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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)

Inspection

OMB No 1545-0047

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

Open to Public

<u> </u>	or the	2010 calendar year, or tax year beginning JUL 1, ZUIU and e	ending O	UN 30, ZU.	<u> </u>
B CI	heck if oplicable	C Name of organization		D Employer ider	ntification number
	Address change	CONSTRUCTION INDUSTRY CENTER, INC			
	Name change	Doing Business As		46-	-0242579
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nun	
	Termin- ated	2771 PLANT STREET		60!	5-343-5252
X	Amende return	City or town, state or country, and ZIP + 4		G Gross receipts \$	472,472
	Applica- tion	RAPID CITY, SD 57701		H(a) Is this a grou	ıp return
	pending	F Name and address of principal officer: SCOTT CLARKE		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates	s included? 🔲 Yes 🔲 No
		mpt status: 501(c)(3) _X 501(c)(6) ◀ (insert no.) 4947(a)(1) o	or 527	If "No," attac	ch a list. (see instructions)
		EX CONSTRUCTIONINDUSTRYCENTER.COM		H(c) Group exemp	ption number 🕨
K F	orm of c	organization: X Corporation Trust Association Other	∟ Year	of formation: 195	3 M State of legal domicile: S1
Pa		Summary			
٦	1 B	Briefly describe the organization's mission or most significant activities: CONST	ructi	ON INDUST	RY CENTER,
ğ]	INC. IS A MEMBER-OWNED NOT-FOR-PROFIT CON	ISTRUC	TION ASSO	CIATION
٤١	2 0	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	ed of more	than 25% of its ne	et assets.
8	3 N	lumber of voting members of the governing body (Part VI, line 1a)			3
Activities & Governance		lumber of independent voting members of the governing body (Part VI, line 1b)		· •	4
Se l		otal number of individuals employed in calendar year 2010 (Part V, line 2a)			5
ξ		otal number of volunteers (estimate if necessary)	•		6
; 등		otal unrelated business revenue from Part VIII, column (C), line 12		·	7a 128,704
۷		let unrelated business taxable income from Form 990-T, line 34		-	7b -7,959
\neg			İ	Prior Year	Current Year
	8 C	Contributions and grants (Part VIII, line 1h)		229,01	
Revenue		Program service revenue (Part VIII, line 2g)		21,85	
) Ve		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	•	3,37	
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		155,72	
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		409,97	
-		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		4,50	
		Benefits paid to or for members (Part IX, column (A), line 4)			0.
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		212,778	8. 228,298
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	·		0. 0
E		otal fundraising expenses (Part IX, column (D), line 25)	o.		-
M		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	Ŭ. ⊢	172,18	5. 157,820
		otal expenses. Add lines 13-17 (must equal Part/IX, column (A), line-25).	•	389,46	
	10 1	Revenue less expenses. Subtract line 18 from line 12	→ ,	20,51	
<u>- 8</u>	19 F	revenue less expenses. Subtract line 16 from line 12	! 	ginning of Current Ye	-
Net Assets or Fund Balances	00 T	otal assets (Part X, line 16)	⊟ اد	239,33	
Sse	20 T	Total assets (Part X, line 16)	SI H	17,14	
Jet Jud	21 T	otal liabilities (Part X, line 26)	5 <i>¦</i> ⊢	222,19	
	22 N	Net assets or fund balances. Subtract line 21 from line 20	1	222,17	252,025
			l land statem	anta and to the best	of my knowledge and helpf it is
		ties of perjury—) declare that i have examined this return, including accompanying schedules , and complete. Declaration of preparer (other than officer) is based on all information of wh			of the knowledge and belief, it is
true,	correct		iich preparer	1 4.7	21 0 4 1/
		Fleverly Wittmeier Signature of offices		Date	30-2014
Sigr				<i>D</i> 410	
Her	e	BEVERLY WITTMEIER, EXECUTIVE DIRECTOR Type or print name and title			
			11	Date Check	PTIN
Del-		Print/Type preparer's name Preparer's signature	1000	l ıf	L
Pald	-	MICHAEL P DELL, CPA MELPILLY	11/14 0	4/22/14 self-en	
Prep	-	Firm's name CASEY PETERSON & ASSOC		Firm's EIN	-
use	Only	Firm's address 909 ST JOSEPH ST SUITE 101			/ COE \ 240 1020
_	L	RAPID CITY, SD 57701		Phone no.	(605)348-1930
		S discuss this return with the preparer shown above? (see instructions)			X Yes No
0320	01 02-22	LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2010

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2010)

Pa	rt IV Checklist of Required Schedules			age
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	ļ	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		l	
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			l
	during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		ļ	l
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<u> </u>	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	<u> </u>	X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			l
	If "Yes," complete Schedule D, Part V	10	, Total Report	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	912		2000 TO
	as applicable.	1 mg 48 4	* 7.	-1
а			٠,,	
	Part VI	11a	Х	<u> </u>
Ь		1		٠,
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С		ا ^ا		.
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	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	المدا		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e f		11e	<u> </u>	-
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	444		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		_ <u></u>
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь				
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			

operate one or more hospitals must attach audited financial statements (see instructions)

Form 990 (2010) CONSTRUCTION INDUS

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	g			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	l		
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
ь	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	_	
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	230		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	<u> </u>		
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business 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 IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		i	v
	If "Yes," complete Schedule N, Part I	31		_ <u>X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	00		v
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u> </u>
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
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 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_		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		_ [
	Note. All Form 990 filers are required to complete Schedule O	38_	X	
		Form	990 (2	2010)

Pa	t 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	0	103	 '''
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>र्</u> च		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Ť		l
_	(gambling) winnings to prize winners?	- 1c	$\overline{\mathbf{x}}$	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1.0	 -	\vdash
	filed for the calendar year ending with or within the year covered by this return	6		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1	 	<u> </u>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	05	 -	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country:	70	 	
_	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 	X
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 organization solicit	├ ~		
-	any contributions that were not tax deductible?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Va		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	100	<u> </u>	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	-	—
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	··-		
_	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	<u> </u>		
	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.	<u> </u>		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	┑		
11	Section 501(c)(12) organizations. Enter:	7	1	
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	7	1	
	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.	7		1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.	·		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			1
C	Enter the amount of reserves on hand	7		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

Part VI

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to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any guestion in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 9 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? **7**b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X 8b b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form? 11a 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 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? 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 13 Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO. Executive Director, or top management official X 15b **b** Other officers or key employees of the organization 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 16a taxable entity during the year? 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? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for 18 public inspection. Indicate how you make these available. Check all that apply. Another's website W Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: THE ORGANIZATION - 605-343-5252 2771 PLANT STREET, 57701 RAPID CITY, SD

Form	990 (2010)) (
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CONSTRUCTION INDUSTRY CENTER, INC

46-0242579

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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. 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.

(A)	(B)	organization compensate (C)						(D)	(E)	(F)		
Name and Title	Average	Position (check all that apply)						Reportable	Reportable	Estimated		
	hours per week (describe hours for related organizations	ustee or director	Institutional trustee	Call		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related		
	ın Schedule O)	Individe	Insttut	Officer	Кеу етрюуее	Highest employ	Former			organizations		
GEORG OLSON												
DIRECTOR	1.00	X	<u> </u>	<u> </u>		_		0.	0.	0.		
SCOTT CLARKE	1	l					ŀ			_		
PRESIDENT	1.00	X		Х	lacksquare	<u> </u>		0.	0.	0.		
MELISSA AUSTIN	1	l								_		
DIRECTOR	1.00	X						0.	0.	0.		
BRIAN NEUMANN	1 00	,,										
PRESIDENT-ELECT	1.00	X	<u> </u>		 			0.	0.	0.		
CURT CARTWRIGHT DIRECTOR	1.00	x						0.	0.	_		
DAVE VIALL	1.00	┢	┢		┢	╁		0.	U •	0.		
VICE PRESIDENT	1.00	x		x				0.	0.	0.		
KRISTI BARBER	1 2.00	 ^	\vdash		\vdash	╁				0.		
TREASURER	1.00	$ \mathbf{x} $		x				0.	0.	0.		
DARIN DOUGLAS		┢	\vdash		\vdash							
DIRECTOR	1.00	x						0.	0.	0.		
BOB CONWAY								···-				
DIRECTOR	1.00	X						0.	0.	0.		
BEVERLY WITTMEIER												
EXECUTIVE DIRECTOR	50.00			Х	_	ļ		49,218.	0.	0.		
			_	:	_	_			_			
							_					

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Part VII Section A. Officers, Directors, Tru		mple	oyee			High	est					
(A)	(B)		(C) Position					(D)	(E)		(F)	
Name and title	Average hours per	(c		Pos all t			oly)	Reportable compensation	Reportable compensation	n	Estimated amount of	
	week (describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Кву етріоуев	Highest compensated employee	rmer	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	s	other compensation from the organization and related organization	n d
	0)	르	ţ	#5	, Ke	五皇	횬					
		_			_					_	<u> </u>	
					-						<u> </u>	
						_						
								40.010				_
1b Sub-total	II Castian A							49,218.		0.		0.
 Total from continuation sheets to Part V Total (add lines 1b and 1c) 	II, Section A			٠				49,218.		0. 1		0.
Total number of individuals (including but r compensation from the organization	not limited to th	nose	liste	ed al	bov	e) w	ho r		0,000 in reportabl	e		
3 Did the organization list any former officer,	, director or tru	stee	e, ke	y em	nplo	yee,	or h	nighest compensated er	nployee on		Yes I	No
ine 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the si	um of reportab	le c							the organization			X
 and related organizations greater than \$15 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con 	accrue compe	nsat	tion 1	from	any	y uni			idual for services			X X
Section B. Independent Contractors	proce compan		0. 0.	2011						1		
Complete this table for your five highest contains the organization. NONE	ompensated in	dep	ende	ent c	ont	racte	ors t	that received more than	\$100,000 of con	npensa	ation from	
(A) Name and business	address							(B) Description of s	services	C	(C) ompensation	
						-						
	(m. 1)			1.								
Total number of independent contractors (\$100,000 in compensation from the organi		IOT II	mite	a to		ose II O	stec	above) who received n	nore than		Form 990 (20	

Pa	rt VIII	Statement of Reven	ue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ま	1 a	Federated campaigns	1a					
ga	b	Membership dues .	1b	232,035.				
am ts	C	Fundraising events	1c					
를 를	d	Related organizations	1d					
S.E	е	Government grants (contribute	ons) 1e	<u>-</u>				
흕킯	f	All other contributions, gifts, grant	s, and					
들힘		similar amounts not included abov	e [1f]					
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines	1a-1f \$]
<u>0 e</u>	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	232,035.			
				Business Code	14 460	14 460		_
<u>.</u> වූ		MEMBERSHIP DUES		900099	14,469.	14,469.		
출의	b	ANNUAL MTG/ CRA		900099	4,645.	4,645.		
e S	С	DRUG FREE ASSIS	TANCE	900099	2,010.	2,010.		
E a	d							
Program Service Revenue	е							
-	f	All other program service rever	nue	<u> </u>	21,124.			
\dashv	<u>g</u>	Total. Add lines 2a-2f	d d d	. •	21,124.			
	3	Investment income (including other similar amounts)	aiviaenas, inter t	est, and	735.			735.
	4	Income from investment of tax	avamet band r	raccada	755.			755.
	5	Royalties	exempt bond b	roceeus		, ==		-
- 1		1 toyaities	(ı) Real	(ii) Personal	**			†
	6 a	Gross Rents	1,200.	(ii) i cidoriai				
	b	Less: rental expenses	,					
	C	Rental income or (loss)	1,200.					
	d	Net rental income or (loss)		. •	1,200.			1,200.
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory		3,465.				
	b	Less: cost or other basis						
		and sales expenses		2,927.				
	С	Gain or (loss)		538.				
	d	Net gain or (loss)			538.		· - · · · · · · · · · · · · · · · · · ·	538.
힐	8 a	Gross income from fundraising	g events (not					
Ē		including \$	of					
ě		contributions reported on line	1c). See	04 04 6				
Other Revenue		Part IV, line 18	а					
ᄚ		Less: direct expenses	b	77,523.	2 702			2 702
		Net income or (loss) from fund	_	—	3,793.			3,793.
	9 а	Gross income from gaming ac						
		Part IV, line 19	. a b					
		Less: direct expenses Net income or (loss) from gam	_					
		Gross sales of inventory, less	-					
	.v a	and allowances	a					
	b	Less: cost of goods sold	a					
		Net income or (loss) from sales		—				1
1		Miscellaneous Revenue		Business Code				
	11 a	COPY SERVICES		561439	89,270.		89,270.	
	b	ADVERTISING		541880	39,434.		39,434.	
	c	HEALTH/ LIFE IN	SURANCE	900099	3,878.	3,878.		
	d	All other revenue		900099	15.			15.
	е	Total. Add lines 11a-11d	-	•	132,597.			
<u>გვეგ</u>	12	Total revenue. See instructions.		> _	392,022.	25,002.	128,704.	6,281.
03200 12-21	-10							Form 990 (2010)

Part IX Statement of Functional Expenses

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

	All other organizations must comp	olete column (A) but are	<u>.</u>	te columns (B), (C), and (L	·
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		·		
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	4,000.			
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	49,948.	<u></u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	44 8 48 9			
7	Other salaries and wages	117,473.			
8	Pension plan contributions (include section 401(k)	11 425			
_	and section 403(b) employer contributions)	11,437. 35,974.			
9	Other employee benefits	13,466.			
10	Payroll taxes	13,400.	 		·
11	Fees for services (non-employees):				
a	Management	-			
b	Legal	1,590.			
c C	Lobbying	1,350.			<u>.</u>
d	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	5,539.			
12	Advertising and promotion	- , , , , , , ,			
13	Office expenses		-		
14	Information technology				
15	Royalties			" "-"	
16	Occupancy	10,319.			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials			<u></u>	
19	Conferences, conventions, and meetings	8,428.			···
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,756.			
23	Insurance				
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 0.) SUPPLIES	19,086.			
a	POSTAGE & DELIVERY	17,548.		 	
b	BULLETIN COVER PRINTING	17,348.		 	
C	COPY COSTS	16,585.		 	·
d e	REPAIRS & MAINTENANCE	13,072.		 	
e f	All other expenses	33,449.		 	
25	Total functional expenses. Add lines 1 through 24f	390,118.			
<u>25</u> 26	Joint costs. Check here Juf following SOP	3,0,110		†·	
	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				

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	27,162	. 1	43,479
	2	Savings and temporary cash investments	75,309	2	49,338
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	23,014	4	13,425
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	<u> </u>
	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)		6	
8	7	Notes and loans receivable, net		7	
Wasels	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 653,	318.	l	
	b	Less: accumulated depreciation 10b 552,	113,849	10c	101,516
-	11	Investments - publicly traded securities		11	35,290
-	12	Investments - other securities. See Part IV, line 11		12	
-	13	Investments - program-related. See Part IV, line 11		13	
-	14	Intangible assets		14	
-	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	239,334		243,048
-	17	Accounts payable and accrued expenses	10,945	17	6,383
•	18	Grants payable .		18	
.	19	Deferred revenue .		19	
2	20	Tax-exempt bond liabilities .		20	
ဖွ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u> </u> 4	22	Payables to current and former officers, directors, trustees, key employee	es,		
		highest compensated employees, and disqualified persons. Complete Pa	ntll		
-		of Schedule L		22	
2	23	Secured mortgages and notes payable to unrelated third parties		23	
2	24	Unsecured notes and loans payable to unrelated third parties		24	
2	25	Other liabilities. Complete Part X of Schedule D	6,197		3,842
	26	Total liabilities. Add lines 17 through 25	17,142	26	10,225
		Organizations that follow SFAS 117, check here	ete		
Net Assets or Fund Balances		lines 27 through 29, and lines 33 and 34.			
i i	27	Unrestricted net assets	222,192		232,823
	28	Temporarily restricted net assets		28	
2 2	29	Permanently restricted net assets		29	
2		Organizations that do not follow SFAS 117, check here	d		
5		complete lines 30 through 34.			
į t	30	Capital stock or trust principal, or current funds		30	
ž :	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
j {	32	Retained earnings, endowment, accumulated income, or other funds	000 100	32	000 000
- :	33	Total net assets or fund balances	222,192		232,823
:	<u>34</u>	Total liabilities and net assets/fund balances	239,334	• 34	243,048

Form	990 (2010) CONSTRUCTION INDUSTRY CENTER, INC	46-024	2579	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1			22.
2	Total expenses (must equal Part IX, column (A), line 25)	2			18.
3	Revenue less expenses. Subtract line 2 from line 1	3			04.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			92.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3	3,7	27.
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	232	2,8	23.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				_
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?	•	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt.			
	review, or compilation of its financial statements and selection of an independent accountant?	•	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue				,
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	nale Audit	11		
	Act and OMB Circular A-133?	.3.2 :	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CONSTRUCTION INDUSTRY CENTER, INC

Employer identification number 46-0242579

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		-
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	ınds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	i only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	erring
	ımpermıssible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	V, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g , recreation or e	education) Preservation of an historic	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about a service 470(N)(4)(D)(2)	ve satisfy the requirements of section 170(n)(4)	
_	and section 170(h)(4)(B)(ii)?	·	
9	In Part XIV, describe how the organization reports conservat	•	
	include, if applicable, the text of the footnote to the organiza	ition's imancial statements that describes the C	organization's accounting for
Pa	conservation easements. † III Organizations Maintaining Collections of	f Art Historical Treasures or Other	r Similar Assets
	Complete if the organization answered "Yes" to Form		- C
12	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art
ıa	historical treasures, or other similar assets held for public ex	•	·
	the text of the footnote to its financial statements that descr		or public service, provide, in real XIV,
h	If the organization elected, as permitted under SFAS 116 (A)		balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	•
	relating to these items:	addation, or research in farther and or public s	service, provide the following amounts
	(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, historical tre	easures, or other similar assets for financial gair	n. provide
_	the following amounts required to be reported under SFAS 1		,, p. 0.100
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990. Part X	•	\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3			CTION INDU	STRY	CENTE	R, INC		4	6-02	4 2579	Page 2
(check all that apply): a	Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures,	or Othe	r Simila	r Asse	ts (contin	ued)
a	3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items						ıtems			
b Scholarly research c		(check all that apply):									
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	а	Public exhibition	C	ı 🖳	Loan or excl	hange progr	ams				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other ismilar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes □ No b If "Yes," explain the arrangement in Part XIV and complete the following table: □ Beginning balance d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses of Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment ▶	b	Scholarly research	•	, [Other						
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds at rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b f "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance 1c Amount c Beginning balance 1d Beginning balance 1d Beginning balance c Did the organization include an amount on Form 990, Part X, line 21? Yes No b f "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Chter expenditures for facilities and programs Administrative expenses (a) Grants or scholarships (b) Prior year (c) Two years back (d) Three years back (e) Four	C	Preservation for future generations									
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year 1	4	Provide a description of the organization's continuous	oliections and expla	in how th	ney further tl	he organizat	ion's exen	npt purpos	se in Par	t XIV.	
Part IV	5										
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?		to be sold to raise funds rather than to be maintained as part of the organization's collection?									
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes □ No b If "Yes," explain the arrangement in Part XIV and complete the following table: □ Amount □ C Beginning balance □ Additions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X,	Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
on Form 990, Part X? □ Yes □ No b f "Yes," explain the arrangement in Part XIV and complete the following table: □ Amount □ to □ Additions during the year □ Distributions during the year □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Did the organization include an amount on Form 990, Part X, line 21? □ Part V □ Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. □ Contributions □ Net investment earnings, gains, and losses □ Grants or scholarships □ Other expenditures for facilities □ and programs □ Administrative expenses □ End of year balance □ Provide the estimated percentage of the year end balance held as: □ Board designated or quasi-endowment ▶											
b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance	1a		an or other interme	diary for	contribution	s or other as	ssets not i	ncluded		_	
c Beginning balance d Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? Did the organization include an amount on Form 990, Part X, line 21? Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds answered "Ye		on Form 990, Part X?						•		Yes	L No
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e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	С	Beginning balance						1c			
f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment yes No Yes No No Yes No	d	Additions during the year						1d			
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b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance	_							1f			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back		_		21?						Yes	└─ No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back											
Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	Pai	· · · · · · · · · · · · · · · · · · ·									
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment Mathematical Programs			(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three ye	ars back	(e) Four y	rears back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	1a										
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and programs f Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment Begin	d	•									
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment \(\bigcup_{\text{w}} \) b Permanent endowment \(\bigcup_{\text{w}} \) c Term endowment \(\bigcup_{\text{w}} \) 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	е										
g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment b Permanent endowment c Term endowment M 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization							-				
Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	f										
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	g			<u> </u>							
b Permanent endowment ►% c Term endowment ►% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	2										
c Term endowment % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	a	-									
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	b										
by: Yes No	За		ession of the organiz	ation tha	at are held a	nd administe	ered for th	ie organiza	ition		
m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-									es No
(i) unrelated organizations		_									
(ii) related organizations 3a(ii)											
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	_		•							3b	
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.											
Description of investment (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value basis (other) depreciation		Description of investment							'	(a) ROOK	value
20,000		Land	Dasis (illvest	nent)		,	uep	- Colation	_	20	000
000 154		•	-				7	16 35	4		
b Buildings 289,154. 216,354. 72,800. c Leasehold improvements	D		•		20	<i>,,</i>			= !	, 4	,000.
225 005 226 400 0 506	ن بہ	·		-	33	5.085	3	26 48	9	Ω	596
		• •				_					120.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))			equal Form 990. Part	X. colur				- /	<u>- </u>	101	

Schedule D (Form 990) 2010

Part VII Investments - Other Securities	S. See Form 990, Part X, I	line 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				··
(B)				
(C)				
(D)				- ·
(E)				
(F)				19
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)▶			
Part VIII Investments - Program Relate	d. See Form 990, Part X,	line 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
(1)				
(2)	_			
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) >	<u> </u>		
Part IX Other Assets. See Form 990, Part X				(b) Book value
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)		· · · · · · · · · · · · · · · · · · ·		
(10)				
Total. (Column (b) must equal Form 990, Part X, col ((B) line 15.)			
Part X Other Liabilities. See Form 990, P				<u> </u>
(a) Description of liability		(b) Amount	Ī	
(1) Federal income taxes			1	
(2) PAYROLL LIABILITIES		3,238.	1	
(3) SALES TAX PAYABLE		290.	1	
(4) CREDIT CARDS	· -	314.	1	
(5)			1	
(6)			1	
]	
(8)]	
(9)	_]	
(10)]	
(11)				
Total. (Column (b) must equal Form 990, Part X, col	(B) line 25.)	3,842.		
FIN 48 (ASC 740) FOOTNOTE IN PART XIV, provide the text of the tox	טעוטנפ נט נוופ organization's tinancia	ai statements that reports the organ	nzation s liability for uncerta	un tax positions under

	dule D (Form 990) 2010 CONSTRUCTION INDUSTRY CENTER, INC		40-024	2019 Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finar	icial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		392,022.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		390,118.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		1,904.
4	Net unrealized gains (losses) on investments	4		8,727.
5	Donated services and use of facilities	5		
6	Investment expenses	6	<u>-</u>	
7	Prior period adjustments .	7		
8	Other (Describe in Part XIV.)	8		
9	Total adjustments (net). Add lines 4 through 8	9		8,727.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		10,631.
Pa	t XII Reconciliation of Revenue per Audited Financial Statements With Reve	nue per	Return	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments . 2a			
b	Donated services and use of facilities		⊣ ∣	
С	Recoveries of prior year grants 2c		⊣ ∣	
d	Other (Describe in Part XIV.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b		_ l	
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Exp	enses p	er Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1	
а	Donated services and use of facilities . 2a		⊣ 1	
b	Prior year adjustments 2b		⊣ ∣	
C	Other losses . 2c		⊣ ∣	
d	Other (Describe in Part XIV.)		_	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b		4	
b	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	-
	rt XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P			
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pr	ovide any a	additional inform	nation.
			·	
				
			<u></u>	

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Name of the organization **Employer identification number** CONSTRUCTION INDUSTRY CENTER, 46-0242579 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations b Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2010 CONSTRUCTION INDUSTRY CENTER, INC 46-0242579 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.									
e.		or fundacing event contributions and gre	(a) Event #1 GOLF	(b) Event #2 AUCTION (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))			
Revenue	1	Gross receipts	22,818.	58,498.		81,316.			
	2	Less: Charitable contributions							
	3	Gross income (line 1 minus line 2)	22,818.	58,498.		81,316.			
	4	Cash prizes							
ses	5	Noncash prizes							
Direct Expenses	6	Rent/facility costs							
Direct	7	Food and beverages							
	8	Entertainment Other direct expenses	21,521.	56,002.		77,523.			
	9 10	Other direct expenses Direct expense summary. Add lines 4 through		30,002.		77,523			
11 Net income summary. Combine line 3, column (d), and line 10									
Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than									
\$15,000 on Form 990-EZ, line 6a. (a) Pings (b) Pull tabs/instant (c) Other coming (d) Total gaming (add									
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))			
-Re	1	Gross revenue							
ses	2	Cash prizes		-					
Expenses	3	Noncash prizes							
Direct	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes % No	Yes % No	☐ Yes % ☐ No				
	7 Direct expense summary. Add lines 2 through 5 in column (d)								
8 Net gaming income summary. Combine line 1, column d, and line 7									
9 Enter the state(s) in which the organization operates gaming activities: a is the organization licensed to operate gaming activities in each of these states? b if "No," explain:									
		ere any of the organization's gaming licenses re Yes," explain:		•	year?	Yes No			
	_								

Sch	nedule G (Form 990 or 990-EZ) 2010 CONSTRUCTION INDUSTRY CENTER, INC 46-	0242579	Page 3
	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in:		
	a The organization's facility	13a	%
	b An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
17	Effect the flame and address of the person who prepares the diganization's gaming/special events books and records.		
	Name		
	Address >		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
k	b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
(c If "Yes," enter name and address of the third party:		
	- · · · · · · · · · · · · · · · · · · ·		
	Name		
	Address >		
16	Gaming manager information:		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	□ No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Б	art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (wi) and (v), and	Port III
[F 6			
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	on (see instruc	tions).
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-			
			
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

CONSTRUCTION INDUSTRY CENTER, INC

Employer identification number 46-0242579

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEDICATED TO THE BETTERMENT OF THE INDUSTRY.
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIRECTORS IS NOTIFIED
OF THE COMPLETION OF FORM 990 AND IT IS MADE AVAILABLE FOR REVIEW UPON
REQUEST.
FORM 990, PART VI, SECTION B, LINE 15: THE FINANCE COMMITTEE ANNUALLY
REVIEWS WAGE, SALARY AND BENEFITS AND MAKES RECOMMENDATION TO THE BOARD OF
DIRECTORS FOR ANY APPLICABLE CHANGE FOR BOTH MANAGEMENT AND EMPLOYEES.
STATISTICAL DATA FROM THE SD DEPARTMENT OF LABOR, LABOR MARKET INFORMATION
CENTER, IS UTILIZED TO GUIDE DECISIONS.
FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES IT'S
ORGANIZATIONAL DOCUMENTS AND FORM 990 AND 990-T AVAILABLE TO THE PUBLIC
UPON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES IT'S
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON
REQUEST.
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:
NET UNREALIZED GAINS ON INVESTMENTS: 8,727.
FORM 990-T
AMENDED FORM 990-T

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization CONSTRUCTION INDUSTRY CENTER, INC	Employer identification number 46-0242579
THE TAXPAYER IS AMENDING FORM 990-T IN ORDER TO RECEIVE T	THE CREDIT FOR
SMALL EMPLOYER HEALTH INSURANCE PREMIUMS. SEE THE ATTACHE	ED FORM 8941
AND SUPPORTING STATEMENTS.	
•	
	
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