

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



DLN: 93493201005152

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

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

Fo	the 2	2011 calendar year, or tax year beginning 01-01-2011	and ending 12-31-201	1		
		C Name of organization	and chang 12 51 251		D Employer ide	ntification number
_	ress ch	ange			38-029649	
- Nan	ne char	Doing Business As nge			E Telephone nu	mber
– Initi	al retur	Number and street (or P O box if mail is not delivered	to street address) Room/si	ute	(248)848-3	3700
– Ten	mınated	38800 COUNTRY CLUB DRIVE	12 Street address/ Room/ st		G Gross receipts	\$ 13,833,347
- Ame	ended r	eturn City or town, state or country, and ZIP + 4				
_		FARMINGTON HILLS, MI 48333 pending				
, , , ,		F Name and address of principal officer		114-2	l .	
		RONALD BURG		H(a) Is the	s a group returr	rfor □ Yes ▼ No
		38800 COUNTRY CLUB DRIVE				
		FARMINGTON HILLS, MI 48333		1 ' '	l affiliates includ	·
Tax	-exem	pt status	947(a)(1) or		o," attach a list ip exemption nu	(see instructions)
\M/	abeita	:► WWW CONCRETE ORG] H(c) Glod	ip exemption nu	illber F
				<u> </u>		
		anization		L Year of fo	mation 1960 M	State of legal domicile MI
Pai	rt I	Summary				
		Briefly describe the organization's mission or most signif TO DEVELOP, SHARE, & DISSEMINATE THE KNOWLE		ILIZE CONCE	ETE TO ITS EII	LLEST DOTENTIAL
ao reminine		O DEVELOP, SHAKE, & DISSEMINATE THE KNOWLE	EDGE NEEDED TO OT.	ILIZE CONCR	ETE TO ITS FO	LLEST POTENTIAL
	_					
	2 (Check this box 🚩 if the organization discontinued its o	perations or disposed	of more than 2	5% of its net as	ssets
	3 1	Number of voting members of the governing body (Part V	/I, line 1a)	•	3	19
	4 N	Number of independent voting members of the governing	j body (Part VI, line 1b)	. 4	18
	5 T	otal number of individuals employed in calendar year 2	011 (Part V , line 2a)		5	118
	6 T	otal number of volunteers (estimate if necessary) .			6	4,10:
•	7 a ⊺	otal unrelated business revenue from Part VIII, columi	n (C), line 12		7a	440,068
	Ь١	Net unrelated business taxable income from Form 990-1	T, line 34		7b	-8,532
				Prio	r Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)			13,100	59,625
	9	Program service revenue (Part VIII, line 2g)			13,097,521	13,051,141
Havenue	10	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)		330,631	722,581
İ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	9c, 10c, and 11e)		0	0
	12	Total revenue—add lines 8 through 11 (must equal Pa		е	12441252	12022247
	40	12)			13,441,252	13,833,347
	13	Grants and similar amounts paid (Part IX, column (A),			3,000	1,520
	14	Benefits paid to or for members (Part IX, column (A), I			- 0	0
8	15	Salaries, other compensation, employee benefits (Part 5–10)	t 1x, column (A), lines		5,866,690	6,100,138
Expenses	16a	Professional fundraising fees (Part IX, column (A), line	e 11e)		0	0
Š	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,981				
_	17	Other expenses (Part IX, column (A), lines 11a-11d,	11f-24e)		6,445,776	6,501,524
	18	Total expenses Add lines 13-17 (must equal Part IX			12,315,466	12,603,182
	19	Revenue less expenses Subtract line 18 from line 12			1,125,786	1,230,165
s %				Beginning	of Current	End of Year
Fund Balances				Y	ear	
88	20	Total assets (Part X, line 16)			34,649,500	34,734,041
9	21	Total liabilities (Part X, line 26)			6,004,430	6,068,290
	22	Net assets or fund balances Subtract line 21 from line	e 20		28,645,070	28,665,751
	t II	Signature Block				
nowl		ties of perjury, I declare that I have examined this return, in and belief, it is true, correct, and complete. Declaration of pi				
• -		****** Signature of officer			012-07-18 ate	
ign				De		
lere	•	RONALD BURG EXECUTIVE VICE PRESIDENT Type or print name and title				
		<u> </u>			T	
		Piepalei S		Check if self-	Preparer's taxpa	yer identification number)
aid		signature JAMES R DEDYNE CPA		employed •	P00010219	•
_	rer's	Firm's name (or yours MANER COSTERISAN PC	I		EIN • 38-21576	42
se C	nly	If self-employed), address, and ZIP + 4 2425 E GRAND RIVER SUITE 1			LIN F 30-213/0	T4
		LANSING MI 489123291			Phone no 🕨 (5	17) 323-7500

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

Total program service expenses►\$

4e

Par	3111	Statement of Check if Schedule	_	-	lishments uestion in this Part III	ı	
1	Brief	ly describe the org	anızatıon's mıss	ion			
IDEA	SAND	NEWTECHNOLO	GY AFFECTIN	G THE CONCRET		IT AND PUBLISH THE BI-N	URAGE THE EXCHANGE OF MONTHLY JOURNALS AND
2		ne organization und rior Form 990 or 99	• -	• -		r which were not listed on	┌ Yes ┌ No
	If "Ye	s," describe these	new services or	n Schedule O			
3		ne organization cea ces?		_	nt changes in how it co	onducts, any program	┌ Yes ┌ No
	If "Ye	s," describe these	changes on Sch	iedule O			
4	exper	nses Section 501(c)(3) and 501(c	:)(4) organizations	s and section 4947(a)	nree largest program service)(1) trusts are required to re ch program service reported	eport the amount of
4a	(Cod	e) (Expenses \$	3,306,041	including grants of \$) (Revenue \$	4,145,808)
	PUBL	ICATIONS AND PERIOD:	ICALS DISSEMINAT	E TECHNICAL INFORM	MATION ON CONCRETE DES	SIGN AND CONSTRUCTION	,
	(Cod	e) (Expenses \$	2,267,006	ıncludıng grants of \$	1,520) (Revenue \$	3,303,721)
		BER SERVICES INCLUC DLARSHIPS AND GRANTS		AQUES, CERTIFICATE	S, PINS, DECALS, AND MAN	NUAL OF CONCRETE PRACTICE TO	MEMBERS, AND AWARDS
 4с	(Cod	e) (Expenses \$	1,392,859	ıncludıng grants of \$) (Revenue \$	3,210,228)
		IFICATION CERTIFICA IDUALS ARE GENERALL			ANS, & FINISHERS TO IMPE	ROVE THE QUALITY OF CONCRETE	CONSTRUCTION CERTIFIED
	(Cod	e) (Expenses \$	1,320,789	ıncludıng grants of \$) (Revenue \$	944,344)
	EDUC	CATIONAL SEMINARS T	ECHNICAL SEMINAF	RS PROVIDED TO THE	GENERAL PUBLIC REGARD	ING CONCRETE DESIGN AND TEC	HNOLOGY
	(Cod) (Expenses \$	922,609	ıncludıng grants of \$) (Revenue \$	1,005,167)
					INICAL PUBLICATIONS THR ETE DESIGN & TECHNOLOG	OUGH A CONCENSUS PROCESS T SY	THERE ARE OVER 30 SEMINARS,
	Othe	er program service:	s (Describe in S	Schedule O)			
		enses \$		including grants o	of \$) (Revenue \$	1,949,511)

9,209,304

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
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	
	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	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, 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? <i>If</i> "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		Νo
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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		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			
	<i>IV</i>	28a		No
	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		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "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	Yes	
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? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
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	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V	<u> </u>	• 1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 63			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
la	Did the organization have unrelated business gross income of \$1,000 or more during the	_		
h	year?	3a 3b	Yes Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	טכ	165	
•	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	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?	5c		
ia	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		No
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).	OD		
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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
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	_		
f	contract?	7e 7f		No No
	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	79 7h		
3	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 food and capital contributions included on Part 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			
_	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. 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		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

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			
14	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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		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			
Re	evenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	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	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," 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▶MI			

- 18 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 Check all that apply Own website Another's website Vpon request
- 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 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20

38800 COUNTRY CLUB DRIVE

RONALD BURG

FARMINGTON HILLS, MI 48333 (248)848-3778

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (describe hours	(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- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
(1) KHALED WALID AWAD DIRECTOR	1 00	х						0	0	0
(2) JAMES R HARRIS DIRECTOR	1 00	х						0	0	0
(3) DENNIS C AHAL DIRECTOR	1 00	х						0	0	0
(4) DAVID A LANGE DIRECTOR	1 00	х						0	0	0
(5) CECIL L JONES DIRECTOR	1 00	х						0	0	0
(6) JOSEPH C SANDERS DIRECTOR	1 00	х						0	0	0
(7) DENIS MITCHELL DIRECTOR	1 00	х						0	0	0
(8) NEAL S ANDERSON DIRECTOR	1 00	Х						0	0	0
(9) RONALD KLEMENCIC DIRECTOR	1 00	х						0	0	0
(10) JACK P MOEHLE DIRECTOR	1 00	Х						0	0	0
(11) EMMANUEL K ATTIOGBE DIRECTOR	1 00	х						0	0	0
(12) DAVID H SANDERS DIRECTOR	1 00	Х						0	0	0
(13) LUIS E GARCIA PAST PRESIDENT	1 00	х		Х				0	0	0
(14) KENNETH C HOVER PRESIDENT	1 00	х		Х				0	0	0
(15) DAVID DARWIN PAST PRESIDENT	1 00	х		Х				0	0	0
(16) JAMES K WIGHT VICE PRESIDENT	1 00	х		Х				0	0	0
(17) ANNE M ELLIS VICE PRESIDENT	1 00	Х		Х				0	0	0

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

	(A) Name and Title	(B) A verage hours per week (describe hours hours (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) hours							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	Esti amoun comp fro organiz	mated t of other ensation m the
		for related organizations in Schedule O)	Individual trustie or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former		MISC)		ated izations
	FLORIAN G BARTH DIATE PAST PRESIDENT	1 00	х		х				0	C		0
· /	RONALD G BURG JTIVE VICE PRESIDENT	40 00	х		х				263,068	C		36,591
(20) [CFO	DONNA HALSTEAD	40 00			Х				140,781	C		21,592
	OHN NEHASIL GING DIRECTOR OF CERTIFICATION	40 00					х		135,323	C		37,136
	DANIEL FALCONER GING DIRECTOR OF ENGINEERING	40 00					х		185,875	C		30,657
(23)	THEODORE NEFF JTIVE DIRECTOR OF PTI	40 00					х		152,328	C		26,146
(24) J	OHN GLUMB GING DIRECTOR OF OPERATIONS	40 00					х		164,639	C		33,669
(25) [DOUGLAS SORDYL GING DIRECTOR OF INDUSTRY	40 00					х		164,306	C	1	31,075
1b	Sub-Total							▶				
C	Total from continuation sheets t	o Part VII, Sect	ion A		<u> </u>	<u>.</u>		•				
d	Total (add lines 1b and 1c)							F	1,206,320	0		216,866
2	Total number of individuals (inclu \$100,000 of reportable compens					ed a	above)) who	received more tha	n		
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete School				e, ke	ey ei	mploy	ee, o	r highest compens		Ye:	No No
4	For any individual listed on line 1 organization and related organiza individual									ch	4 Yes	
5	Did any person listed on line 1a r services rendered to the organiza								-		5	No
Se	ction B. Independent Cont	ractors										
1	Complete this table for your five I \$100,000 of compensation from or within the organization's tax ye	highest compen the organizatior										
	Nam	(A) e and business add	ress						Descr	(B) option of services	Com	(C) pensation
2	Total number of independent contr	actors (includin	a but no	ot lim	nted	to t	hose I	ıste	d above) who receiv	ed more than		

\$100,000 of compensation from the organization $\blacktriangleright 0$

Form 99						Page 9
Part	/111 1	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts	1a	Federated campaigns 1a	_			
E E	b	Membership dues 1b	_			
£. ∰.	С	Fundraising events 1c	-			
<u>jā</u>	d	Related organizations 1d	-			
ar Sim	e	Government grants (contributions) 1e	<u>. </u>			
er E	f	All other contributions, gifts, grants, and similar amounts not included above 1f 59,625	-			
き	g	Noncash contributions included in				
Contributions, gifts, grants and other similar amounts	h	Innes 1a-1f \$ Total. Add lines 1a-1f	F 59,625			
		Business Code				
Program Serwce Revenue	2a	PUBLICATION SALES 51112	0 4,585,876	4,145,808	440,068	
eve Fe	ь	MEMBERSHIP DUES & ASSE 90009	+	3,303,721	,	
е П	c	CERTIFICATION INCOME 90009	9 3,210,228	3,210,228		
er E	d	CONVENTION INCOME 90009	9 1,005,167	1,005,167		
<u>ئ</u>	e	EDUCATIONAL SEMINARS 61171	0 944,344	944,344		
⊈rar	f	All other program service revenue	1,805			1,805
Š	g	Total. Add lines 2a-2f	13,051,141			
	3	Investment income (including dividends, interest	10,001,111			
		and other similar amounts)	722,516			722,516
	4	Income from investment of tax-exempt bond proceeds \cdot				
	5	Royalties				
	6a	(I) Real (II) Personal Gross rents	-			
	b	Less rental	-			
	c	expenses Rental income	-			
		or (loss) Net rental income or (loss)	-			
	d	(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory	5			
	b	Less cost or other basis and	1			
		sales expenses	<u> </u>			
	c d	Gain or (loss) 6 Net gain or (loss)	65			65
	8a	Gross income from fundraising				
Other Revenue		events (not including \$ of contributions reported on line 1c)				
ď		See Part IV, line 18				
Ā	ь	Less direct expenses b	1			
ŏ	С	Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses b	_			
	10a	Net income or (loss) from gaming activities				
		returns and allowances .				
	b c	Less cost of goods sold b Net income or (loss) from sales of inventory •	-			
	Ť	Miscellaneous Revenue Business Code	+			
	11a					
	b					
	С					
	d	All other revenue				
	е	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions		40.50		70,7-1
			13,833,347	12,609,268	440,068	724,386

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. 1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21 2 Grants and other assistance to individuals in the United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	sing
In the United States See Part IV, line 21 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	
United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United	
organizations, and individuals outside the United	
4 Benefits paid to or for members	
5 Compensation of current officers, directors, trustees, and 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)	
7 Other salaries and wages 4,006,835 2,444,169 1,562,666	
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	
9 Other employee benefits	
10 Payroll taxes	
11 Fees for services (non-employees)	
a Management	2,981
b Legal	
c Accounting	
d Lobbying	
e Professional fundraising See Part IV, line 17	
f Investment management fees	
g Other	
14 Information technology	
15 Royalties	
16 Occupancy	
17 Travel	
Payments of travel or entertainment expenses for any federal, state, or local public officials	
19 Conferences, conventions, and meetings 1,274,790 1,274,790	
20 Interest	
21 Payments to affiliates	
22 Depreciation, depletion, and amortization	
23 Insurance	
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	
a CONTRIBUTIONS & DUES 103,570 103,570	
MISCELLANEOUS EXPENSES 90,638 90,638	
c AWARDS & CERTIFICATES 36,052 36,052	
d CHAPTERS 18,351 18,351	
e e	
f All other expenses	
25 Total functional expenses. Add lines 1 through 24f 12,603,182 9,209,304 3,390,897	2,981
26 Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	
combined educational campaign and fundraising solicitation Form 990	2011

Part X **Balance Sheet** (A) (B) Beginning of year End of year 783,101 1,179,562 1 1 1,229,339 1.381.212 2 2 Savings and temporary cash investments 3 1.223.911 4 914.806 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 7 561.656 8 671.065 9 286, 197 9 297.286 Prepaid expenses and deferred charges 8,998,818 10a Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 4,743,786 b Less accumulated depreciation 4,191,555 **10c** 4,255,032 12,143,382 11 15,418,775 11 10,834,265 7,217,518 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 3,396,094 **15** 15 3,398,785 34,649,500 34,734,041 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,339,715 17 1,542,668 17 Accounts payable and accrued expenses . 18 18 19 2,245,498 19 2,177,551 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 24 Unsecured notes and loans payable to unrelated third parties 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 2,419,217 25 2,348,071 D 26 26 6,004,430 6,068,290 **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 28,466,487 27 28,470,617 Unrestricted net assets 178.583 28 195,134 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 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 28.645.070 33 28.665.751 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 34.649.500 34,734,041

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13,8	333,34
2	Total expenses (must equal Part IX, column (A), line 25)	2			503,18
3	Revenue less expenses Subtract line 2 from line 1	3		1,2	230,16
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		28,6	545,07
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-1,2	209,48
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		28,6	565,75
Par	The contains and Reporting Check if Schedule O contains a response to any question in this Part XII			・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	No
1	Accounting method used to prepare the Form 990			res	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		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 t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in 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?	9	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		

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Name of the organization AMERICAN CONCRETE INSTITUTE 38-0296490

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must com	plete this p	art.) See ıı	nstructions	
The c	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	ınes 1 throu	ıgh 11, check	only one bo	x)		
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation of	fchurches s	section 170(b)(1)(A)(i).			
2	Γ	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)				
3	\sqcap	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).		
4	Γ			h organızatıon opera ıty, and state	ted in conjun	ction with a	hospital des	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the
_	_										 .
5	ı	_	•	erated for the benefice (A)(iv). (Complete P	=	e or universi	ty owned or o	perated by a	governmen	tai unit desci	ribed in
6	Г			local government o	•	tal unit desc	rıbed ın sect i	ion 170(b)(1)(A)(v).		
7	Γ	describ	ed in	at normally receives		al part of its	support from	a governme	ntal unit or f	rom the gene	ral public
•	_			(A)(vi) (Complete P		•) (c					
8	_			described in sectio i							
9	굣	_		at normally receives					•	•	-
				rities related to its e							
		-	_	oss investment inco				-		tax) from bu	sinesses
	_			ganızatıon after June	•			•	•		
10	<u> </u>			ganızed and operate							
11	ı	one or the box	more public	ganized and operated ly supported organiz ibes the type of supp b Type I	ations descr porting organ	ibed in sect ization and (ion 509(a)(1) or section ! s 11e throug	509(a)(2) S gh 11h	ee section 5 0	
е	Γ	other tl		ox, I certify that the ion managers and ot							
f		If the o		received a written d	etermination	from the IR	S that it is a	Type I, Type	II or Type	III supportın	g organization,
g		Since A	ugust 17,	2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the		'
			ng persons? erson who di	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	crıbed ın (ıı)		Yes No
		and (111) below, the	governing body of th	ne the suppor	rted organiza	ation?			11g((i)
		(ii) a fa	mily memb	er of a person descri	bed in (i) abo	ove?				11g(ii)
		(iii) a 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	ibove?			11g(iii)
h 		Provide	the follow	ng information about	the supporte	ed organızat	ıon(s)				
9	(i) Name suppo ganız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizat col (i) of suppor	ion in 'your	(vi) Is th organizat col (i) org in the U	e ion in anized	(vii) A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	
							1				
						1					
							1				
Total			l	I	I	1	1	1	I	1	I

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test-					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

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

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

Se	ction A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	3,525,555	3,819,409	3,717,907	3,455,142	3,363,346	17,881,359
2	grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	10,504,599	11,149,243	10,032,916	9,192,588	9,307,652	50,186,998
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	14,030,154	14,968,652	13,750,823	12,647,730	12,670,998	68,068,357
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
Ь	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of						0
_	the amount on line 13 for the year Add lines 7a and 7b						0
8 8	Public Support (Subtract line 7c from line 6)						68,068,357
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	A mounts from line 6	14,030,154	14,968,652	13,750,823	12,647,730	12,670,998	68,068,357
9 10a		14,030,154	14,968,652 860,561	13,750,823 397,008	12,647,730 328,746	12,670,998 722,516	
	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses		, ,				
10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511		, ,				68,068,357 3,896,111 3,896,111
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,587,280	860,561	397,008	328,746	722,516	3,896,111 3,896,111
10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part	1,587,280	860,561 860,561	397,008 397,008	328,746 328,746	722,516	3,896,111 3,896,111 213,012
b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c,	1,587,280 1,587,280 88,180	860,561 860,561 86,201	397,008 397,008 15,031	328,746 328,746 23,600	722,516 722,516	3,896,111 3,896,111 213,012
b c 111	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is	1,587,280 1,587,280 88,180 336 15,705,950	860,561 860,561 86,201	397,008 397,008 15,031	328,746 328,746 23,600 13,000,076	722,516 722,516 13,393,514	3,896,111 3,896,111 213,012 336 72,177,816 zation,
toa b c 111 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	1,587,280 1,587,280 88,180 336 15,705,950 for the organization	860,561 860,561 86,201 15,915,414 on's first, second,	397,008 397,008 15,031	328,746 328,746 23,600 13,000,076	722,516 722,516 13,393,514	3,896,111 3,896,111 213,012 336 72,177,816
toa b c c 111 12 13 14 See	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	1,587,280 1,587,280 88,180 336 15,705,950 for the organization	860,561 860,561 86,201 15,915,414 on's first, second,	397,008 397,008 15,031 14,162,862 , third, fourth, or f	328,746 328,746 23,600 13,000,076	722,516 722,516 13,393,514 501(c)(3) organi	3,896,111 3,896,111 213,012 336 72,177,816 zation,
toa b c c 111 12 13 14 See 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ction C. Computation of Pub Public Support Percentage for 2011	1,587,280 1,587,280 88,180 336 15,705,950 for the organization lic Support Pe	860,561 860,561 86,201 15,915,414 on's first, second,	397,008 397,008 15,031 14,162,862 , third, fourth, or f	328,746 328,746 23,600 13,000,076	722,516 722,516 13,393,514 501(c)(3) organi	3,896,111 3,896,111 213,012 336 72,177,816 zation,
toa b c c 111 12 13 14 See 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here	1,587,280 1,587,280 88,180 336 15,705,950 for the organization lic Support Pe	860,561 860,561 86,201 15,915,414 on's first, second,	397,008 397,008 15,031 14,162,862 , third, fourth, or f	328,746 328,746 23,600 13,000,076	722,516 722,516 13,393,514 501(c)(3) organi	3,896,111 3,896,111 213,012 336 72,177,816 zation,
toa b c c 111 12 13 14 See 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ction C. Computation of Pub Public Support Percentage for 201: Public support percentage from 20:	1,587,280 1,587,280 88,180 336 15,705,950 for the organization [ic Support Petal (line 8 column (line 8 c	860,561 860,561 86,201 15,915,414 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	397,008 397,008 15,031 14,162,862 , third, fourth, or f	328,746 328,746 23,600 13,000,076 ifth tax year as a	722,516 722,516 13,393,514 501(c)(3) organi	3,896,111 3,896,111 213,012 336 72,177,816 zation,
b c 111 12 13 14 See 15 16 See See	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ction C. Computation of Pub Public Support Percentage from 201	1,587,280 1,587,280 88,180 336 15,705,950 for the organization [ic Support Petal (line 8 column (line 8 c	860,561 860,561 86,201 15,915,414 on's first, second, ercentage f) divided by line art III, line 15 me Percentage	397,008 397,008 15,031 14,162,862 , third, fourth, or f	328,746 328,746 23,600 13,000,076 ifth tax year as a	722,516 722,516 13,393,514 501(c)(3) organi	3,896,111 3,896,111 213,012 336 72,177,816 zation,
10a b c 111 12 13 14 See 15 16 See 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ction C. Computation of Pub Public Support Percentage for 201: Public support percentage from 20:	1,587,280 1,587,280 88,180 336 15,705,950 for the organization (Ic Support Pell (line 8 column (line 8 column (line 10 column 10 c	860,561 860,561 860,561 86,201 15,915,414 on's first, second, ercentage f) divided by line art III, line 15 me Percentage lumn (f) divided b	397,008 397,008 15,031 14,162,862 third, fourth, or f 13 column (f))	328,746 328,746 23,600 13,000,076 Ifth tax year as a	722,516 722,516 13,393,514 501(c)(3) organi 15 16 17 18	3,896,111 3,896,111 213,012 336 72,177,816 2ation, 94 310 % 93 800 % 5 400 % 5 910 %

33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

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

DLN: 93493201005152

OMB No 1545-0047

SCHEDULE D

(Form 990)

Supplemental Financial Statements

Inspection

Department of the Treasury Internal Revenue Service

► 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 ► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number AMERICAN CONCRETE INSTITUTE 38-0296490 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	Organizations Maintaining Collections of	of Art, His	tor	<u>cai ire</u>	easu	res, or Otne	<u>r Similar Ass</u>	ets (co	<u>ntinued)</u>
3	Using the organization's accession and other records, chentems (check all that apply)	eck any of tl	ne fo	lowing th	nat ar	e a significant u	se of its collection	n	
а	Public exhibition	d	Γ	Loan o	rexc	hange programs			
b	Scholarly research	e	Γ	Other					
c	Preservation for future generations								
4	Provide a description of the organization's collections and Part XIV	d explain ho	w the	y further	the c	organization's ex	kempt purpose in		
5	During the year, did the organization solicit or receive doi assets to be sold to raise funds rather than to be maintain							Yes	┌ No
Par	TEXT Escrow and Custodial Arrangements. C Part IV, line 9, or reported an amount on Fo					n answered "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custodian or other included on Form 990, Part X^{2}	ntermediary	for	ontributi	ions	or other assets		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV and comple	te the follow	ving t	able			_		
_							Amo	unt	
C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
Т	Ending balance					1f	<u> </u>	•	
2a	Did the organization include an amount on Form 990, Par	t X, line 21?	•				ı	Yes	No
	If "Yes," explain the arrangement in Part XIV					F 000 D-	1.71/ 1 40		
Ра	rt V Endowment Funds. Complete if the organ (a)Current Y)Prior					e) Four Y	ears Back
1a	Beginning of year balance	(-	,		(-,		,		
ь	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 year end balance	e held as							
а	Board designated or quasi-endowment 🕨								
b	Permanent endowment 🕨								
c	Term endowment ▶								
3a	Are there endowment funds not in the possession of the o	rganızatıon	that	are held	and a	ıdmınıstered for	the		
	organization by						25(1)	Yes	No
	(i) unrelated organizations		•				3a(i)		
ь	(ii) related organizations							<u>' </u>	l
4	Describe in Part XIV the intended uses of the organizatio	•							<u> </u>
Par	t VI Land, Buildings, and Equipment. See Fo	rm 990, Pa	art X	, line 10).			_	
	Description of property) Cost or o		(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Bo	ok value
1a	Land					1,009,209			1,009,209
b	Buildings					4,613,302	1,816,487		2,796,815
С	Leasehold improvements					302,351	191,785		110,566
d	Equipment					707,975	528,764		179,211
e	Other	<u></u> .				2,365,981	2,206,750		159,231
Tota	I. Add lines 1a-1e (Column (d) should equal Form 990, Part	X, column (B), line	10(c).)					4,255,032

Part VII Investments—Other Securities. See F	Form 990, Part X, line 1.		
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)		Cost or end-o	f-year market value
(1) Financial derivatives			
(2)Closely-held equity interests (3)Other			_
(A) CERTIFICATES OF DEPOSIT	7,217,518		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	7,217,518		
Part VIII Investments—Program Related. See			
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
			,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, Im			(b) Book value
(a) Descrip	LIOII		
(1) INTEREST RECEIVABLE			3,651
(2) INVESTMENT IN CREATIVE ASSOCIATION MANAGE	EMENT		100,000
(3) INVESTMENT IN ACI FOUNDATION			3,100,000
(4) ASSETS LIMITED AS TO USE			195,134
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15	5.)		3,398,785
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
ACCUMULATED POSTRETIREMENT BENEFIT			
OBLIGATION	2,114,197		
RETENTION PENSION ACCRUAL	233,874		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	2,348,071		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	าts	
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	
	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
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) 2d		
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)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	leturn
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		
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
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) 4b	1	
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	
	t XIV Supplemental Information		
Com	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	art IV , lı	nes 1b and 2b,
	V line 4. Dort V. Dort VI. line 9. Dort VII. lines 2d and 4h. and Dort VIII. lines 2d and 4h. Also complete t	hia nart	

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		IN THE PREPARATION OF TAX RETURNS, TAX POSITIONS ARE TAKEN BASED ON INTERPRETATION OF FEDERAL, STATE AND LOCAL INCOME TAX LAWS MANAGEMENT PERIODICALLY REVIEWS AND EVALUATES THE STATUS OF UNCERTAIN TAX POSITIONS AND MAKES ESTIMATES OF AMOUNTS, INCLUDING INTEREST AND PENALTIES, ULTIMATELY DUE OR OWED NO AMOUNTS HAVE BEEN IDENTIFIED, OR RECORDED, AS UNCERTAIN TAX POSITIONS FEDERAL, STATE AND LOCAL TAX RETURNS GENERALLY REMAIN OPEN FOR EXAMINATION FOR THE VARIOUS TAXING AUTHORITIES FOR A PERIOD OF THREE TO FOUR YEARS

DLN: 93493201005152

OMB No 1545-0047

Compensation Information Schedule J (Form 990)

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 organ	nization
AMERICAN	CONCRETE	INSTITUTE

Department of the Treasury

Internal Revenue Service

Employer identification number

38-0296490

Pa	t I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to p					
	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 organize reimbursement orprovision of all the expenses described			1b	Yes	
2	Did the organization require substantiation prior to reimb officers, directors, trustees, and the CEO/Executive Dire			2	Yes	
3	Indicate which, if any, of the following the organization us organization's CEO/Executive Director Check all that a					
		▽	Written employment contract			
	·	<u>▼</u>	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 or a related organization	VII	, Section A , line $1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control paym	nen	t?	4a		No
b	Participate in, or receive payment from, a supplemental r	non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based	соі	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	e th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must co	omp	elete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of					
a	The organization?			5a		No
b	Any related organization?			5b		Νo
_	If "Yes," to line 5a or 5b, describe in Part III	4.	did blice commence to an incomme			
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.			7		No
8	Were any amounts reported in Form 990, Part VII, paid of subject to the initial contract exception described in Reg in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the reb section 53 $4958-6(c)$?	utta	able presumption procedure described in Regulations	9		

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	(A) Name		f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		compensation incentive		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) RONALD G BURG	(ı) (ıı)	242,868 0	20,200	0	20,801		299,659	
(2) DONNA HALSTEAD	(ı) (ıı)	134,841 0	5,940	, O	8,496 0	13,096 0	162,373 0 0	,
(3) JOHN NEHASIL	(ı) (ıı)	130,323	5,000 0		17,476 0	19,660 0	172,459	
(4) DANIEL FALCONER	(ı) (ıı)	173,642 0	12,233	0 0	17,470 0	1	7 216,532 0 0	
(5) THEODORE NEFF	(ı) (ıı)	152,328 0	0	0 C	13,038	13,108 0	178,474 0 0	
(6) JOHN GLUMB	(ı) (ıı)	158,139 0	6,500 0		13,952	19,717 0	7 198,308 0 0	1
(7) DOUGLAS SORDYL	(ı) (ıı)	148,800	15,506 0		15,373		195,381	1
	'		 				<u> </u>	
							!	
							-	
	'		 				<u> </u> '	1
		 	 '				 '	
		 	 '	 	-		<u> </u>	

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

Identifier	Return Reference	Explanation
	, , , , , , , , , , , , , , , , , , ,	TRAVEL FOR COMPANIONS REFERS TO THE TRAVEL OF SPOUSES AND IS INCLUDED IN THE W-2 OF THE INDIVIDUALS WHOSE SPOUSES HAVE ACCOMPANIED THEM ON BUSINESS TRAVEL

Schedule J (Form 990) 2011

OMB No 1545-0047

SCHEDULE 0 (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.

Open to Public Inspection

Name of the organization AMERICAN CONCRETE INSTITUTE **Employer identification number**

38-0296490

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE INSTITUTE SHALL CONSIST OF HONORARY MEMBERS, FELLOWS, SUSTAINING MEMBERS, ORGANIZATIONAL MEMBERS, MEMBERS, YOUNG PROFESSIONAL MEMBERS AND STUDENT MEMBERS
	FORM 990, PART VI, SECTION A, LINE 7A	ALL MEMBERS IN ANY CLASSIFICATION SHALL HAVE ALL RIGHTS AND PRIVILEGES OF MEMBERSHIP AS DETERMINED BY THE BOARD OF DIRECTORS AND AS PROVIDED BY THE BYLAWS, EXCEPT THAT A YOUNG PROFESSIONAL OR STUDENT MEMBER SHALL NEITHER VOTE NOR HOLD OFFICE. THE STATUS OF A STUDENT MEMBER SHALL CHANGE AUTOMATICALLY TO THAT OF YOUNG PROFESSIONAL MEMBER OR MEMBER, DEPENDING ON AGE, ON THE FIRST ANNIVERSARY OF MEMBERSHIP AFTER CEASING TO BE A REGISTERED STUDENT. THE STATUS OF A YOUNG PROFESSIONAL MEMBER SHALL BE CHANGED TO THAT OF MEMBER ON THE FIRST MEMBERSHIP ANNIVERSARY AFTER REACHING 28 YEARS OF AGE.
	FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS RECEIVED AND REVIEWED FOR ACCURACY BY THE EXECUTIVE COMMITTEE AT THE SUMMER EXECUTIVE COMMITTEE MEETING AFTER ANY CONCERNS PRESENTED BY THE EXECUTIVE COMMITTEE ARE ADDRESSED, THE EXECUTIVE VICE PRESIDENT SIGNS AND FILES THE RETURN
	FORM 990, PART VI, SECTION B, LINE 12C	BOARD MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY ALL DIRECTORS ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST AND TO NOTIFY THE BOARD OF ANY CONFLICTS THAT MAY ARISE THROUGHOUT THE YEAR
	FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE COMMITTEE, COMPRISED OF INDEPENDENT PERSONS, MEETS TO REVIEW THE PERFORMANCE OF TOP MANAGEMENT ANNUALLY THE EXECUTIVE COMMITTEE REVIEWS COMPARISON DATA FROM SIMILAR ORGANIZATIONS AS REPORTED BY AVAILABLE PUBLIC DOCUMENTS A RECORD OF THE MEETING AND DECISION BY THE EXECUTIVE COMMITTEE IS RETAINED BY THE ORGANIZATION
	FORM 990, PART VI, SECTION C, LINE 19	ALL INFORMATION IS AVAILABLE UPON REQUEST FORM 990 IS ALSO POSTED ANNUALLY ON GUIDESTAR'S WEBSITE THE 990 WITH AUDITED FINANCIAL STATEMENTS IS PUBLIC INFORMATION THROUGH THE MICHIGAN ATTORNEY GENERAL'S OFFICE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,209,484
AUDITED FINANCIAL STATEMENTS	FORM 990, PART XII, LINE 2C	THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE THAT ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT FOR THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
ELECTION OUT OF BONUS DEPRECIATION	FORM 4562	EMPLOYER IDENTIFICATION NUMBER 38-0296490 FOR THE YEAR ENDING DECEMBER 31, 2011 AMERICAN CONCRETE INSTITUTE, HEREBY ELECTS, PURSUANT TO IRC SEC 168(K)(2)(D)(III), NOT TO CLAIM THE ADDITIONAL 50% DEPRECIATION ALLOWABLE UNDER IRC SEC 168(K) FOR THE FOLLOWING QUALIFYING PROPERTY PLACED IN SERVICE DURING THE TAX YEAR ENDING DECEMBER 31, 2011 ALL PROPERTY IN THE 3, 5 & 10 YEAR CLASS SEE ATTACHED FORM 4562

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

DLN: 93493201005152

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Attach to Form 990. See separate i

Name of the organization AMERICAN CONCRETE INSTITUTE				Employer i 38-02964	dentification number		
Part I Identification of Disregarded Entities (Com	plete if the organization	n answered "Yes"	on Form 990, Par				
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) nd-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations (Complete in the tax year.)	the organization	answered "Yes" o	on Form 990, F	Part IV, line 34 becaus	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	(e) Public charity stat (if section 501(c)(Section 5 cont	(g) 512(b)(13 trolled nization
(1) ACI FOUNDATION						Yes	No
38800 COUNTRY CLUB DRIVE FARMINGTON HILLS, MI 48333 38-2986800	TO SUPPORT EDUCATIONAL, SCIENTIFIC RESEARCH	MI	501(C)(3)	LINE 11C, II	II-FI N/A		No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruct	ions for Form 990.	Cat No 50	135Y		Schedule R (F	orm 990)	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part 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) Disproprtionate allocations?		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	al or ging	(k) Percentage ownership
							Yes	No		Yes	No	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)	(C corp, S corp,		(h) Percentage ownership
(1) CREATIVE ASSOCIATION MANAGEMENT 38800 COUNTRY CLUB DRIVE FARMINGTON HILLS, MI 48326 38-2981556	CONSULTING SERVICES	MI	N/A	С	1,669,496	563,683	100 000 %

Part V	Transactions With Related Organizations (Complete if the organization answer	red "Yes" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)				
Note.	Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No	
1 During t	he tax year, did the orgranization engage in any of the following transactions with one or more relat	ed organizations listed in Par	ts II-IV?					
a Rece	ipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a		No	
b Gift, 9	grant, or capital contribution to related organization(s)				1b	Yes		
c Gıft, g	grant, or capital contribution from related organization(s)				1c		No	
d Loans	s or loan guarantees to or for related organization(s)				1d	Yes		
e Loans	s or loan guarantees by related organization(s)				1e		No	
f Sale	of assets to related organization(s)				1f		No	
g Purch	hase of assets from related organization(s)				1g		No	
h Exch	ange of assets with related organization(s)				1h		No	
i Lease	e of facilities, equipment, or other assets to related organization(s)				1i		No	
j Lease	e of facilities, equipment, or other assets from related organization(s)				1j		No	
k Perfo								
I Perfor	I Performance of services or membership or fundraising solicitations by related organization(s)							
m Sharı								
n Sharı	ng of paid employees with related organization(s)				1n	Yes		
o Reim	bursement paid to related organization(s) for expenses				10	Yes		
p Reim	bursement paid by related organization(s) for expenses				1 p		No	
q Othe	r transfer of cash or property to related organization(s)				1q	Yes		
r Other	r transfer of cash or property from related organization(s)				1r		No	
	answer to any of the above is "Yes," see the instructions for information on who must complete thi	is line, including covered relat	cionships and transact	ion thresholds				
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	Method of dete	d) mini olved	ing amo	ount	
(1) CREATIVE	EASSOCIATION MANAGEMENT	В	100,000	ACTUAL				
(2) CREATIVE	EASSOCIATION MANAGEMENT	D	129,190	ACTUAL				
(3) ACI FOUN	IDATION	D	14,188	ACTUAL				
(4) ACI FOUN	DATION	0	53,407	ACTUAL				
(5)								
(6)								

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	501(c)(3) organizations?		partners section to 501(c)(3) organizations?		(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

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

DLN: 93493201005152

OMB No 1545-0172

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury See separate instructions. Attach to your tax return. Sequence No 179 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** AMERICAN CONCRETE INSTITUTE 38-0296490 FORM 990 PAGE 10 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500.000 1 Maximum amount (see instructions) 1 2 2 Total cost of section 179 property placed in service (see instructions) . . . **3** Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) **7** Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 **9** Tentative deduction Enter the **smaller** of line 5 or line 8 **10** Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 **15 16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2011 185.190 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (g)Depreciation (d) Recovery year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property 170,356 3 0 ММ S/L 32,583 5 0 MM**b** 5-year property 24,626 S/L 3,981 c 7-year property 24,219 100 ΜМ S/L 636 d 10-year property **e** 15-year property **f** 20-year property 25 yrs S/L g 25-year property h Residential rental 27 5 yrs ММ S/L property 27 5 yrs MMS/L 39 yrs MM i Nonresidential real property ММ Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System **20a** Class life S/L **b** 12-year 12 yrs S/L **c** 40-year 40 yrs MMS/L Part IV **Summary** (see instructions) 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 222,390 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Form 4562 (2011) Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? (c) (e) (i) (b) Business/ (d) (f) (g) (h) Basis for depreciation Elected Type of property (list Date placed in investment Cost or other Recover Method/ Depreciation/ (business/investment section 179 vehicles first) deduction service basis period Convention use use only) cost percentage 25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -S/L -S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (b) (c) (f) (a) (d) (e) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 4 Vehicle 1 Vehicle 3 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? . . 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Ouestions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your

5% owners or related persons (see instructions)

57 Do you maintain a written po	•	·	•	_		Yes	NO
employees?							
38 Do you maintain a written po employees? See the instruct	,	•	• •	5, ,	,		
39 Do you treat all use of vehicl	es by employees a	s personal use?					
40 Do you provide more than fiv vehicles, and retain the infor	•		·	•			
41 Do you meet the requiremen	ts concerning qual	ıfıed automobile demonstra	tion use? (See ins	tructions)			
Note: If your answer to 37, 3	88, 39, 40, or 41 is	s "Yes," do not complete Se	ection B for the co	vered vehicle	s		
Part VI Amortization	1						
·	(b)			(e)		•	

Allioi dzadol						
(a) Description of costs	(b) Date amortization begins	(c) A mortizable amount	(d) Code section	(e) A mortization period or percentage		(f) Amortization for this year
42 A mortization of costs that be	egins during your 2	2011 tax year (see ınstruct	ions)			
43 A mortization of costs that be	egan before your 2	011 tax year			43	
44 Total. Add amounts in colum	ın (f) See the ınstr	ructions for where to report		I	44	

Additional Data

Software ID: Software Version:

EIN: 38-0296490

Name: AMERICAN CONCRETE INSTITUTE

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services (Code) (Expenses \$ 1,320,789 including grants of \$) (Revenue \$ 944,344) EDUCATIONAL SEMINARS TECHNICAL SEMINARS PROVIDED TO THE GENERAL PUBLIC REGARDING CONCRETE DESIGN AND TECHNOLOGY (Code) (Expenses \$ 922,609 including grants of \$) (Revenue \$ 1,005,167) CONVENTIONS COMMITTEE MEETINGS ARE HELD TO DEVELOP TECHNICAL PUBLICATIONS THROUGH A CONCENSUS

CONVENTIONS COMMITTEE MEETINGS ARE HELD TO DEVELOP TECHNICAL PUBLICATIONS THROUGH A CONCENSUS PROCESS THERE ARE OVER 30 SEMINARS, TECHNICAL SESSIONS & FORUMS RELATING TO THE LATEST CONCRETE DESIGN & TECHNOLOGY