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DLN: 93493320030682

Form **990**

Department of the Treasury

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)

2011

OMB No 1545-0047

Open to Public

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

Internal Rev				· - ·		Inspection	
		011 calendar year, or tax year beginning 01-01-2011 and ending	12-31-20		nployer id	dentification number	
B Check	-	PORTLAND CEMENT ASSOCIATION					
☐ Addre		Doing Business As			-16389 ephone i		
│ Name				(8	47)966	-6200	
☐ Initial —		Number and street (or P O box if mail is not delivered to street addr 5420 OLD ORCHARD ROAD	ss) Room/	/suite		s \$ 49,209,713	
Termı					'		
Amen	ded re	eturn City or town, state or country, and ZIP + 4 SKOKIE, IL 600771083					
Applic	ation	pending					
		F Name and address of principal officer		H(a) Is this a gr	oup retu	rn for	
		BRIAN MCCARTHY 5420 OLD ORCHARD ROAD		affiliates?		⊤Yes 🔽 No	
		SKOKIE,IL 600771083		H(b) Are all affilia	ites inclu	ided?	
						t (see instructions)	
I Tax-€	exem	ot status 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or	527	H(c) Group exe	mption r	umber 🟲	
J Web	site	► WWW PORTCEMENT ORG					
K Form o	of org	anization 🗸 Corporation Trust Association Other 🕨		L Year of formation	1971	M State of legal domicile IL	
Part	_	Summary					
		riefly describe the organization's mission or most significant activi	ies				
		MPROVE & EXPAND USES OF PORTLAND CEMENT & CONCRET		JGH EDUCATIONAL	SUPPO	RT & PROMOTION	
<u>မ</u> ို	_						
፪	-						
Activities & Governance	2 C	heck this box 🔭 if the organization discontinued its operations o	dispose	d of more than 25% o	fıts net	assets	
ទី		umber of voting members of the governing body (Part VI, line 1a)			з	56	
ჯ ნ თ		umber of independent voting members of the governing body (Part			4	5.5	
ĕ		otal number of individuals employed in calendar year 2011 (Part V		•	5	107	
	6 T	otal number of volunteers (estimate if necessary)			6	0	
₹	7 a ⊤	otal unrelated business revenue from Part VIII, column (C), line 1	2		7a	23,695	
	ЬN	et unrelated business taxable income from Form 990-T, line 34			7b	0	
				Prior Yea	•	Current Year	
	8	Contributions and grants (Part VIII, line 1h)		42,000	20,000		
Havenue 1	9	Program service revenue (Part VIII, line 2g)		. 34,4	24,443	32,767,816	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	.0	Investment income (Part VIII, column (A), lines 3, 4, and 7d) \cdot		. 1,0	19,206	.06 383,60	
- 1	.1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, ar	-		29,235	5,606,505	
1	.2	Total revenue—add lines 8 through 11 (must equal Part VIII, colu	,		44,884	38,777,926	
1	.3	Grants and similar amounts paid (Part IX, column (A), lines 1–3			58,714	536,327	
	.4	Benefits paid to or for members (Part IX, column (A), line 4) .			0	0	
1	.5	Salaries, other compensation, employee benefits (Part IX, column		5			
<u> </u>		5-10)	` '/	13,8	67,873	14,986,006	
Expenses	.6a	Professional fundraising fees (Part IX, column (A), line 11e) $$.			0	0	
ਲੌ	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0					
	.7	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		. 23,6	33,748	23,874,804	
	.8	Total expenses Add lines 13-17 (must equal Part IX, column (A			10,335	39,397,137	
-	.9	Revenue less expenses Subtract line 18 from line 12			34,549	-619,211	
\$ 60 B				Beginning of Co Year	ırrent	End of Year	
age	20	Total assets (Part X, line 16)	_		49,325	29,994,914	
# B	21	Total liabilities (Part X, line 26)			54,291	16,229,153	
æ ∰ °	22	Net assets or fund balances Subtract line 21 from line 20			95,034	13,765,761	
Part	_	Signature Block			, - , 1		
Under p	enalt Ige a	ies of perjury, I declare that I have examined this return, including according to be seen that I have examined this return, including according to be seen that I have examined this return, including according to be seen that I have examined this return, including according to be seen to be seen that I have examined this return, including according to be seen to be seen that I have examined this return, including according to be seen to	mpanying r than offi	schedules and stateme cer) is based on all info	nts, and rmation	to the best of my of which preparer has any	
		*****		2012-11-	15		
Sign		Signature of officer			1.0		
Here		BRIAN MCCARTHY CEO					
		Type or print name and title					
Paid		Preparer's signature Date		self (see	arer's taxp instruction 43269	payer identification number ns)	
Prepare		Firm's name (or yours LEGACY PROFESSIONALS LLP		ETN	32-004	3599	
Use On	ıv l	if self-employed), address, and ZIP + 4 311 S WACKER DRIVE STE 4000		I 51N	- 52-004.	3333	

CHICAGO, IL 60606

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

Phone no 🕨 (312) 368-0500

	(/				rage
Par		ent of Program Service Schedule O contains a response	Accomplishments e to any question in this Part III		দ
1	Briefly describe	the organization's mission			
IMPF PRO	ROVED WHICH C GRAMS OF MARK	ONTRIBUTES TO A BETTER E	CEMENT AND CONCRETE BY ENVIRONMENT IN PRACTICE, CON, RESEARCH, TECHNICAL SEE US AND CANADA)	THIS MANDATE MEANS WELL	-ROUNDED
2		tion undertake any significant p 90 or 990-EZ?	program services during the year		Yes ✓ No
	If "Yes," describ	e these new services on Sched	ule O		
3		tion cease conducting, or make	significant changes in how it cor		Yes ▽ No
	If "Yes," describ	e these changes on Schedule C)		
4	expenses Secti	on 501(c)(3) and 501(c)(4) org	complishments for each of its thr janizations and section 4947(a)(nses, and revenue, if any, for eac	1) trusts are required to report	measured by the amount of
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	RESOURCES, PROI		Y ASSOCIATION WHOSE MEMEBERSHIP I RCH, PUBLIC AFFAIRS AND CODE WORK		
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	PCA'S PUBLICATIO	NS AND DESIGN AIDS MAKE IT EASIER	TO BUILD WITH CONCRETE AND INCLU	DE THE LATEST INFORMATION ON QUA	ЦТY
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program	services (Describe in Schedul	e O)		
	(Expenses \$	ıncludın	g grants of \$) (Revenue \$)
4e	Total program :	service expenses►\$			

Part TV	Checklist	of Require	d Schedules
	CHECKHIST	oi Keuuli e	a Scheuules

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	<u> </u>
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^{\bullet}	3	Yes	
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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? If "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		No
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. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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 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		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

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Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	-1	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 16			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
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)			
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities	4 a	×	
b	account)?		Yes	
_	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	- 55		
	Does the organization have annual gross resourts that are normally greater than \$100,000, and did the	5c		No
1	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		INU
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter Instruction foce and control contributions uncluded on Bart VIII. June 12			
	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 10b			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
U	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
ь	Enter the aggregate amount of reserves the organization is required to maintain by			
c	Enter the aggregate amount of reserves on hand			
	13c	12.		NJ =
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
U	In 163, has it lied a roth 720 to report these payments 11 No, provide an explanation in Schedule 0	TAD		

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 year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	u.
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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 evenue Code.)			
Re	venue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	-110
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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?			Ti.
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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.			

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 made these available.

Own website Another's website V Upon request

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

5420 OLD ORCHARD ROAD SKOKIE,IL 600771083

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee	
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)		related organizations
See Additional Data Table											
				\vdash			_				

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

	(A) Name and Title	(B) Average hours per week (describe	more unles an	(C) (D) (E) Position (do not check more than one box, unless person is both an officer and a director/trustee) (W- 2/1099-MISC) (W- 2/1099-MISC)							(F) Estimated amount of other compensation from the organization and related		
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	relat organiza		
See A	ddıtıonal Data Table												
1b	Sub-Total				<u> </u>			<u> </u>					
С	Total from continuation sheets	•						F					
d 	Total (add lines 1b and 1c) . Total number of individuals (incl) who	2,620,659	0		247,507	
_	\$100,000 of reportable compen						above	<i>,</i> •••••	received more the	411			
											Yes	No	
3	Ord the organization list any for on line 1 a? If "Yes," complete Sch				ee, k • •	eye •	mploy •	ee, c	or highest compens		3	No	
4	For any individual listed on line is organization and related organization									ch	4 Yes	1	
5	Did any person listed on line 1a services rendered to the organiz									or individual for	4 Yes 5	N o	
											-		
1	ction B. Independent Con Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio											
		(A) ne and business add	dress						Desc	(B) ription of services	(C Comper		
	Total number of independent cont \$100,000 of compensation from t			ot lır	nıted	to	those	liste	d above) who recei	ved more than			

Form 99								Page 9
Part \	/!!!	Statement o	f Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts nts	1a	Federated cam	paigns 1a					
gra	b		es 1b					
ts, aπ	C		ents 1c					
<u> </u>	d		rations 1d	20,000				
Sign Sign	e	Government grants						
¥ ¥	f	sımılar amounts no						
를 등 등 등	g		butions included in					
Contributions, gifts, grants and other similar amounts	h		s 1a-1f	▶	20,000			
				Business Code				
auri	2a	MEMBERSHIP DUE	S	541900	31,928,874	31,928,874		
Be K	ь	NON DUES REVENU	JE	541900	372,236	372,236		
- Ce	c	INCOME FROM SEE	RVICES	541900	339,036	339,036		
E.	d	CONTRACT REVEN	UE	541900	127,670	103,975	23,695	
<u> </u>	e							
Program Serwce Revenue	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f		32,767,816			
	3		ome (including dividen	_				
			ar amounts) stment of tax-exempt bond	⊢	381,504			381,504
	4 5							
		responding 1	(ı) Real	(II) Personal				
	6a	Gross rents	888,131					
	ь	Less rental expenses	0					
	c	Rental income or (loss)	888,131					
	d		me or (loss)		888,131			888,131
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	10,125,786					
	b	Less cost or other basis and	10,123,685					
	c	sales expenses Gain or (loss)	2,101					
	d	Net gain or (los			2,101			2,101
<u>e</u>	8a	Gross income f events (not inc						
Other Revenue		\$ of contributions See Part IV , lin						
<u> </u>	Ь	Loca direction	penses b					
₽	c		(loss) from fundraising	events 🕦				
	9a		rom gaming activities le 19					
	b c		a penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	inventory, less					
	Ь		a oods sold b	1,301,259 308,102	993,157	993,157		
	С	Miscellaneous	(loss) from sales of inve s Revenue	Business Code	223,137	773,137		
	11a	SPECIAL ASSI		900099	3,235,950	3,235,950		
	ь	MISCELLANO	JS	900099	489,267	489,267		
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	🕨	3,725,217			
	12	Total revenue.	See Instructions .	►	38,777,926	37,462,495	23,695	1,271,736

Form 990 (2011) Page **10** Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 406,047 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United 130,280 States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 2,154,828 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 9,423,467 Pension plan contributions (include section 401(k) and section 750,852 403(b) employer contributions)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 6,875,094 6,920,668 1 1 119,489 2 119.841 2 3 3 6.332.946 4 4 8.341.181 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 1.095.805 8 897.029 9 845,288 974,606 Prepaid expenses and deferred charges 10a 12,960,444 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 9,937,293 b Less accumulated depreciation 2,142,553 10c 3,023,151 11 11 7,636,082 4,811,685 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 6,401,716 4,907,105 15 15 31,449,325 29,994,914 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 2,550,467 3,470,662 17 17 Accounts payable and accrued expenses . 18 375,000 18 375,000 19 247, 154 19 311,910 20 20 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 10,081,670 25 12,071,581 D 26 13,254,291 26 16,229,153 **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 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

 and complete lines 30 through 34. ö 0 0 30 Capital stock or trust principal, or current funds 30 Assets 0 0 31 31 Paid-in or capital surplus, or land, building or equipment fund 18, 195, 034 32 32 13,765,761 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 18.195.034 33 13.765.761 34 Total liabilities and net assets/fund balances 31.449.325 34 29.994.914

Pai	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		38,7	777,926
2	Total expenses (must equal Part IX, column (A), line 25)	2			 397,137
3	Revenue less expenses Subtract line 2 from line 1	3		-6	519,211
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18,1	195,034
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-3,8	310,062
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		13,7	765,761
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in 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 is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Software ID: Software Version:

EIN: 36-1638940

Name: PORTLAND CEMENT ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

(A) Name and Title	(B) Average hours		(tion that a					(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
BRIAN MCCARTHY CEO/PRESIDENT	40 00	Х		Х				513,928	0	147,937
ARIS J PAPADOPOULOS CHAIR	1 00	х						0	0	0
SYLVAIN GARNAUD VICE CHAIR	1 00	Х						0	0	0
STEVE AMBROSE DIRECTOR	1 00	Х						0	0	0
MARCO GOMEZ-BARRIOS DIRECTOR	1 00	Х						0	0	0
THOMAS BECK DIRECTOR	1 00	Х						0	0	0
OLIVIER BIEBUYCK DIRECTOR	1 00	Х						0	0	0
JAMES BRASLETON DIRECTOR	1 00	Х						0	0	0
MEL BREKHUS DIRECTOR	1 00	Х						0	0	0
CARY COHRS DIRECTOR	1 00	Х						0	0	0
ROBERT COOPER DIRECTOR	1 00	Х						0	0	0
FRANK CRADDOCK DIRECTOR	1 00	Х						0	0	0
JAMES DERKATCH DIRECTOR	1 00	Х						0	0	0
GEORGE DOUMET DIRECTOR	1 00	Х						0	0	0
GARY EATHORNE DIRECTOR	1 00	Х						0	0	0
MARTIN FALLON DIRECTOR	1 00	Х						0	0	0
ENRIQUE ESCALANTE DIRECTOR	1 00	Х						0	0	0
DUNCAN GAGE DIRECTOR	1 00	Х						0	0	0
FRANCESCO CARANTANI DIRECTOR	1 00	Х						0	0	0
JAMES GATENS DIRECTOR	1 00	Х						0	0	0
JOSEPH GOSS DIRECTOR	1 00	Х						0	0	0
GEORGE GREGORY DIRECTOR	1 00	Х						0	0	0
ALLEN HAMBLEN DIRECTOR	1 00	Х						0	0	0
DANIEL M HARRINGTON DIRECTOR	1 00	Х						0	0	0
SATISH SHETH DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and	Independ	ent C	ónti	act	tors	<u> </u>				
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
FA INNIS DIRECTOR	1 00	X						0	0	0
R MICHAEL JOHNSON DIRECTOR	1 00	Х						0	0	0
ROBERT KIDNEW DIRECTOR	1 00	Х						0	0	0
DAVID LOOMES DIRECTOR	1 00	Х						0	0	0
ERIK MADSEN DIRECTOR	1 00	Х						0	0	0
KIMBALL MCCLOUD DIRECTOR	1 00	Х						0	0	0
GERRY MCKERVEY DIRECTOR	1 00	Х						0	0	0
JASON MORIN DIRECTOR	1 00	Х						0	0	0
DAVID NEPERENY DIRECTOR	1 00	Х						0	0	0
PAUL OSTRANDER DIRECTOR	1 00	Х						0	0	0
THOMAS G EDWARDS DIRECTOR	1 00	Х						0	0	0
SCOTT PALMER DIRECTOR	1 00	Х						0	0	0
HAMID FARZAM DIRECTOR	1 00	Х						0	0	0
LUC PAPILLON DIRECTOR	1 00	X						0	0	0
ERIC FLESCH DIRECTOR	1 00	Х						0	0	0
KARI SARAGUSA DIRECTOR	1 00	Х						0	0	0
RAYMOND SEIPP DIRECTOR	1 00	Х						0	0	0
HARDY JOHNSON DIRECTOR	1 00	Х						0	0	0
GUY SIDOS DIRECTOR	1 00	Х						0	0	0
ROGER SMITH JR DIRECTOR	1 00	Х						0	0	0
CHARLES SUNDERLAND DIRECTOR	1 00	Х						0	0	0
TIMOTHY KUEBLER DIRECTOR	1 00	Х						0	0	0
BERNARD TERVER DIRECTOR	1 00	Х						0	0	0
GILBERT NATTA DIRECTOR	1 00	Х						0	0	0
ALLEN WALSH DIRECTOR	1 00	Х						0	0	0

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		(tion that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
KARL WATSON JR DIRECTOR	1 00	×						0	0	0	
GEORGE M WELLS DIRECTOR	1 00	Х						0	0	0	
MIKE PHILLIPS DIRECTOR	1 00	Х						0	0	0	
WALTER WULF JR	1 00	X						0	0	0	
DIRECTOR FILIBERTO RUIZ	1 00	X						0	0	0	
DIRECTOR ROBERT SULLIVAN	1 00	X						0	0	0	
DIRECTOR MARK ANDERSON	1 00	X						0	0	0	
DIRECTOR - PAST GILBERTO PEREZ									_		
DIRECTOR - PAST ANDRES OSUNA	1 00	Х						0	0	0	
DIRECTOR - PAST	1 00	X						0	0	0	
SILVIO PANSERI DIRECTOR - PAST	1 00	Х						0	0	0	
JAMES REPMAN DIRECTOR - PAST	1 00	Х						0	0	0	
JUAN CARLOS HERRERA DIRECTOR - PAST	1 00	Х						0	0	0	
CHRISTOPHE TEMPIER DIRECTOR - PAST	1 00	Х						0	0	0	
FRANCISCO UZCATEGUI DIRECTOR - PAST	1 00	Х						0	0	0	
STEVE WISE DIRECTOR - PAST	1 00	Х						0	0	0	
ANDREW O'HARE VP REGULATORY AFFAIRS	40 00			х				223,188	0	8,742	
DAVID HUBBARD VP LEGISLATIVE AFFAIRS	40 00			Х				187,157	0	12,841	
JOHN SHAW SENIOR VP GOVERNMENT AFFAI	40 00			х				230,403	0	20,644	
JAN FARNSWORTH CORP SEC'Y	40 00			х				117,810	0	7,200	
LAURA NEDLI CFO	40 00			Х				198,254	0	13,192	
MICHAEL MCSWEENEY PRESIDENT CANADIAN OPERATI	40 00				Х			332,884	0	6,061	
JOHN PRENTICE SENIOR VP	40 00					Х		150,235	0	5,641	
EDWARD SULLIVAN CHIEF ECONOMIST	40 00					Х		180,660	0	17,644	
STEPHEN SZOKE DIR OF CODES & STANDARDS	40 00					Х		155,000	0	0	
STEVEN KOSMATKA VP	40 00					х		157,590	0	6,063	

(A) Name and Title	(B) A verage hours	Average Position (check all hours that apply)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustae 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
MARK JUSTMAN VP	40 00					Х		173,550	0	1,542

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DLN: 93493320030682

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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

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

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

S∈ Sth	ection 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II- ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Fare organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line ection 501(c)(4), (5), or (6) organizations Complete Part III	Part⊪B Do	not co	omplete Part	II-A
	RTLAND CEMENT ASSOCIATION	nployer id 5-163894		ation numbe	er
aı	t I-A Complete if the organization is exempt under section 501(c) or is a se			ganizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities on beha in opposition to candidates for public office in Part IV	lfofor			
2	Political expenditures	F	\$		
3	V olunteer hours		_		
Pai	rt I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	>	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	>	\$ _		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
b	If "Yes," describe in Part IV				
Pai	rt I-C Complete if the organization is exempt under section 501(c) except so	ection 5	01(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function acti	vities 🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 52 exempt funtion activities	.7 ►	\$ <u>_</u>		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17	b -	\$		
4	Did the filing organization file Form 1120-POL for this year?		* -	☐ Yes	□ No

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) PORTLAND CEMENT ASSOCIATION POLITICAL ACTION COMMITTEE	500 NEW JERSEY AVENUE NORTHWEST 7T WASHINGTON, DC 20001	36-1638940		53,960

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S17,000,000 F17,000,000 F17,000		-			1 \		100013	Totals
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 In the excess over \$1,000,000 F1,000,000 F1,000,0				· -				
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Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0	d	Otherexe	empt purpose expenditures					
Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 Over \$1,500,000 S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount	f		nontaxable amount Enter the amount					
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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

	(election under section 501(n)).	(a	1)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
C	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?			
b	If "Yes," enter the amount of any tax incurred under section 4912	'		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		İ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		ľ	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5), o	r section

501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	28,850,012
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	4,370,495
b	Carryover from last year	2b	27,905
С	Total	2c	4,398,400
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	4,697,423
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-299,023

Supplemental Information Part IV

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Return Reference | Explanation Identifier

DLN: 93493320030682

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public

itema	Revenue Service	Form 990. ► See separate instructions.		ΤU	spect	lon
	me of the organization RTLAND CEMENT ASSOCIATION		Empl	oyer identification	numbe	r
PUF	RILAND CEMENT ASSOCIATION		36-1	638940		
Pa	rt I Organizations Maintaining Donor		unds o	or Accounts. Co	mplet	e if the
	organization answered "Yes" to Form S			I > 5 1 1 1		
1	Total number at end of year	(a) Donor advised funds	(1	b) Funds and other	accour	its
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 ad funds are the organization's property, subject to the		or advis		Yes	
6	Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be conferring impermissible private benefit			purpose	Yes	┌ No
Pa	rt III Conservation Easements. Complete	e if the organization answered "Yes" t	o Form	990, Part IV, lın	e 7.	
1 2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quantitation of the formula of the for	Preservation of an Preservation of a c	ertified	historic structure	nd area	1
	easement on the last day of the tax year	I		Held at the End	of the	Year
а	Total number of conservation easements		2a	note at the Life	01 1110	
b	Total acreage restricted by conservation easemen	ts	2b			
С	Number of conservation easements on a certified h	istoric structure included in (a)	2c			
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d			
3	Number of conservation easements modified, trans	ferred, released, extinguished, or terminate	d by the	e organization durir	ng	
	the taxable year 🛌					
1	Number of states where property subject to conser	vation easement is located 🕨				
5	Does the organization have a written policy regards enforcement of the conservation easements it hold	ng the periodic monitoring, inspection, hand	dling of		Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, in	specting and enforcing conservation easem	ents du	ring the year ►		
7	A mount of expenses incurred in monitoring, inspec \$ \(\)	ting, and enforcing conservation easements	s during	the year		
3	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion	Г	Yes	┌ No
9	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease.	f the footnote to the organization's financial		·	5	
Par	Complete if the organization answered		or Oth	er Similar Ass	ets.	
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its f	ld for public exhibition, education or researc	ch in fur			,
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held fo provide the following amounts relating to these iter	r 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, his following amounts required to be reported under SF		or financ			
а	Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

	Organizations Maintaining Co	HECCIONS OF ALL	, 1113	LUII	cai iie			uici	J	. 	memaeu)
3	Using the organization's accession and othe items (check all that apply)	records, check an	y of th	ne foll	owing th	at are	e a sıgnıfıca	nt us	e of its collectio	n	
а	Public exhibition		d	Γ	Loan or	exch	hange progr	ams			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and expla	ain hov	w the	y further	the o	rganızatıon	's exe	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	d "Y€	es" to Form 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	edıary	for c	ontributio	ons o	or other ass	ets n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	/ıng ta	able		Г		A		
_							-	4-	Amo	unt	
c d	Additions during the year						-	1c 1d			
u e	Additions during the year							1a 1e			
f	Distributions during the year						H	1f			
	Ending balance	orm 0.00 Dart V Lin					L	ті		Vaa	
2a 	Did the organization include an amount on Fo		ie ZI /						1	Yes	│ No
	If "Yes," explain the arrangement in Part XIV		n an-		nd "Vas"	' to '	Form 000	Dart	TV line 10		
Par	t V Endowment Funds. Complete	(a)Current Year)Prior \			o Years Back			:)Four Y	ears Back
1a	Beginning of year balance	(a) and a dark	ν	,		(-)		(-,-		,,	
b	Contributions										
c	Investment earnings or 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 yea	r end balance held	as						•		
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment										
С	Term endowment ▶										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation ·	that a	are held a	and a	dmınıstered	l for t	he	Yes	No
	(i) unrelated organizations								3a(i)	1	
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	d on S	Sched	ule R?				3b		
4	Describe in Part XIV the intended uses of th										
D	t VI Land, Buildings, and Equipme	nt. See Form 99	90, Pa	rt X	, lıne 10) <u>. </u>			т		
М				(a)	Cost or ot	ther	(b)Cost or of	ther	(c) Accumulated		
Par	Description of property			bas	is (investm	nent)	basis (othe	r)	depreciation	(d) Bo	ok value
	Description of property			bas	is (investm	nent)	basis (othe	r) ,683	depreciation	(d) Bo	
1a L				bas	is (investm	nent)	basis (othe	,683	depreciation 4,131,132	(d) Bo	215,683
1a L b E	and		· ·	bas	s (investm	nent)	basis (othe	,683	·		215,683
1a L b E c L	and	· · · · · · · · · · · · · · · · · · ·	· · ·	bas	s (investm	nent)	basis (othe 215, 4,131,	,683 ,132 ,080	4,131,132		215,683 0 2,015,252
1a L b E c L d E	and		· · ·	bas	s (Investm	nent)	basis (other 215, 4,131, 6,023,	,683 ,132 ,080	4,131,132 4,007,828		215,683 0 2,015,252 792,216

Part VII Investments—Other Securities. See (a) Description of security or category			od of valuation
(including name of security)	(b) Book value		f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other (A)MARKETABLE SECURITIES	4,811,685		F
(1)	1,011,000		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	. ,		
Part VIII Investments—Program Related. See	e Form 990, Part X, line :		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		2032 01 2114 0	y car market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion		(b) Book value
(1) INVESTMENT IN SUSIDIARY (2) DIVIDENDS RECEIVABLE			4,688,128
(3) ACCRUED INTEREST AND DIVIDENDS			18,977
(3) ACCROED INTEREST AND DIVIDENDS			10,577
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			4,907,105
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
LIABILITY FOR PENSION BENEFIT	11,741,344		
DEFERRED CLAIMS RESERVE	150,000		
DUE TO RELATED ORGANIZATIONS	180,237		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	12,071,581		
	. ,		

Part	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 - 8	9
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er 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	
b	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
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 . 4a	
b	Other (Describe in Part XIV)	
С	Add lines 4a and 4b	4c
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per 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	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIV) 2d	
e	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:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV)]
c	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5
Part	XIV Supplemental Information	

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

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

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DLN: 93493320030682

OMB No 1545-0047

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SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

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

					36-1638940	
Pa	rt I General Informatio "Yes" to Form 990, Pa			he United States. (Complete if the organiz	ation answered
1	For grantmakers. Does the	organization n	naıntaın record	ls to substantiate the	amount of the grants	
_	assistance, the grantees' elig					
	the grants or assistance?					
						,
2	For grantmakers. Describe in Pa United States	irt V the organiz	atıon's procedu	res for monitoring the us	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	CANADA	5	19	PROGRAM SERVICES	IMPROVE AND EXPAND THE USES OF PORTLAND CEMENT AND CONCRETE THROUGH EDUCATIONAL SUPPORT AND PROMOTION	6,221,259
За	Sub-total	5	19			6,221,259
	Total from continuation sheets to Part I	0	0			0

Pa	Part IV, l	ine 15, for any	sistance to Orga y recipient who rec space is needed.	nizations or Entition erved more than \$5,	es Outside the Un 000. Check this box	ited States. Comp of no one recipient	plete if the organization in the contract of t	tion answered "Yes" n \$5,000	to Form 990, ► 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	CONTRIBUTION	7,000	CHECK			
			NORTH AMERICA	CONTRIBUTION	20,000	CHECK			
			NORTH AMERICA	CONTRIBUTION	84,100	CHECK			
			NORTH AMERICA	CONTRIBUTION	5,500	CHECK			
2				sted above that are ree					
3	Enter total nun	nber of other	organızatıons or eı	ntities				. ▶	43

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earre 000) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	굣	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	[ত	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	া	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	া	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ন	Νo

Schedule F (Form 990) 2011

Part V Supplemental Information

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

<u> </u>	ReturnReference	Explanation
METHOD USED TO ACCCOUNT FOR EXPENDITURES		Explanation SCHEDULE F, PART I, LINE 3 ACCRUAL - US GAAP
	•	

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Part General Information on Grants and Assistance

Schedule I (Form 990)

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

OMB No 1545-0047

2011

DLN: 93493320030682

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization
PORTLAND CEMENT ASSOCIATION

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990

Employer identification number

36-1638940

Form 990, Part I	V, line 21 for any	recipient that received	d more than \$5,000.	. Check this box if no	one recipient rec		000. Use
		00) if additional space		Г			T
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
)THE PURDUE DUNDATION INC1281 IN HENTSCHEL BLVD EST LAFAYETTE,IN 7906	31-0958507	501C3	158,000				RESEARCH
)							CONTRIBUTION
PORTLAND CEMENT SSOCIATION DUCATION FOUNDATION 420 OLD ORCHARD ROAD KOKIE,IL 60077	36-4486749	501C3	150,803				EDUCATION

Part III	Grants and Other Assistance to Individuals in the United States. C	omplete if the organization.	answered "Yes" to	Form 990	Part IV line 22
r arc 111	Use Schedule I-1 (Form 990) if additional space is needed.	omplete il tile organization	answered res to	101111 330,	are iv, inic 22.

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

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

DLN: 93493320030682

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** PORTLAND CEMENT ASSOCIATION 36-1638940

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	✓ Compensation committee ✓ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		
b	b Any related organization?			
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		
For F	rivacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990 Cat No 50053T Schedule	l (For	m 990	2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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) BRIAN MCCARTHY	(I) (II)	397,837 0	98,494 0	17,597 0	125,000 0	22,937 0	661,865 0	
(2) ANDREW O'HARE	(ı) (ıı)	183,855 0	39,333 0	0	0 0	8,742 0	231,930 0	
(3) DAVID HUBBARD	(ı) (ıı)	160,165 0	26,992 0	0	0	12,841 0	199,998 0	
(4) JOHN SHAW	(I) (II)	219,339 0	6,489 0	4,575 0	0	20,644 0	251,047 0	
(5) LAURA NEDLI	(ı) (ıı)	173,264 0	24,990 0	0	0	13,192 0	211,446 0	
(6) MICHAEL MCSWEENEY	(ı) (ıı)	227,297 0	105,587 0	0	0	6,061 0	338,945 0	,
(7) JOHN PRENTICE	(ı) (ıı)	150,235 0	0	0	0	5,641 0	155,876 0	
(8) EDWARD SULLIVAN	(1) (11)	175,660 0	5,000 0	0	0	17,644 0	198,304 0	
(9) STEPHEN SZOKE	(ı) (ıı)	155,000 0	0	0	0	0	155,000 0	
(10)STEVEN KOSMATKA	(ı) (ıı)	157,590 0	0	0	0	6,063 0	163,653 0	
(11) MARK JUSTMAN	(I) (II)	163,550 0	10,000	0	0	1,542 0	175,092 0	,

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

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

Schedule J (Form 990) 2011

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2011

Open to Public Inspection

Name	of the	orgar	nızatıon
PORTLA	ND CE	MENT A	SSOCIATION

Employer identification number

36-1638940

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	THE FOLLOWING ARE ALL BUSINESS RELATIONSHIPS ENRIQUE ESCALANTE AND STEVE AMBROSE ALL WORK FOR GCC OF AMERICA FRANK CRADDOCK, HAMID FARZAM, MIKE PHILIPPS, SATISH SHETH, ROBERT SULLIVAN, KARL WATSON JR ALL WORK FOR CEMEX JAMES A BRASELTON, SYLVAIN GARNAUD, JOSEPH GOSS, OLIVIER BIEBUY CK AND ROBERT COOPER ALL WORK FOR LAFARGE NORTH AMERICA FA INNIS, DAVID LOOMES, JASON MORIN FILIBERTO RUIZ AND BERNARD TERVER ALL WORK FOR HOLCIM (US) AND PAUL OSTRANDER WORKS FOR HOLCIM (CANADA) JAMES DERKATCH, KARI SARAGUSA AND DANIEL M HARRINGTON WORK FOR LEHIGH HANSON AND ROBERT KIDNEW WORKS FOR TEXAS-LEHIGH GARY L EATHORNE, ALLEN HAMBLEN AND THOMAS EDWARDS ALL WORK FOR CALPORTLAND JAMES GATENS WORKS FOR ASH GROVE TEXAS AND CHARLES T SUNDERLAND, GEORGE M WELLS WORK AT ASH GROVE GEORGE GREGORY AND FRANCESCO CARANTANI WORK AT ESSROC DAVID A NEPERENY AND RAY MOND SEIPP WORK FOR BUZZI UNICEM USA R MICHAEL JOHNSON AND THOMAS BECK WORK FOR CONTINENTAL CEMENT COMPANY ROGER SMITH JR AND SCOTT PALMER WORK FOR SALT RIVER CEMENT COMPANY GUY SIDOS AND GILBERT NATTA WORK FOR NATIONAL CEMENT COMPANY HARDY JOHNSON, TIMOTHY KUEBLER AND ARIS J PAPADOPOULOS ALL WORK FOR TITAN AMERICA

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

Identifier	Return Reference	Explanation
	l ' '	ALTHOUGH EACH MEMBER ONLY HAS "ONE VOTE", THERE ARE VARIOUS PERSONNEL (CEO, COO, SUBSIDIARY, ETC) ELIGIBLE TO BE A BOARD MEMBER

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

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

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

lde	ntifier	Return Reference	Explanation
		VI, SECTION B, LINE	COMPENSATION OF THE CEO IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS COMPENSATION FOR ALL EMPLOYEES, INCLUDING THE CEO, WAS EVAULATED BY SERVICES PROVIDED BY PATHFINDER GROUP IN 2011 WHICH USED AN MARKET COMPRATIO STUDY TO EVALUATE SALARIES

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

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

ldentifier	Return Reference	Explanation					
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 22,405 PRIOR PERIOD ADJUSTMENTS 125,837 EQUITY IN EARNINGS OF SUBSIDIARY -1,478,748 PENSION RELATED CHANGES OTHER THAN NET PERIODIC PENSION COST -2,406,311 CUMULATIVE TRANSITION ADJUSTMENT -73,245 TOTAL TO FORM 990, PART XI, LINE 5 -3,810,062					

SCHEDULE R Related Ord

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.

2011

DLN: 93493320030682OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization						Employer i	dent	ification number		
PORTLAND CEMENT ASSOCIATION						36-16389				
Part I Identification of Disregarded Entities (Cor	nplete	ıf the organizatioi	n answered "Yes"	on Form 990, Pa	rt I\		10			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	ind-o	(e) of-year assets		(f) Direct controlling entity		
				+						
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	anizat ng the	i ons (Complete if tax year.)	the organization	answered "Yes" (on F	Form 990, F	Part	IV, line 34 because	e ıt had	one
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Pu (If	(e) blic charity status section 501(c)(3))		(f) Direct controlling entity	(g) Section 512(b)(controlled organization	
(1) PORTLAND CEMENT ASSOCIATION EDUCATION FOUNDATION 5420 OLD ORCHARD ROAD SKOKIE, IL 60077 36-4486749		THE EDUCATIONAL S OF THE CEMENT STRY	IL	501(C)3		509(A))(1)		Yes	No No
(2) PORTLAND CEMENT ASSOCIATION POLITICAL ACTION COMMITTEE 5420 OLD ORCHARD ROAD SKOKIE, IL 60077 36-1638940	POLIT	TCAL SUPPORT	IL	527						No
For Privacy Act and Paperwork Reduction Act Notice, see the Instru	ct ions 1	for Form 990.	Cat No 50	1.35Y				Schedule R (Fe	orm 990)	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Pai	rt IV, line 34
	because it had one or more related organizations treated as a partnership 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) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate) ral or iging ner?	(k) Percentage ownership
							Yes	No		Yes	No	<u> </u>
											i	
											i	
	·											-

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
(1) CONSTRUCTION TECHNOLOGY LABORATORIES INC 5420 OLD ORCHARD ROAD SKOKIE, IL 60077 36-3478051	PERFORM INVESTIGATION, ANALYSIS AND TESTING OF STRUCTURES AND MATERIALS	IL		С	-1,478,748		100 000 %

(6)

Pa	rt V	Transactions With Related Organizations (Complete if the organization answered "Yes	" on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)			
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV				Ye	es	No
1 D	uring th	e tax year, did the orgranization engage in any of the following transactions with one or more related organi	ızatıons lısted ın Parts	s II-IV?				
а	Recei	pt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1	a Ye	es	
b	Gıft, ç	rant, or capital contribution to related organization(s)			1	b Ye	es	
c	Gıft, g	rant, or capital contribution from related organization(s)			1	c Ye	es	
d	Loans	or loan guarantees to or for related organization(s)			1	d		No
e	Loans	or loan guarantees by related organization(s)			1	e		No
f	Sale	f assets to related organization(s)			1	f Ye	es	
g	Purch	ase of assets from related organization(s)			1	g		No
h	Excha	nge of assets with related organization(s)			1	h		No
i	Lease	of facilities, equipment, or other assets to related organization(s)			1	.i Y€	es	
j	Lease	of facilities, equipment, or other assets from related organization(s)			1			No
k	Perfo	mance of services or membership or fundraising solicitations for related organization(s)			1	k Ye	es	
I	Perfor	mance of services or membership or fundraising solicitations by related organization(s)			1	.l Y€	es	
m	Sharır	g of facilities, equipment, mailing lists, or other assets with related organization(s)			1	m Ye	es	
n	Sharıı	ng of paid employees with related organization(s)			1	n Ye	es	
0	Reiml	oursement paid to related organization(s) for expenses			1	o Ye	es	
р	Reiml	oursement paid by related organization(s) for expenses			1	p Ye	es	
q	O ther	transfer of cash or property to related organization(s)			1	q		No
r	O ther	transfer of cash or property from related organization(s)			1	r Ye	es	
2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must complete this line, inc	cluding covered relati	onships and transact	ion thresholds			
		(a)	(b) Transaction	(c)	(d) Method of detern	olbina :	amou.	nt
		Name of other organization	type(a-r)	Amount involved	involv		amou	.10
	ee Addıtı	onal Data Table						
(2)								
(3)								
(3)								
(4)								
` '								
(5)								

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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 36-1638940

Name: PORTLAND CEMENT ASSOCIATION

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1) FOUNE	PORTLAND CEMENT ASSOCIATION EDUCATION PATION	В	150,803	
(2) FOUND	PORTLAND CEMENT ASSOCIATION EDUCATION PATION	Р	20,000	
(3)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	R	200,000	
(4)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	А	-1,478,748	
(5)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	I	758,222	
(6)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	L	188,596	
(7)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	к	62,475	
(8)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	0	254,151	
(9)	CONSTRUCTION TECHNOLOGY LABORATORIES INC	Р	120,231	
(10) FOUND	PORTLAND CEMENT ASSOCIATION EDUCATION PATION	F	2,050	
(11) FOUNE	PORTLAND CEMENT ASSOCIATION EDUCATION PATION	0	180,652	