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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

\ Fo	r the 2	2010 calendar year, or tax year beginning 01-01-2010	and ending 12-31-20	10			
_		oplicable C Name of organization AMERICAN CONCRETE INSTITUTE			D Employer	identificatio	n number
Add	lress ch	ange Doing Business As			38-0296	490	
_ Nar	ne char	nge			E Telephone	number	
_ Inıt _	ıal retur	Number and street (or P O box if mail is not delivered as 8800 COUNTRY CLUB DRIVE	ed to street address)	Room/suite	(248) 84	8-3700	
Ter	mınated	1 38800 COUNTRY CLUB DRIVE			C Cross resear	ata # 12 441 2	
Am	ended r	return City or town, state or country, and ZIP + 4 FARMINGTON HILLS, MI 48333			G Gross receip	ots \$ 13,441,2	52
App	lication	pending					
		F Name and address of principal officer RONALD BURG		H(a) Is this a	group return for affil	iates? Yes	▼ No
		38800 COUNTRY CLUB DRIVE		H(b) Are all	affiliates included	ь Г	Yes No
		FARMINGTON HILLS, MI 48333		1 ' '	," attach a lis	·	,
Ta	v-evem	pt status	4947(2)(1) or Γ 527		p exemption n		,
			4947(a)(1) 01 327	_			
W	ebsit e	∷ ► WWW CONCRETE ORG		<u> </u>			
		anization Corporation Trust Association Other		L Year of for	mation 1960	M State of leg	al domicile MI
Pa	rt I	Summary					
		Briefly describe the organization's mission or most sign		TILIZE CONCR	TE TO ITC E	ULLECT DO	TENTIAL
Ŗ	<u> </u>	TO DEVELOP, SHARE, & DISSEMINATE THE KNOWL	LEDGE NEEDED TO U	ITLIZE CONCR	1110 115 F	ULLEST PO	HENTIAL
caovernianice	-						
Į.							
5		Check this box 🔭 if the organization discontinued its			1	assets I	4.0
		Number of voting members of the governing body (Part	·		3		18
<u>g</u>		Number of independent voting members of the governing for the governing to the colondary ear for the colondary earlier that the colondary earlier earlie	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		5		17
ACUVIUES &		Total number of volunteers (estimate if necessary) •			6		3,421
ŧ		Total unrelated business revenue from Part VIII, colu			7a		461,586
		Net unrelated business taxable income from Form 990	` ''		7b		22,600
				Prio	Year	Currer	nt Year
	8	Contributions and grants (Part VIII, line 1h)			22,100		13,100
пle	9	Program service revenue (Part VIII, line 2g)			14,187,354		13,097,521
Вэче	10	Investment income (Part VIII, column (A), lines 3, 4	4, and 7d)		333,156		330,631
Ξ.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8			63,872		0
	12	Total revenue—add lines 8 through 11 (must equal P	, , , , , , , , , , , , , , , , , , , ,	ine	14,606,482		13,441,252
	13	Grants and similar amounts paid (Part IX, column (A			3,000		3,000
	14	Benefits paid to or for members (Part IX, column (A)	, lıne 4)		0		0
.	15	Salaries, other compensation, employee benefits (Pa	art IX, column (A), lines	5 5 –			
Expenses		10)			6,050,661		5,866,690
क्	16a	Professional fundraising fees (Part IX, column (A), li	ne 11e)		0		0
ă	b	Total fundraising expenses (Part IX, column (D), line 25) ▶655	1 1 1 5 2 4 5		6 000 150		6 445 776
	17 18	Other expenses (Part IX, column (A), lines 11a-11c Total expenses Add lines 13-17 (must equal Part I	•		6,800,158		6,445,776 12,315,466
	19	Revenue less expenses Subtract line 18 from line 1		' <u> </u>	1,752,663		1,125,786
80 00°				Beginning	of Current		
200					ear	End o	f Year ————
necesses of Fund Balances	20	Total assets (Part X, line 16)			32,278,295		34,649,500
3	21	Total liabilities (Part X, line 26)			6,199,597		6,004,430
	22	Net assets or fund balances Subtract line 21 from li	ne 20		26,078,698		28,645,070
	t II	Signature Block	!!!!			4- 4b- b4 -	
nowl	ledge a	ties of perjury, I declare that I have examined this return, and belief, it is true, correct, and complete. Declaration of					
nowi	ledge.						
		*****		20	11-06-24		
Sign	1	Signature of officer		Da			
lere		RONALD BURG EXECUTIVE VICE PRESIDENT					
		Type or print name and title					
		Print/Type preparer's name JAMES R DEDYNE CPA Preparer's signatur	e JAMES R DEDYNE CPA		Check if self-	PTIN	
Paid	T	Firm's name MANER COSTERISAN PC	THE STATE OF A			Fırm's EIN	<u> </u>
repa		Firm's address • 2425 E GRAND RIVER SUITE 1					<u> </u>
Jse (Only	LANSING MI 489123291				Phone no F	(517) 323-

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

▼Yes No

orm	990	(2010)	1

age	2
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Par		nt of Program Serv hedule O contains a res				.
1	Briefly describe tl	he organization's missior	1			
IDE	AS AND NEW TECH		HE CONCRETE	INDUSTRY TO EDI	T AND PUBLISH THE BI-M	URAGE THE EXCHANGE O IONTHLY JOURNALS AND
_	D.14b					
2	_	on undertake any signific Dor 990-EZ?		• .	r which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on S	chedule O			
3	•	on cease conducting, or	•	•	nducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sched	ule O			
4	Section 501(c)(3)		tions and section	14947(a)(1) trusts a	largest program services b are required to report the an service reported	
4a	(Code) (Expenses \$	3,083,161	ıncludıng grants of \$) (Revenue \$	4,047,621)
	PUBLICATIONS AND I	PERIODICALS DISSEMINATE T	ECHNICAL INFORMA	TION ON CONCRETE DES	SIGN AND CONSTRUCTION	
4b	(Code) (Expenses \$	2,276,180	including grants of \$	3,000) (Revenue \$	3,442,042)
		INCLUDING PROVIDING PLAQUE GRANTS TO STUDENTS	JES, CERTIFICATES,	PINS, DECALS, AND MAN	IUAL OF CONCRETE PRACTICE TO	MEMBERS, AND AWARDS
	(Code) (Expenses \$	1,269,405	including grants of \$) (Revenue \$	743,864)
	EDUCATIONAL SEMIN	NARS TECHNICAL SEMINARS I	PROVIDED TO THE GI	ENERAL PUBLIC REGARD	ING CONCRETE DESIGN AND TECH	HNOLOGY
4d	Other program se	ervices (Describe in Sch	nedule O) See al :	so Additional Data f	or Description	
	(Expenses \$	2,234,890 ind	luding grants of	\$) (Revenue \$	4,401,103)
4e	Total program se	rvice expenses►\$	8,863,636			

Part IV	Checklist	of Red	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
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		No
4	Section 501(c)(3) organizations. 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		No
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		
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? If "Yes," complete Schedule D, Part V	10		No
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	
С	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	
е	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		No
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		Νο
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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
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		No
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		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. 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		Νο
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		Νο
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		No
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		No
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		Νο
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			
	<i>IV</i>	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	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		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
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	Yes	
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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		Yes	
27	organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 62			
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	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the		.,	
L	year?	3a 3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	36	163	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		N o
h	account)?			N o
	If "Yes," enter the name of the foreign country			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	эс 6а		 N o
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	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	7a		Νo
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
•	file Form 8282?	7c		Νο
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		N o
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	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	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. 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			
	ın which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

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			
b	year			
D	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		No
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		Νο
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	
b	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	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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			
KE	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	''
	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	Yes	
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	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 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	
b	Other officers or key employees of the organization	15b		Νo
	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?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed MI			<u></u>
4.0				

- 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. 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 RONALD BURG

38800 COUNTRY CLUB DRIVE FARMINGTON HILLS, MI 48333

(248) 848-3778

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

Check if Schedule O contains a response to any question in this Part VII

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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) 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
(1) DAVID DARWIN DIRECTOR	1 00	х						0	0	0
(2) CLAUDE BEDARD DIRECTOR	1 00	х						0	0	0
(3) DENNIS C AHAL DIRECTOR	1 00	Х						0	0	0
(4) DAVID A LANGE DIRECTOR	1 00	х						0	0	0
(5) BEVERLY A GARNANT DIRECTOR	1 00	х						0	0	0
(6) JOSEPH C SANDERS DIRECTOR	1 00	х						0	0	0
(7) DENIS MITCHELL DIRECTOR	1 00	х						0	0	0
(8) COLIN L LOBO DIRECTOR	1 00	х						0	0	0
(9) RONALD KLEMENCIC DIRECTOR	1 00	Х						0	0	0
(10) JACK P MOEHLE DIRECTOR	1 00	х						0	0	0
(11) ANDREA J SCHOKKER DIRECTOR	1 00	х						0	0	0
(12) EMMANUEL K ATTIOGBE DIRECTOR	1 00	х						0	0	0
(13) DAVID H SANDERS DIRECTOR	1 00	х						0	0	0
(14) KENNETH C HOVER PRESIDENT	1 00	х		х				0	0	0
(15) RICHARD D STEHLY DECEASED FALL 2010 PRESIDENT	1 00	х		х				0	0	0
(16) JAMES K WIGHT VICE PRESIDENT	1 00	Х		Х				0	0	0

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

(A) Name and Title	(B) A verage hours		tion (that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) 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
(17) LUIS E GARCIA VICE PRESIDENT	1 00	х		х				0	0	0
(18) FLORIAN G BARTH IMMEDIATE PAST PRESIDENT	1 00	Х		х				0	0	0
(19) WILLIAM R TOLLEY JAN-JUNE 2010 EXECUTIVE VICE PRESIDENT	40 00	х		х				392,705	0	35,265
(20) RONALD BURG JULY-DEC 2010 EXECUTIVE VICE PRESIDENT	40 00	х		х				180,348	0	17,411
(21) DONNA HALSTEAD CFO	40 00			х				126,831	0	25,762
(22) JOHN NEHASIL MANAGING DIR OF CERTIFICATION	40 00					х		127,031	0	36,438
(23) DANIEL FALCONER MANAGING DIR OF ENGINEERING	40 00					х		182,284	0	29,503
(24) THEODORE NEFF EXECUTIVE VP OF PTI	40 00					х		149,992	0	25,497
(25) JOHN GLUMB MANAGING DIR OF INFO SYSTEMS	40 00					х		148,907	0	32,943
(26) DOUGLAS SORDYL MANAGING DIR OF INDUSTRY AFFAIRS	40 00					х		160,481	0	30,684
1b Sub-Total			•	•			▶			
c Total from continuation sheets	to Part VII, Sec	tion A				Þ				
d Total (add lines 1b and 1c) .							•	1,468,579	0	233,503

Total number of individuals (including but not limited to those listed above) who received more that \$100,000 in reportable compensation from the organization 13

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		Νο
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	V	
		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νο

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
CITYFRONT HOTEL ASSOCIATES LP 301 E NORTH WATER STREET CHICAGO, IL 60611	SPRING CONVENTION	420,710
MILLER CANFIELD PADDOCK & STONE 150 WEST JEFFERSON SUITE 2500 DETROIT, MI 48226	LEGAL SERVICES	123,922
	and the second s	

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 ►2

		2010) Statement of Reven	IIA				Pa	ge 9
art		Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
A T	-	E. J. w. t. J. v. w. v. v. v.						513,0
and other similar amounts		Federated campaigns	1a					
٦٥		Membership dues						
ਹਿ		Fundraising events						
ا ﷺ		Related organizations						
<u>.</u>		Government grants (contributions)	1e					
2		All other contributions, gifts, grants similar amounts not included above	e	13,100				
o D	g	Noncash contributions included in li	nes 1a-1f \$					
ᄛ	h	Total. Add lines 1a-1f			13,100			
an				Business Code				
Program Serwoe Revenue	2a	PUBLICATION SALES		511120	4,509,207	4,047,621	461,586	
a 7≝		MEMBERSHIP DUES & ASSE		900099	3,442,042			
Ň.		CERTIFICATION INCOME CONVENTION INCOME		900099	3,367,357			
33		EDUCATIONAL SEMINARS		900099	743,864	1,033,746 743,864		
[a]		All other program service re	venue	011710				1,3
ر م		Total. Add lines 2a-2f	_		1,305 13,097,521			
_		Investment income (includir			13,097,321			
		and other similar amounts)	-		328,746			328,7
		Income from investment of tax-ex						
	5	Royalties						
			(ı) Real	(II) Personal				
		Gross Rents						
	Ь	Less rental expenses						
	c	Rental income or (loss)						
		Net rental income or (loss)						
		_	(ı) Securities	(II) O ther				
		from sales of assets other than inventory		1,885				
	Ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)		1,885				
	d	Net gain or (loss)			1,885			1,8
. [Gross income from fundraisi	ng events					
		(not including						
		of contributions reported on						
		See Part IV, line 18	а					
	ь	Less direct expenses .						
١		Net income or (loss) from ful						
	9a	Gross income from gaming a	ctivities See Part IV, line 19	. a				
	ь	Less direct expenses .		ь				
		Net income or (loss) from ga						
		Gross sales of inventory, les returns and allowances	S					
			а					
	b	Less cost of goods sold .	. b					
ļ	С	Net income or (loss) from sa	les of inventory 🟲					
-	• •	Miscellaneous Revenue		Business Code				
	11a							
	b							
	c							
		All other revenue	•				-	
	е	Total. Add lines 11a-11d						
	12	Total revenue. See Instructi	ons .	}				
- 1					13,441,252	12,634,630	461,586	331,9

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	3,000	3,000		· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	790,547		790,547	
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	3,662,395	2,234,061	1,428,334	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	333,764	203,596	130,168	
9	Other employee benefits	667,452	407,146	260,306	
10	Payroll taxes	412,532	251,645	160,887	
а	Fees for services (non-employees) Management	72,424	48,427	23,342	655
ь	Legal	103,281	103,281		
c	Accounting	31,233	31,233		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	56,962	56,962		
g	Other	776,335	776,335		
12	Advertising and promotion	694,771	694,771		
13	Office expenses	2,113,666	1,953,321	160,345	
14	Information technology	144,818	7,073	137,745	
15	Royalties				
16	Occupancy	121,118	60,559	60,559	
17	Travel	280,285	241,045	39,240	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,440,572	1,440,572		
20	Interest				
21	Payments to affiliates	54,350		54,350	
22	Depreciation, depletion, and amortization	185,086	92,543	92,543	
23	Insurance	108,059	108,059		
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	CONTRIBUTIONS & DUES	112,809		112,809	
b	MISCELLANEOUS EXPENSES	84,536	84,536		
c	CHAPTERS	35,517	35,517		
d	AWARDS & CERTIFICATES	25,639	25,639		
e	UBIT EXPENSE	4,315	4,315		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	12,315,466	8,863,636	3,451,175	655
26	Joint costs. 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		<u> </u>		

Part X Balance Sheet (A) (B) Beginning of year End of year 350,632 783,101 1 2,200,274 2 1,229,339 2 3 3 1,184,258 1,223,911 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 7 8 643,089 561,656 Prepaid expenses and deferred charges 287,914 286, 197 10a Land, buildings, and equipment cost or other basis Complete 8,746,464 10a Part VI of Schedule D 4.554.909 ь Less accumulated depreciation 10b 4,279,771 10c 4,191,555 11 10.465.277 11 12.143.382 9,417,884 10,834,265 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 3,449,196 15 3,396,094 15 16 32,278,295 16 34,649,500 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 1.366.749 17 1.339.715 17 Accounts payable and accrued expenses . 18 18 2.245.498 19 2,311,146 19 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 2,521,702 25 2,419,217 Other liabilities Complete Part X of Schedule D 6,004,430 26 6,199,597 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 25.867.279 28,466,487 Unrestricted net assets Temporarily restricted net assets 211,419 178,583 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 26,078,698 33 28,645,070 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 32.278.295 34,649,500

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		13.4	141,252	
2	Total expenses (must equal Part IX, column (A), line 25)	2		12,315,46		
3	Revenue less expenses Subtract line 2 from line 1	3		1,1	125,786	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		26,0	78,698	
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,4	140,586	
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		28,6	545,070	
Par	Tt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		•	 		
1	Accounting method used to prepare the Form 990 Cash Accrual Other			Yes	No	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo	
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 its 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		Νο	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b			

38-0296490

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Employer identification number Name of the organization AMERICAN CONCRETE INSTITUTE

Part :	II Re	ason for Pu	blic Charity Stat	t us (All org	janizations	must comp	lete this p	art.) See in:	structions	5	
ne orga	anızatıo	n is not a privat	te foundation becaus	eıtıs (Forlı	ınes 1 throu	gh 11, check	only one bo	ox)			
1 「	A c	nurch, convent	on of churches, or as	sociation of	churches d	escribed in se	ection 170(b)(1)(A)(i).			
2 <u> </u>	- As	chool described	d in section 170(b)(1)(A)(ii). (Att	tach Schedı	ule E)					
з Г	- Ah	ospital or a cod	perative hospital ser	vice organiz	atıon descri	bed in sectio i	n 170(b)(1)	(A)(iii).			
4 F		edical research pital's name, ci	h organization operat ity, and state	ed in conjund	ction with a	hospital desc	ribed in sec	tion 170(b)(1	.)(A)(iii).	Enter the	
5 Г	A n	organization op	erated for the benefit	of a college	or universit	ty owned or o	perated by a	governmenta	al unit des	cribed in	
	sect	ion 170(b)(1)(A)(iv). (Complete Pa	art II)							
6 F	A fe	deral, state, or	local government or	government	al unıt desc	rıbed ın secti	on 170(b)(1	.)(A)(v).			
7 「	des	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)									
8 Г	_		described in section	-	A)(vi) (Con	nplete Part II)				
9 🔽	_	·	at normally receives			•	•	butions, memb	pership fee	s, and gro	SS
r	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
	ıts	support from gr	oss investment incor	me and unrel	ated busine	ss taxable ind	come (less	section 511 t	ax) from b	usınesses	
	acq	uired by the org	ganızatıon after June	30,1975 S	ee section 5	509(a)(2). (Co	omplete Par	tIII)			
о Г	– An	organization or	ganızed and operated	exclusively	to test for p	oublic safety	Seesection	509(a)(4).			
1 F	one	or more public	ganized and operated ly supported organiza bes the type of supp b Type II	atıons descri ortıng organı	bed in secti zation and o	on 509(a)(1)	or section s 11e throu	509(a)(2) Se gh 11h	e section		. Check
e f g	othe sec Ifth che Sine	er than foundat tion 509(a)(2) ie organization ck this box :e August 17, 2	ox, I certify that the ion managers and oth received a written de 2006, has the organi	etermination	or more pub	licly supporte	ed organizat Гуре I, Тур	ions describe	d in sectio	on 509(a)(1) or
		wing persons?	rectly or indirectly co	antrole autho	ralona ort	ogothor with r	arcone dos	cribad in (ii)		Yes	l Na
		•	governing body of th	· ·		-	Jersons des	Cribed III (II)	11.	g(i)	No
			er of a person describ		_	3011				g(ii)	
		•	lled entity of a persor			hove?				y(iii)	
h			ng information about		` ' ' '				115	,,,	
(i) Name of supported organizatio		ed EIN lines 1-9 above vour governing		on in ed in rning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga in the U	on in anized	A mo	/ii) unt of port	
			(see instructions))	Yes	No	Yes	No	Yes	No		
				-							

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , .	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Calen	dar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,386,527	3,525,555	3,819,409	3,717,907	3,455,142	17,904,540
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished	0.752.704	10 504 500	44 440 242	10.022.016	0.102.500	50 622 140
	nn any activity that is related to the organization's tax-exempt purpose	9,753,794	10,504,599	11,149,243	10,032,916	9,192,588	50,633,140
3	Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its						
	behalf The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5	13,140,321	14,030,154	14,968,652	13,750,823	12,647,730	68,537,680
	A mounts included on lines 1, 2, and 3 received from disqualified persons A mounts included on lines 2 and						0
_	3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of						0
	the amount on line 13 for the year						
8	Add lines 7a and 7b Public Support (Subtract line 7c						68,537,680
	from line 6) ction B. Total Support						
Sec	ction B. Total Support dar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Se o	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Sec Calen	ction B. Total Support dar year (or fiscal year	(a) 2006 13,140,321	(b) 2007	(c) 2008 14,968,652	(d) 2009 13,750,823	(e) 2010 12,647,730	(f) Total 68,537,680
Sec Calen 9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from						
Sec Calen 9 10a b	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	13,140,321	14,030,154	14,968,652	13,750,823	12,647,730	68,537,680
Se o Calen 9 10a b	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	13,140,321	14,030,154	14,968,652	13,750,823	12,647,730	68,537,680
Sec Calen 9 10a b	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	13,140,321	14,030,154	14,968,652	13,750,823	12,647,730	68,537,680
Sec Calen 9 10a b	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	13,140,321	14,030,154	14,968,652 860,561	13,750,823 397,008	12,647,730 328,746	68,537,680 4,317,003
Sec Calen 9 10a b c 11	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	13,140,321	14,030,154 1,587,280 1,587,280	14,968,652 860,561 860,561	13,750,823 397,008 397,008	12,647,730 328,746 328,746	68,537,680 4,317,003 4,317,003
Sec Calen 9 10a b c 11	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c,	13,140,321 1,143,408	14,030,154 1,587,280 1,587,280 88,180	14,968,652 860,561 860,561	13,750,823 397,008 397,008	12,647,730 328,746 328,746	4,317,003 4,317,003 213,012
Calen 9 10a b c 11 12	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	13,140,321 1,143,408 1,143,408 700 14,284,429	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950	14,968,652 860,561 860,561 86,201	13,750,823 397,008 397,008 15,031	12,647,730 328,746 328,746 23,600	68,537,680 4,317,003 4,317,003 213,012 1,036 73,068,731
Sec Calen 9 10a b c 11 12	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	13,140,321 1,143,408 1,143,408 700 14,284,429 for the organization	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950 on's first, second,	14,968,652 860,561 860,561 86,201	13,750,823 397,008 397,008 15,031	12,647,730 328,746 328,746 23,600	68,537,680 4,317,003 4,317,003 213,012 1,036 73,068,731 3) organization,
Calen 9 10a b c 11 12	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is	13,140,321 1,143,408 1,143,408 700 14,284,429 for the organization	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950 on's first, second,	14,968,652 860,561 860,561 86,201 15,915,414 third, fourth, or f	13,750,823 397,008 397,008 15,031	12,647,730 328,746 328,746 23,600	68,537,680 4,317,003 4,317,003 213,012 1,036 73,068,731 3) organization,
Calen 9 10a b c 11 12 13 14 Sec 15	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	13,140,321 1,143,408 1,143,408 700 14,284,429 for the organization of the organiz	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950 on's first, second, ercentage f) divided by line	14,968,652 860,561 860,561 86,201 15,915,414 third, fourth, or f	13,750,823 397,008 397,008 15,031	12,647,730 328,746 328,746 23,600 13,000,076 section501(c)(3	68,537,680 4,317,003 4,317,003 213,012 1,036 73,068,731 3) organization,
Calen 9 10a b c 11 12 13 14 Sec 15 16	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	13,140,321 1,143,408 1,143,408 700 14,284,429 for the organization of the organiz	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950 on's first, second, ercentage f) divided by line is art III, line 15	14,968,652 860,561 860,561 86,201 15,915,414 third, fourth, or f	13,750,823 397,008 397,008 15,031	12,647,730 328,746 328,746 23,600 13,000,076 section501(c)(3	68,537,680 4,317,003 4,317,003 213,012 1,036 73,068,731 3) organization, 93 800 %
Calen 9 10a b c 11 12 13 14 Sec 15 16 Sec	dar year (or fiscal year beginning in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ction C. Computation of Pub Public Support Percentage from 2000	13,140,321 1,143,408 1,143,408 700 14,284,429 for the organization of the organiz	14,030,154 1,587,280 1,587,280 88,180 336 15,705,950 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	14,968,652 860,561 860,561 86,201 15,915,414 third, fourth, or f	13,750,823 397,008 397,008 15,031 14,162,862 Ifth tax year as a	12,647,730 328,746 328,746 23,600 13,000,076 section501(c)(3	4,317,003 4,317,003 4,317,003 213,012 1,036 73,068,731 3) organization,

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

organization

33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID: Software Version:

EIN: 38-0296490

Name: AMERICAN CONCRETE INSTITUTE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program	n services				
(Code) (Expenses \$	1,212,786	including grants of \$) (Revenue \$	3,367,357)
	CERTIFICATION OF LABOR STRUCTION CERTIFIED IND	,	•	•	ITY OF
(Code) (Expenses \$	1,022,104	including grants of \$) (Revenue \$	1,033,746)
CONVENTIONS	COMMITTEE MEETINGS ARE	HELD TO DE	VELOP TECHNICAL PUBLIC.	ATIONS THROUGH A CONC	ENSUS
PROCESS THERE TECHNOLOGY	E ARE OVER 30 SEMINARS, T	ECHNICALSE	ESSIONS & FORUMS RELATI	NG TO THE LATEST CONCR	ETE DESIGN &

DLN: 93493186005161

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.

	me of the organization FRICAN CONCRETE INSTITUTE		Emp	loyer identification r	umber
AMI	RICAN CONCRETE INSTITUTE		38-0	0296490	
Pa	organizations Maintaining Donor Actions organization answered "Yes" to Form 99		unds	or Accounts. Co	mplete if the
		(a) Donor advised funds	((b) Funds and other a	ccounts
L	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
ŀ	Aggregate value at end of year				
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the		or advı		Yes
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit			r purpose	Yes
Pa	rt II Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Forn	n 990, Part IV, line	2 7.
2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	certified	d historic structure	d area
				Held at the End o	f the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified his	toric structure included in (a)	2c		
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d		
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by th	ne organization during]
	the taxable year 🛌				
ı	Number of states where property subject to conserva	ation easement is located 🕨			
;	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	—— dling of		Yes
•	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents di	uring the year ►	
,	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during	g the year ► \$	
3	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	tion	Г	Yes
•	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial			
ar	Complete if the organization answered "		or Otl	her Similar Asse	ts.
la	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 fin	for public exhibition, education or research	ch in fu		
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			► \$	
	(ii) Assets included in Form 990, Part X			► \$	
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS	· · · · · · · · · · · · · · · · · · ·	or finan		

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organiz	zations Maintaining Co	llections of Art	<u>, His</u>	tori	<u>cal Tre</u>	easu	res, or (<u> Othe</u>	<u>r Similar A</u>	ssets	(cor	ıtınued)
3	Using the organ items (check all	ızatıon's accessıon and othe that apply)	r records, check an	y of th	ne foll	owing th	hat ar	e a sıgnıfıc	ant u	se of its collec	tion		
а	Public exhib	oition		d	Γ	Loan o	rexcl	hange prog	rams				
b	Scholarly re	search		e	Γ	Other							
С	┌ Preservatio	n for future generations											
4	Provide a descr Part XIV	ption of the organization's c	ollections and expla	ın hov	w they	y further	r the o	organizatioi	n's ex	empt purpose	ın		
5		did the organization solicit d to raise funds rather than								ular	┌ Ye	s	┌ No
Par		and Custodial Arrang line 9, or reported an ar						n answere	ed "Y	es" to Form	990,		
1a	Is the organizat included on Forr	ion an agent, trustee, custoo n 990, Part X?	dian or other interme	ediary	for c	ontribut	ions o	or other as:	setsi	not	Г Ye	s	┌ No
b	If "Yes," explair	the arrangement in Part XI	V and complete the	follow	/ıng ta	able		г					
								-		A	mount		
C	Beginning balan	ce						-	1c				
d	Additions during	g the year						-	1d				
е	Distributions du	ırıng the year							1e				
f	Ending balance								1f				
2a	Dıd the organıza	tion include an amount on F	orm 990, Part X, lin	e 21?							┌ Ye	s	┌ No
b	If "Yes," explain	the arrangement in Part XI\	/										
Pa	rt V Endowi	nent Funds. Complete											
4 -	D		(a)Current Year	(b)	Prior \	rear	(c) Tw	o Years Back	(d)	Three Years Back	(e)Fo	ur Yea	ars Back
1a	Beginning of yea												
b	Contributions								_				
с		nings or losses											
d		arships											
e	Other expenditue												
f		expenses											
g	End of year bala	nce											
2	•	mated percentage of the yea	r end balance held a	as		<u> </u>							
а		d or quasi-endowment 🕨											
ь	Permanent endo	•											
c 3a	Term endowmen	rment funds not in the posse	ssion of the organiz	ation 1	that a	are held	and a	dministere	d for	the			
	organization by										Y	es	No
	(i) unrelated org	janizations									(i)		
	. ,	nızatıons									(ii)	_	
	•), are the related organizatio	•						•	🗀	Bb	\perp	
4		XIV the intended uses of th							4.0				
Par	t VI Investi	ments—Land, Building	s, and Equipme	<u>nt. 5</u>			•	· ·			. T		
	Desc	ription of investment) Cost or o		(b)Cost or basis (oth		(c) Accumulate depreciation	ed (d) Boo	k value
1a	Land							1,00	9,209			1	,009,209
b	Buildings							4,61	3,302	1,701,1	154	2	,912,148
С	Leasehold improv	ements		•				22	1,733	179,0	046		42,687
d	Equipment							53	7,619	459,6	553		77,966
e	Other							2,36	4,601	2,215,0)56		149,545

Part VII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-or	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other	10.024.265		_
(A) CERTIFICATES OF DEPOSIT	10,834,265		F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	10,834,265		
Part VIII Investments—Program Related. See			
			d of valuation
(a) Description of investment type	(b) Book value		f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III	ne 15		
(a) Descrip			(b) Book value
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(1) INTEREST RECEIVABLE			17,511
(2) INVESTMENT IN CREATIVE ASSOCIATION MANAG	EMENT		100,000
(3) INVESTMENT IN ACI FOUNDATION			3,100,000
(4) ASSETS LIMITED AS TO USE			178,583
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		3,396,094
Part X Other Liabilities. See Form 990, Part X			, , , , , , , , , , , , , , , , , , ,
(a) December of Linkshitz			
	(b) A mount		
Federal Income Taxes			
ACCUMULATED POSTRETIREMENT BENEFIT			
OBLIGATION	2,167,969		
RETENTION PENSION ACCRUAL	251,248		
	·		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	2,419,217		

'ali	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts
L	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
	Excess or (deficit) for the year Subtract line 2 from line 1	3
	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
,	Investment expenses	6
	Prior period adjustments	7
3		8
	Other (Describe in Part XIV)	
•	Total adjustments (net) Add lines 4 - 8	9
)	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
	Reconciliation of Revenue per Audited Financial Statements With Revenue	
	Total revenue, gains, and other support per audited financial statements	1
	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
Ь	Donated services and use of facilities	-
C	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	_
e	Add lines 2a through 2d	2e
	Subtract line 2e from line 1	3
	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
С	Add lines 4a and 4b	4c
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return
	Total expenses and losses per audited financial statements	1 1
	Amounts included on line 1 but not on Form 990, Part IX, line 25	-
а	Donated services and use of facilities	
b b	Prior year adjustments	-
c	Other losses	-
d	Other (Describe in Part XIV)	1
e	Add lines 2a through 2d	_ 2e
	Subtract line 2e from line 1	3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
a L	· · · · · · · · · · · · · · · · · · ·	-
b	,	- I
С	Add lines 4a and 4b	4c
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5

Identifier Return Reference Explanation

additional information

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493186005161

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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AME	RICAN CONCRETE INSTITUTE		·	•			
			38-0	296490			
Pa	rt I Questions Regarding Compensation						
						Yes	Νo
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel	Ē	Housing allowance or residence for perso				
	Travel for companions		Payments for business use of personal re				
	Tax idemnification and gross-up payments		Health or social club dues or initiation fe				
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur,	chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ				1b	Yes	
2	Did the organization require substantiation prior to rein officers, directors, trustees, and the CEO/Executive D				2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that		•				
	Compensation committee	~	Written employment contract				
	✓ Independent compensation consultant	~	Compensation survey or study				
	Form 990 of other organizations	굣	Approval by the board or compensation of	ommittee			
4	During the year, did any person listed in Form 990, Pa or a related organization	rt V I	I, Section A, line 1a with respect to the fili	ng organization			
а	Receive a severance payment or change-of-control pa	ymer	nt from the organization or a related organi	zation?	4a		No
ь	Participate in, or receive payment from, a supplementa	ıl nor	iqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-base	ed co	mpensation arrangement?		4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and prov			t III			
	Only 501(c)(3) and 501(c)(4) organizations only must	com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, lin compensation contingent on the revenues of	e 1 a	, did the organization pay or accrue any				
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, lin compensation contingent on the net earnings of	e 1 a	, did the organization pay or accrue any				
а	The organization?				6a		Νo
b	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			d	7		No
8	Were any amounts reported in Form 990, Part VII, pai subject to the initial contract exception described in R		•	ıbe			
	ın Part III				8		Νο
9	If "Yes" to line 8, did the organization also follow the resection 53 4958-6(c)?	ebutt	able presumption procedure described in F	legulations	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 W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(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) WILLIAM R TOLLEY JAN-JUNE 2010	(I) (II)	215,857 0	176,848 0	0 0	0	35,265 0	427,970 0	
(2) RONALD BURG JULY-DEC 2010	(I) (II)	111,757 0	68,591 0	0	1	17,411 0	197,759 0	
(3) DONNA HALSTEAD	(1) (11)	122,831	4,000	0	I - 1	25,762 0	152,593 0	
(4) JOHN NEHASIL	(1) (11)	116,531 0	10,500 0	0	1	36,438 0	163,469 0	
(5) DANIEL FALCONER	(1) (11)	165,559 0	16,725 0	0	0	29,503 0	211,787	
(6) THEODORE NEFF	(1) (11)	149,992 0	0	0	0	25,497 0	175,489 0	
(7) JOHN GLUMB	(1) (11)	138,407 0	10,500 0	0		32,943 0	181,850 0	
(8) DOUGLAS SORDYL	(1) (11)	142,999 0	17,482 0	0	0	30,684 0	191,165 0	
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010

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	Ret urn Ref erence	Explanation
	· '	TRAVEL FOR COMPANIONS REFERS TO THE TRAVEL OF SPOUSES AND IS INCLUDED IN THE W-2 OF THE INDIVIDUALS WHOSE SPOUSES HAVE ACCOMPANIED THEM ON BUSINESS TRAVEL

Schedule J (Form 990) 2010

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DLN: 93493186005161

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 AMERICAN CONCRETE INSTITUTE

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

38-0296490

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE INSTITUTE SHALL CONSIST OF HONORARY MEMBERS, FELLOWS, SUSTAINING MEMBERS, ORGANIZATIONAL MEMBERS, MEMBERS, YOUNG PROFESSIONAL MEMBERS AND STUDENT MEMBERS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		ALL MEMBERS IN ANY CLASSIFICATION SHALL HAVE ALL RIGHTS AND PRIVILEGES OF MEMBERSHIP AS DETERMINED BY THE BOARD OF DIRECTORS AND AS PROVIDED BY THE BYLAWS, EXCEPT THAT A YOUNG PROFESSIONAL OR STUDENT MEMBER SHALL NEITHER VOTE NOR HOLD OFFICE THE STATUS OF A STUDENT MEMBER SHALL CHANGE AUTOMATICALLY TO THAT OF YOUNG PROFESSIONAL MEMBER OR MEMBER, DEPENDING ON AGE, ON THE FIRST ANNIVERSARY OF MEMBERSHIP AFTER CEASING TO BE A REGISTERED STUDENT THE STATUS OF A YOUNG PROFESSIONAL MEMBER SHALL BE CHANGED TO THAT OF MEMBER ON THE FIRST MEMBERSHIP ANNIVERSARY AFTER REACHING 28 YEARS OF AGE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 IS RECEIVED AND REVIEWED FOR ACCURACY BY THE EXECUTIVE COMMITTEE AT THE SUMMER EXECUTIVE COMMITTEE MEETING AFTER ANY CONCERNS PRESENTED BY THE EXECUTIVE COMMITTEE ARE ADDRESSED, THE EXECUTIVE VICE PRESIDENT SIGNS AND FILES THE RETURN

Identifier	Return Reference	Explanation
	, , , ,	BOARD MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY ALL DIRECTORS ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST AND TO NOTIFY THE BOARD OF ANY CONFLICTS THAT MAY ARISE THROUGHOUT THE YEAR

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE COMMITTEE, COMPRISED OF INDEPENDENT PERSONS, MEETS TO REVIEW THE PERFORMANCE OF TOP MANAGEMENT ANNUALLY THE EXECUTIVE COMMITTEE REVIEWS COMPARISON DATA FROM SIMILAR ORGANIZATIONS AS REPORTED BY AVAILABLE PUBLIC DOCUMENTS A RECORD OF THE MEETING AND DECISION BY THE EXECUTIVE COMMITTEE IS RETAINED BY THE ORGANIZATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALL INFORMATION IS AVAILABLE UPON REQUEST FORM 990 IS ALSO POSTED ANNUALLY ON GUIDESTAR'S WEBSITE THE 990 WITH AUDITED FINANCIAL STATEMENTS IS PUBLIC INFORMATION THROUGH THE MICHIGAN ATTORNEY GENERAL'S OFFICE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 1,440,586

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT FOR THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

ldentifier	Return Reference	Explanation
ELECTION OUT OF BONUS DEPRECIATION	FORM 4562	EMPLOYER IDENTIFICATION NUMBER 38-0296490 FOR THE YEAR ENDING DECEMBER 31, 2010 AMERICAN CONCRETE INSTITUTE, HEREBY ELECTS, PURSUANT TO IRC SEC 168(K)(2)(D)(III), NOT TO CLAIM THE ADDITIONAL 50% DEPRECIATION ALLOWABLE UNDER IRC SEC 168(K) FOR THE FOLLOWING QUALIFYING PROPERTY PLACED IN SERVICE DURING THE TAX YEAR ENDING DECEMBER 31, 2010 ALL PROPERTY IN THE 3 & 10 YEAR CLASS SEE ATTACHED FORM 4562

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DLN: 93493186005161

OMB No 1545-0047

2010

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** AMERICAN CONCRETE INSTITUTE 38-0296490 Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations dur	ganizations (Complete I	f the organization	answered "Yes" (on Form 990, Part	IV, line 34 becau		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont organ	(g) 512(b)(1 trolled nization
						Yes	No
(1) ACI FOUNDATION 38800 COUNTRY CLUB DRIVE FARMINGTON HILLS, MI 48333 38-2986800	TO SUPPORT EDUCATIONAL, SCIENTIFIC RESEARCH	MI	501(C)(3)	LINE 11C, III-FI	N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Inst	ructions for Form 990.	Cat No 50	135Y		Schedule R (Form 990') 2010

art III			d Organizations Taxa		• ` '	_	answered "	Yes" on Form 990,	Part IV, lır	ne 34		
	because it had one or more related organizations treated as a partnership during the tax year.)											
			(c)				(h)	(i)	(i)			

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	allocations?		Disproprtionate		Disproprtionate		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana parti	nging	(k) Percentage ownership
							Yes	No		Yes	No									
Down TV Talomatic	instinut of Dolot	A O			tion on Tourst (C						200	D- 1 T) /								

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) 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	(h) Percentage ownership
	CONSULTING SERVICES	MI	N/A	С	1,646,200	617,506	100 000 %

No

No

No

No

No No No No

No No No

No No

No

Part V	Transactions With Related Organizations	(Complete if the organization answered	d "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)
	-		

Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)		
ı	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes
1 Dui	ring 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	
Ь	Gift, grant, or capital contribution to other organization(s)	1 b	Yes
c (Gıft, grant, or capıtal contribution from other organization(s)	1c	
d	Loans or loan guarantees to or for other organization(s)	1d	Yes
e	Loans or loan guarantees by other organization(s)	1e	
f s	Sale of assets to other organization(s)	1 f	
g	Purchase of assets from other organization(s)	1 g	
h	Exchange of assets	1h	
i L	_ease of facilities, equipment, or other assets to other organization(s)	1i	
j l	Lease of facilities, equipment, or other assets from other organization(s)	1j	
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	
I P	Performance of services or membership or fundraising solicitations by other organization(s)	11	
m s	Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes
n	Sharing of paid employees	1n	Yes
	Reimbursement paid to other organization for expenses	10	
P	Reimbursement paid by other organization for expenses	1р	
q	O ther transfer of cash or property to other organization(s)	1q	Yes
r	O ther transfer of cash or property from other organization(s)	1r	

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	(d) Method of determining amount involved
(1) CREATIVE ASSOCIATION MANAGEMENT	В	100,000	ACTUAL
(2) ACI FOUNDATION	В	3,100,000	ACTUAL
(3) CREATIVE ASSOCIATION MANAGEMENT	D	183,096	ACTUAL
(4) ACI FOUNDATION	D	14,641	ACTUAL
(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

(a) Name, address, and EIN of entity	(state or foreign partners country) section 501(c)(3) organizations?		(e) Share of end-of-year assets		(f) Disproprtionate allocations? (g) Code V—UB amount in be 20 of Schedule (Form 1065)		(I Gene mana part	agın tner?		
			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)

I Identifier I Keturn Keterence I	Identifier Return Reference Explanation	
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Schedule R (Form 990) 2010

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Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493186005161

OMB No 1545-0172

Department of the Treasury

Form 4562

Attachment

See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** AMERICAN CONCRETE INSTITUTE FORM 990 PAGE 10 38-0296490 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **15** Property subject to section 168(f)(1) election **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 17 94,816 18 If you are electing to group any assets placed in service during the tax year into one or more . 📂 general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property 64,600 3 0 200 DB 11,436 **b** 5-year property c 7-year property 45,930 10 0 200 DB 1,807 d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs мм S/L 39 yrs мм S/L i Nonresidential real property ΜМ S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs Part IV **Summary** (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 108,059 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

		z+a, $z+b$, cc														
Section A—Depre	ciation a	<u>nd Other Ir</u>	<u>ıforma</u>	tion (C	aution	: See	the i	<u>nstru</u>	ctio	ns for l	imits i	for pa	<u>sseng</u>	<u>er au</u>	<u>tomot</u>	biles.)
24a Do you have evider	ice to support i	the business/inv	estment u	ise claimed	d? ┌Yes	Гио			24b	If "Yes,"	s the ev	dence	written?	$\Gamma_{Y\epsilon}$	ᇙᄃᇄ	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost o ba	rother	Basis for (business			(f) Recove period	ecovery Method/			(h) Depreciation/ deduction			(i) Elected section 17 cost	
25Special depreciation allo	•		rty placed	ın service o	during the	tax year	and u	ısed m	ore tl	han 25						
26 Property used more	than 50%	in a qualified l	business	use						<u> </u>						
		%							Т					\top		
		%												\perp		
37 Dramarty used EON		%														
27 Property used 50%	or less in a	quanned bus	mess us	e	1			l	S/	′L -	Т			$\overline{}$		
		%							-					1		
		%							S/	'L -				그		
28 Add amounts in co	olumn (h), lır	ies 25 throug	h 27 En	ter here a	and on Iir	ne 21,	page	1	•	28						
29 Add amounts in co	olumn (ı), lın	e 26 Enterhe	ere and c	n line 7,	page 1							29				
				—Infor												
Complete this section If you provided vehicles to														e vehic	·les	
· ·					a)	T	b)	T CAGO		c)		1)		<u>> </u>		f)
30 Total business/investment miles driven during the year (do not include commuting miles)			Vehi	cle 1	Vehi	cle 2	<u> </u>	e hi	cle 3	Vehi	cle 4	Vehi	Vehicle 5		Vehicle 6	
31 Total commuting r	miles driven	during the ye	ar .													
32 Total other persor	nal(noncomm	nuting) miles (driven													
33 Total miles driven during the year Add lines 30 through 32																
34 Was the vehicle a		ersonal use		Yes	No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		by a more th	an 5%													
36 Is another vehicle	available fo	r personal us	e? .													
Section Answer these question 5% owners or related	ns to determ	•	et an exc												not mo	re thar
37 Do you maintain a	written polic	y statement	that prob	nibits all	personal	use of	vehi	cles,	nclu	ıdıng cor	nmutır	g, by y	our	Y	'es	No
employees? .						•	٠	•	•			•	•			
38 Do you maintain a employees? See the																
39 Do you treat all us	e of vehicles	s by employee	es as pei	sonal us	e? .											
40 Do you provide movehicles, and retain				oyees, ol	otain info	rmatio	n fror	m you	r em	nployees	about	the us	e of the	a 🗀		
41 Do you meet the re				automobi	le demor	- nstratio	n us	e? (Se	e in	ıstructio	ns)					
Note: If your answ	er to 37, 38	, 39, 40, or 4	1 is "Ye	s," do not	t comple	te Sect	ion B	3 for t	ne c	overed v	ehicle:	5				
Part VI Amo	rtization															
(a)		(b) Date		(c A morti			((d) Code		A morti	zatıon		A mo	(f) rtızatı	on for	
Description of c	osts	amortizatior begins	ו ו	amo				ection		perio				his ye		
42 A mortization of co	sts that beg		ur 2010	tax year	(see inst	truction	ns)									
	<u></u>	<u> </u>		•			•									
43 A mortization of co	sts that beg	an before you	r 2010 t	ax year							43					
	5	•		•												

44 Total. Add amounts in column (f) See the instructions for where to report

44