMPANIES OF THAT COUNTRY THE ANNUAL FEE FOR MEMBERSHIP IN SUCH CASES SHALL BE DETERMINED BY THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		ALTHOUGH EACH MEMBER ONLY HAS "ONE VOTE", THERE ARE VARIOUS PERSONNEL (CEO, COO, SUBSIDIARY, ETC) ELIGIBLE TO BE A BOARD MEMBER

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 FORM WAS NOT DISTRIBUTED TO THE GOVERNING BODY PRIOR TO FILING THE FORM THIS YEAR

ldentifier	Return Reference	Explanation
VOTING BY DIRECTORS	FORM 990,PART VI, LINE 1A	THE VOTES OF DIRECTORS AT BOARD MEETING SHALL BE WEIGHTED PROPORTIONALLY ON THE BASIS OF SHIPMENTS (AS COMPUTED BY THE SECRETARY FOR THE LATEST CALENDAR YEAR) ON WHICH DUES HAVE BEEN PAID BY THE PCA MEMBER COMPANY WHOM THE DIRECTOR REPRESENTS IF A GIVEN PCE MEMBER (OR GROUP OF AN AFFILIATED MEMBER COMPANY) IS REPRESENTED BY MORE THAN ONE DIRECTOR, THE MEMBER COMPANY'S SHIPMENTS OR SHIPMENTS OF THE GROUP OF AFFILIATED MEMBER COMPANY SHALL BE ALLOCATED PRO RATA AMOUNG THOSE DIRECTORS PARTICIPATING IN THE MEETINGS

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEE MONITORS WITH FOLLOWUPS VIA EMAIL

Identif	ier Return Reference	Explanation
	1 '	COMPENSATION OF THE CEO IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS COMPENSATION FOR ALL EMPLOYEES, INCLUDING THE CEO, WAS EVAULATED BY SERVICES PROVIDED BY PATHFINDER GROUP IN 2009 WHICH USED AN MARKET COMP RATIO STUDY TO EVALUATE SALARIES

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	THE FORM 990 IS AVAILABLE UPON REQUEST

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -299,106 PRIOR PERIOD ADJUSTMENTS 706,411 EQUITY IN EARNINGS OF SUBSIDIARY -346,210 PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST -44,423 CUMULATIVE TRANSITION ADJUSTMENT 86,509 TOTAL TO FORM 990, PART XI, LINE 5 103,181

DLN: 93493314035871

SCHEDULE R (Form 990)

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization PORTLAND CEMENT ASSOCIATION		Employer identification number 36-1638940						
Part I Identification of Disregarded Entities (Co	mplete	ıf the organızatıo	n answered "Yes"	on Form 990, Par	•			
<b>(a)</b> Name, address, and EIN of disregarded entity		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Potal income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Orgon more related tax-exempt organizations duri			f the organization	ı answered "Yes" o	n Form 990, Part	IV, line 34 becau		
(a) Name, address, and EIN of related organization		<b>(b)</b> Prımary actıvıty	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section 5 cont organ	trolled nization
(1) PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION 5420 OLD ORCHARD ROAD SKOKIE, IL 60077 36-4486749		THE EDUCATIONAL OF THE CEMENT TRY	IL.	501(C)3	509(A)(1)		Yes	No No
(2) PORTLAND CEMENT ASSOCIATION POLITICAL ACTION COMMITTEE 5420 OLD ORCHARD ROAD SKOKIE, IL 60077 36-1638940	POLITI	CAL SUPPORT	IL	527				No
								-

Part III			anizations Taxal ted organizations t				answered "Y	es" on Form 990,	Part IV, lın	ie 34
(2)	(b)	(c)	(4)	(e)	(1)	(a)	(h)	(i)	(j) General or	

-							1					
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or agıng	<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	
Dart IV Identif	ication of Bolate	od Ora	onizations Taxa	ble as a Cornera	tion or Trust (C	omplote if the ora	120172	tion ar	acwared "Vec" on	Eorm	000	Dart IV

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

into 31 Because it had one of more related organizations dediced as a corporation of dask daring the tax year.									
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	<b>(h)</b> Percentage ownership		
(1) CONSTRUCTION TECHNOLOGY LABORATORIES INC 5420 OLD ORCHARD ROAD SKOKIE, IL60077 36-3478051	PERFORM INVESTIGATION, ANALYSIS AND TESTING OF STRUCTURES AND MATERIALS	IL		С		13,867,285	100 000 %		

cnea	mie k (Form 390) 2010		ŀ	Page	<u> </u>					
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)									
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Ye	s N	0					
<b>1</b> Du	iring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				_					
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	Ye	s						
b	<b>b</b> Gift, grant, or capital contribution to other organization(s)									
c	Gift, grant, or capital contribution from other organization(s)	1c	Ye	s						
d	d Loans or loan guarantees to or for other organization(s)									
e Loans or loan guarantees by other organization(s)										
_		4.5								
	Sale of assets to other organization(s)	1f		_	_					
_	Purchase of assets from other organization(s)	1g		N						
	Exchange of assets	1h			lo					
i I	Lease of facilities, equipment, or other assets to other organization(s)	1i	Ye	s	_					
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		N	lo					
k	k Performance of services or membership or fundraising solicitations for other organization(s)									
1 1	Performance of services or membership or fundraising solicitations by other organization(s)	11	Ye	s	_					
m	Sharing of facilities, equipment, mailing lists, or other assets	1m	Ye	s	_					
n	Sharing of paid employees	1n	Ye	s	_					
0	Reimbursement paid to other organization for expenses	10	Ye	s	_					
р	Reimbursement paid by other organization for expenses	1р	Ye	s						
q	O ther transfer of cash or property to other organization(s)	<b>1</b> q		N	lo					
r	Other transfer of cash or property from other organization(s)	1r	Ye	s	_					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds									
	(a) Name of other organization  (b) Transaction type(a-r)  (c) Amount involved in	(d) etermir ivolved		ımount	:					
1)										
	ditional Data Table				_					
2)										

Name of other organization	Transaction type(a-r)	Amount involved	Method of determining amount involved
(1)			
See Additional Data Table			
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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 assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

<b>(a)</b> Name, address, and EIN of entity	(b) Primary activity Legal domicile (state or foreign country)		section assets 501(c)(3) organizations?			rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eral or naging rtner?	
			Yes	No		Yes	No		Yes	N
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## Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010

Software ID: Software Version:

**EIN:** 36-1638940

Name: PORTLAND CEMENT ASSOCIATION

## Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION	В	82,226	
(2)	PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION	Р	20,100	
(3)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	R	200,000	
(4)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	А	-346,210	
(5)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	I	757,903	
(6)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	L	184,983	
(7)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	К	68,189	
(8)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	0	442,616	
(9)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	Р	190,827	
(10)	PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION	F	1,913	
(11)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	F	2,252	