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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 Open to Public Inspection

| A For | he 2011 calenda | ar year, or tax year begi | nning | | and | dending | | | |
|-----------------------------|--|---|----------------------------|---------------------------------------|-------------------------|---------------|---------------------------------------|---------------|----------------------------|
| B Chec | | organization | | A D C U T M P C II | nc | | D Employer | identifica | ation number |
| A | | ICAN INSTITU | TE OF | ARCHITECT | io, | | 1 | | |
| | | CHAPTER | 07.73 | | | _ | -{ | 42 00 | 20024 |
| c+ | inge Doing Bu | isiness As AIA I | | | | T | | | 20934 |
| re | ım Number | and street (or P.O. box if n | mail is not deli | vered to street add | ress) | Room/suite | E Telephone | | 044 5500 |
| Lat | | LOCUST ST | | | | 100 | | <u>(515)</u> | |
| re | | own, state or country, an | | | | | G Gross receipt | s \$ | 534,165 |
| tic | | | 50309 | | | | H(a) Is this a | group ret | |
| Þ | F Name ar | d address of principal of | fficer:TOD | D MOSS | | | for affilia | ites? | ☐ Yes 🗶 N |
| | SAME | AS C ABOVE | | | | | H(b) Are all aff | iliates inclu | ıded? 🔲 Yes 🔲 N |
| 1 Tax | exempt status: | 501(c)(3) X 501(c | c)(6) | ◀ (insert no.) | 4947(a)(1 |) or 527 | If "No," | attach a li | st (see instructions) |
| | site: ► AIAI | OWA.ORG | | | | | H(c) Group e | xemption | number > |
| | of organization: | | ust As | sociation C |)ther 🚩 | L Year | | | State of legal domicile: 1 |
| | I Summary | <u> </u> | | | | , = | | | |
| <u> </u> | | e the organization's miss | sion or most | significant activit | ties PROE | ESSION | IAL MEMB | ERSHI | P |
| ဦ | | TION FOR ARC | | | | | | | |
| Ē | ` | f the organiz | | | | | | | |
| over 3 | | ing members of the gove | | | | | | 3 | 1 |
| යි ි | | ependent voting membe | | | rt \/Lline 1h\ | | | 4 | 1 |
| eg 1 | | · · | - | | | | | 5 | - |
| Activities & Governance | | of individuals employed i of volunteers (estimate if | | ear Zuri (Fait V | , IIII o Za) | | | 6 | 11 |
| . [≩ | | | | /O\ | 1/2/2 | ٦ | | | 10,514 |
| \ \ \ \ | a Total unrelated | business revenue from | Part VIII; Co | UMBECER | /ED | } | | 7a | |
| | b Net unrelated | business taxable income | trom Form | 990-1; line 34 | | <u> </u> | | 7b | <1,71 |
| | _ | | (S | | 2042 | | Prior Year | | Current Year |
| ع و ع | | and grants (Part VIII, line | 17 | AUG 16 | 2012. | <u>ار</u> | | 0. | (|
| Revenue | Program service | ce revenue (Part VIII, line | 129) L 1 | <u> </u> | 9 | 표 | 475, | | 476,51 |
| 1 فِي | investment inc | ome (Part VIII, column (A | A), lines 3, 4 | and 701 | J UT | _ | | 804. | 73: |
| _"∣1 | Other revenue | (Part VIII, column (A), lin | ies 5, 6d, <mark>8c</mark> | .9c. 10c, and 11 | è) | ' | | 415. | 48,46 |
| 1 | ? Total revenue | add lines 8 through 11 | (must equal | Part VIII, column | (A), line 12) | | 526, | 618. | 525,70 |
| 1 | 3 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | | | | | | 0. | |
| 1 | Benefits paid t | o or for members (Part I | X, column (A | A), line 4) | | | | 0. | |
| <u>φ</u> 1 | Salaries, other | compensation, employe | ee benefits (l | Part IX, column (A | A), lines 5-10 |) [| 218, | 047. | 241,02 |
| နို့ ၂ | • | indraising fees (Part IX, o | | | | | | 0. | |
| Expenses | | ng expenses (Part IX, co | | | | 0. | | | · - |
| ŭ∣₄ | | es (Part IX, column (A), Irr | | | | | 300, | 279. | 289,34 |
| | • | s Add lines 13-17 (must | | • | o 25) | | 518, | | 530,37 |
| | | expenses. Subtract line | - | | - - / | | | 292. | <4,66 |
| <u> </u> | neveriue less | expenses. Subtract line | 10 HOITI BILO | 12 | | | | | |
| anci | Total access (F | art V line 16\ | | | | | eginning of Curro , 225 | | End of Year 212,53 |
| Baga | • | • | | ÷ | | | | 773. | 79,08 |
| Net Assets or Fund Balances | | (Part X, line 26) | | h 00 | | | | | |
| | 1 | fund balances. Subtract | line 21 from | iine 20 | | | 136, | 058. | 133,45 |
| Part | | | | | anuna sahadii | loo and state | naata and to th- | haat of mi | Ironuladae and halist it |
| - | | declare that I have examine | | | | | | | Anowicuye and bellet, II |
| true, co | rect, and complete. | Declaration of preparer total | Her than office | er) is dased on all if | normation of | wnich prepare | i nas any knowle | uge. | 12/17 |
| | Cignatia | COLOTTON AN ICL | men | · · · · · · · · · · · · · · · · · · · | | | ≫Date | <u>oj</u> | 10/15 |
| Sign | Signature | | | mr | DOE0~ | | - Date | - | • |
| Here | | ICA REINERT, | EXECU | TIVE DIR | ECTOR | | | | |
| | | rint name and title | | 1 | | | Data | Interior | DTIN |
| | Print/Type prep | | | Preparer's signati | | | Date | Check L | PTIN |
| Paid | | SCHMIDT, CP. | | JOHN A. | | | <u>08/02/12</u> | self-employer | |
| Prepar | r Firm's name | MCGOWEN, H | URST, | CLARK & | SMITH, | P.C. | Firm' | s EIN 🛌 | 42-1104473 |
| Use On | y Fırm's address | ▶ 1601 WEST | LAKES | PARKWAY, | SUITE | 300 | | - | |
| | | WEST DES M | | IA 5026 | | | Phon | ie no. (5 | 515) 288-32 |
| Mav th | e IRS discuss this | s return with the prepare | | | | | | | X Yes 🔲 ı |
| | | or Paperwork Reduction | | | | At | · · · · · · · · · · · · · · · · · · · | ••• | Form 990 (20 |

4d Other program services (Describe in Schedule O)) (Revenue \$

including grants of \$

132002 02-09-12

4e

Total program service expenses

Form 990 (2011) IOWA CHAPTER
Part IV Checklist of Required Schedules

| | | | Yes | No |
|----------|--|-------------|--|------------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | | <u>X</u> |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2_ | | X |
| 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 | | X |
| 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? If "Yes," complete Schedule C, Part II | 4 | _ | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | _ | ,, | |
| _ | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | X_ | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | _ | | v |
| _ | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | _6 | | <u> </u> |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | v |
| _ | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | - | <u> </u> |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | ٥ | | x |
| 9 | Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide | 8 | - | |
| 9 | credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | x |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | x |
| 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, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | | X |
| 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 | | _X |
| С | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | ļ | X |
| 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 | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | l | | ., |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 40- | | . |
| . | Schedule D, Parts XI, XII, and XIII Was the organization included in consolidated, independent audited financial statements for the tax year? | 12a | | <u> </u> |
| D | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | \mathbf{x}_{-} |
| 13 | | 13 | | X |
| . • | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| | 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, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization | | | |
| | or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | ļ | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals | | | |
| | located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | <u> </u> | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | <u></u> |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | - | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | ,, |
| 00 | complete Schedule G, Part III | 19 | | X |
| | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | <u> </u> |
| D | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b Form | 990 | (2011) |
| | | | | ااان |

Form 990 (2011) IOWA CHAPTER
Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-----|---|-------|----------|----------|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the | | | |
| | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | - | <u> </u> |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, | | | |
| | column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | | <u> </u> |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | 7.7 |
| | Schedule K. If "No", go to line 25 | 24a | | X |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b_ | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | ا ۔ ا | | |
| | any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | | |
| | disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | OFF | | |
| 06 | Schedule L, Part I | 25b | | |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified | 26 | | x |
| 07 | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | _20 | | |
| 27 | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | 21 | | |
| 20 | instructions for applicable filing thresholds, conditions, and exceptions). | | | |
| а | | 28a | | _x_ |
| | | 28b | | X |
| | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| • | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | _x_ |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | Х |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | X |
| 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 | | X |
| 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 | | X |
| 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 | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| 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 | | <u> </u> |
| 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 | <u> </u> | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | İ |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | ļ | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? | | | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 | X | <u> </u> |
| | | Form | 990 | (2011) |

Form 990 (2011) IOWA CHAPTER
Part V Statements Regarding Other IRS Filings and Tax Compliance

| <u> </u> | Check if Schedule O contains a response to any question in this Part V | | | \Box |
|----------|--|-------------|--------------|--------|
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | \Box | 162 | NO |
| h | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1 1 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| • | (gambling) winnings to prize winners? | 1c | x | |
| 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 return 2a 6 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | X | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Х | |
| | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | X | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country. | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | _7a_ | | |
| 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 | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7f 7g | | |
| g h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 79 7h | | - |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting | /** | | |
| • | organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter. | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 1 | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | 1 | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | ļ | | |
| | amounts due or received from them) | 1 | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 4 | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | - |
| 1- | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| D | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| _ | organization is licensed to issue qualified health plans Enter the amount of reserves on hand 136 | 1 | l | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14a | | |
| | | | 990 | (2011) |
| | | | | , / |

132005 01-23-12

AMERICAN INSTITUTE OF ARCHITECTS,

IOWA CHAPTER

42-0920934

Form 990 (2011) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

| | Check if Schedule O contains a response to any question in this Part VI | | | \mathbf{x} | | | | |
|-----------------|--|---|----------|--------------|--|--|--|--|
| Sec | tion A. Governing Body and Management | | | | | | | |
| | | | Yes | No | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 13 | | | | | | | |
| 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 | | X | | | | |
| 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 | | X | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | _ | X | | | | |
| 6 | Did the organization have members or stockholders? | 6 | <u>X</u> | | | | | |
| 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? | | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | | | | | |
| | persons other than the governing body? | | | | | | | |
| 8 | B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | |
| а | a The governing body? | | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | | | | | |
| 9 | | | | | | | | |
| _ | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | | | | | | |
| | | | Yes | No X | | | | |
| 10a | | | | | | | | |
| b | 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 | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | | X | | | | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | <u>X</u> | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | | | | | |
| | in Schedule O how this was done | 12c | <u>X</u> | | | | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | <u>X</u> | <u> </u> | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | <u> </u> | | | | |
| 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? | | | | | | | |
| | The organization's CEO, Executive Director, or top management official | 15a | <u> </u> | | | | | |
| Ь | Other officers or key employees of the organization | 15b | | X | | | | |
| 40 | 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 | | X | | | | |
| Ь | 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 | | | | | | | |
| 500 | exempt status with respect to such arrangements? tion C. Disclosure | 16b | | | | | | |
| | | | | | | | | |
| 17 | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) at for public inspection, indicate how you made those qualitate. Check all that early | avaliab | ie | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request | | | | | | | |
| 10 | | al 61 | امروا | | | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an | u finar | ciai | | | | | |
| 20 | statements available to the public during the tax year. | | | | | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization. JESSICA REINERT - 515-244-7502 | | | | | | | |
| | 400 LOCUST ST, STE 100, DES MOINES, IA 50309 | | | | | | | |
| 13200 01-23- | | Form | 990 | (2011) | | | | |
| v 2 | ·• | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | (-011) | | | | |

14240802 742280 01075.0

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

| (A) Name and Title | (B) Average | | not cl | | tion nore | than | | (D) Reportable | (E) Reportable | (F) Estimated | |
|------------------------------|---|--------------------------------|-----------------------|---------|--------------|------------------------------|--|--|----------------------------------|---|--|
| | hours per week | offic | | | | s boti r/trus | | compensation from | compensation from related | amount of other | |
| | (describe hours for related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organizations (W-2/1099-MISC) | from the organization and related organizations | |
| (1) ROB SMITH | | | | | | | | | | | |
| PAST PRESIDENT | 2.00 | Х | | X | | <u> </u> | | 0. | 0. | 0. | |
| (2) RICK SEELY | 4 00 | | | | | | | | | _ | |
| PRESIDENT | 4.00 | X | | X | | | | 0. | 0. | 0. | |
| (3) GARY BECHTEL | 0.00 | | | | | | | | _ | _ | |
| TREASURER | 2.00 | X | | X | | ├— | | 0. | 0. | 0. | |
| (4) TODD MOSS | 2 00 | ,, | | 77 | | | | | _ | | |
| PRESIDENT-ELECT | 2.00 | X | | X | | | | 0. | 0. | 0. | |
| (5) LINDA SCHEMMEL | 2 00 | v | | x | İ | | | 0. | o. | 0. | |
| 2ND VICE PRESIDENT | 2.00 | X | | ^ | | - | | <u> </u> | U • | · · | |
| (6) BILL ANDERSON | 1.00 | x | | | | | ļ | 0. | 0. | 0. | |
| DIRECTOR | 1.00 | Λ | | | | | | 0. | 0. | · · · | |
| (7) WILL DOWNING | 2.00 | x | | x | | | | 0. | 0. | 0. | |
| SECRETARY (8) NATHAN KALAHER | 2.00 | Λ | | Λ | | | | 0. | 0. | • | |
| DIRECTOR | 1.00 | x | | | | | | 0. | o. | 0. | |
| (9) JOE TURSI | 1.00 | | | | | | | 1 | <u> </u> | | |
| DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0. | |
| (10) PAM JOHNSON | | | | | | | | | | | |
| DIRECTOR | 1.00 | x | | | | | | 0. | 0. | 0. | |
| (11) JEFF ELLIS | | | | | | | | | | | |
| ALLIED DIRECTOR | 1.00 | X | | | | | | 0. | 0. | <u> </u> | |
| (12) BRIAN SCHWARTZ | | | | | | | | | | | |
| ASSOCIATE DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. | |
| (13) MATT OSTANIK | | | | | | | | | | | |
| DIRECTOR | 1.00 | X | | | | | | 0. | 0. | 0. | |
| (14) SUZANNE SCHWENGELS | | | 1 | | | | 1 | | | | |
| FORMER EXEC VICE PRESIDENT | 26.00 | ┖ | | X | | | <u> </u> | 34,731. | 0. | 4,584. | |
| (15) BEN HILDEBRANDT | | | | | | | | | ļ | | |
| EXECUTIVE DIRECTOR | 40.00 | | | X | | | | 54,937. | 0. | 3,043. | |
| | | | | | | | | | | | |
| 122007 01.22.12 | | L | | | | | | | | Form 990 (2011) | |

| | t VII Section A. Officers, Directors, Tru | | nnle |)Vee | 5 2 | nd l | liah | eet | Compensated Employ | | |)] 4 | | igo e |
|--|--|-----------------------|--|-----------------------|----------|--------------------|------------------------------|-----------------|---------------------------|---------------------|-------|------------------|---------------------|-------|
| | (A) | (B) | <u></u> | .yee | | <u>110 1</u> C) | ngil | .3 1 | (D) | (E) | | | (F) | |
| | Name and title | Average | | | Pos | ition | | | Reportable | Reportable | | Fs | timate | ed |
| | THE COLOR CHIC | hours per | | | | | than | | compensation | compensation | n | | nount | |
| | | week | offic | | | | or/trus | | from | from related | | | other | |
| | | (describe | ector | | | | | | the | organizations | | com | pensa | tion |
| | | hours for | Individual trustee or director | بو | | | ate | | organization | (W-2/1099-MIS | C) | | om the | |
| | | related organizations | ustee | Institutional trustee | | ىوا | Highest compensated employee | | (W-2/1099-MISC) | | | _ | anızatı | |
| | | in Schedule | ual fr | ional | | Key employee | ig a | _ | | | | | d relati anızatı | |
| | | 0) | pivibi | stitu | Officer | ey em | mplo | Former | | | | Uiga | a nzau | Ulia |
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| | | | | | | | | | | | | | | |
| | Out Askal | 1 | | <u> </u> | ! | Į | | L . | 89,668. | | 0. | | 7,6 | 27 |
| | Sub-total | II Caatian A | | | | | | | 0. | | 0. | | 7,0 | 0. |
| | Total from continuation sheets to Part V | II, Section A | | | | | | | 89,668. | <u> </u> | 0. | - | 7,6 | |
| | Total (add lines 1b and 1c) Total number of individuals (including but r | act limited to th | 2000 | liet | ad a | bov | ابداه | ho r | |) 000 of reportable | | <u> </u> | 7,0 | 4/ |
| 2 | compensation from the organization | iot iiiriitea to ti | 1056 | i iiSti | su a | DUV | e) w | 101 | eceived more than \$100 | 7,000 or reportable | 0 | | | (|
| | Compensation from the organization | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any former officer | director or tr | ueto | م لام | ov or | male | . | or | highest compensated a | mnlovee on | | | | |
| 3 | line 1a? If "Yes," complete Schedule J for s | | | 6, N | y ei | прк | уес | , 01 | mgnest compensated e | inployee on | | 3 | | Х |
| 4 | For any individual listed on line 1a, is the si | | | omn | ane | atioi | ກລກ | d ot | her compensation from | the organization | | | | |
| 4 | and related organizations greater than \$15 | = | | | | | | | | the organization | | 4 | | х |
| 5 | Did any person listed on line 1a receive or | | | | | | | | | idual for services | | | | -21 |
| 3 | rendered to the organization? If "Yes," con | • | | | | | • | Ciai | ted organization or indiv | Idual for Services | | 5 | | X |
| Sec | tion B. Independent Contractors | ipiete ochedal | - 0 1 | 013 | ucn | per | 3011 | | | | | | | |
| 1 | Complete this table for your five highest co | mnensated in | den | ande | ent c | ont | racto | ore i | that received more than | \$100,000 of com | nens | ation | from | |
| • | the organization Report compensation for | | | | | | | | | | ٠,٠٠٠ | | . + | |
| | (A) | | | | <u> </u> | | * | | (B) | | | 10 | C) | |
| Name and business address NONE Description of services | | | | | | | | | | C | Compe | | n | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | İ | | | | |
| | | | | | | | | | - | | | | | |
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| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | _ |
| | | | | | | | | | | | | | | |
| 2 | Total number of independent contractors (| including but r | not li | mite | d to | the | se li | sted | d above) who received r | nore than | | | | |
| _ | \$100,000 of compensation from the organ | | | | | | 0 | | , | | _ | | | _ |
| | , | | | | | | _ | | | L | | Form | 990 (| 2011 |

| | - | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
|--|---------|---|-------------------|---------------|----------------------|--|---|---|
| ts ts | 1 a | Federated campaigns | 1a | | | | | |
| 듄 | b | | 1b | | | | | |
| Q E | c | F 1 | 1c | • | | | | |
| ii ii | d | | 1d | | | | | |
| S,E | - | Government grants (contributi | | | | | | |
| <u>Sig</u> | f | All other contributions, gifts, gran | · - | | | | | |
| bet 1 | - | similar amounts not included above | | | | | | |
| | g | | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | _ | Total. Add lines 1a-1f | | | | | _ | |
| | | | | Business Code | | | | |
| <u> </u> | 2 a | MEMBERSHIP DUES | <u> </u> | 541900 | 242,220. | 242,220. | | |
| اه ڲ | b | ANNUAL CONVENTI | ON | 541900 | 202,843. | | | 202,843. |
| Sel | С | EDUCATIONAL MEE | TINGS | 611600 | 25,743. | 25,743. | | _ <u>_</u> |
| e a | d | INDUSTRY PUBLIC | ATIONS | 541900 | 5,306. | 5,306. | | |
| Program Service Revenue | е | MEMBER ASSESS-N | IEW OFFI | 541900 | 400. | 400. | | |
| ₫ | f | All other program service reve | enue | | | | | |
| \rightarrow | g | Total. Add lines 2a-2f | | <u> </u> | 476,512. | | | |
| | 3 | Investment income (including | dıvıdends, ıntere | est, and | | | | = |
| | | other similar amounts) | | | 732. | | | 732. |
| | 4 | Income from investment of ta | x-exempt bond p | proceeds | 27 24 5 | | - | 25 016 |
| | 5 | Royalties | | | 35,916. | | _ | 35,916. |
| - 1 | | _ | (i) Real | (II) Personal | | | | |
| | 6 a | | | | | | | |
| | | Less rental expenses | - | | | | | |
| | | Rental income or (loss) | L | | - | | | |
| | | Net rental income or (loss) | [f2 | () () | | | - | |
| | 7 a | Gross amount from sales of | (i) Securities | (II) Other | { | | | |
| | | assets other than inventory | | | 1 | | | |
| | b | Less' cost or other basis | | | | | | |
| ŀ | _ | and sales expenses | | | | | | |
| | _ | Gain or (loss) | | • | - | | | |
| | d | Net gain or (loss) Gross income from fundraisin | a events (not | | | | | |
| Ę | 8 a | including \$ | of | | | | | |
| Other Revenu | | contributions reported on line | | 1 | | | | |
| æ | | Part IV, line 18 | a (10). 000 | | | | | |
| je l | h | Less direct expenses | b | | 1 | | | |
| ō | | Net income or (loss) from fund | | • | 1 | | | |
| | | Gross income from gaming ac | _ | | - | | | |
| | • | Part IV, line 19 | а | | | | | |
| | b | Less. direct expenses | b | 1 | | | | |
| | c | Net income or (loss) from gam | ning activities | • | | | | |
| | | Gross sales of inventory, less | - | | | | | |
| | | and allowances | а | 16,933. | | | | |
| | b | Less cost of goods sold | b | 8,459. | | | | |
| ļ | C | Net income or (loss) from sale | es of inventory | | 8,474. | | 8,474. | |
| [| | Miscellaneous Revenu | ie | Business Code | | | | |
| | | ADVERTISING | | 541800 | 2,040. | | 2,040. | |
| | b | MISCELLANEOUS | | 900099 | 2,032. | 2,032. | | |
| | c | | <u>.</u> | | | | | |
| | d | • | | <u></u> | | | , | |
| | | Total. Add lines 11a-11d | | • | 4,072. | 055 504 | 10 514 | 220 401 |
| 13200 | 12 9 | Total revenue. See instructions. | | | 525,706. | 275,701. | 10,514. | 239,491. Form 990 (2011) |
| 01-23 | -12 | | | | | | | FULIN 33U (2011) |

Form 990 (2011)

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 i | Check if Schedule O contains a responsion include amounts reported on lines 6b, | (A) | (B) Program service | (C) Management and | (D) Fundraising |
|----------|--|----------------|---------------------|--|--------------------|
| 7b, | 8b, 9b, and 10b of Part VIII. | Total expenses | expenses | general expenses | expenses |
| 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 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | 97,295. | | | |
| | trustees, and key employees Compensation not included above, to disqualified | 91,493. | | | |
| 6 | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 117,503. | | - | |
| , 3 | Pension plan accruals and contributions (include | 117,3036 | | | |
| • | section 401(k) and section 403(b) employer contributions | 3,059. | | | |
| 9 | Other employee benefits | 5,757. | | | |
|) | Payroll taxes | 17,409. | | | |
| , 1 | Fees for services (non-employees). | 21,2034 | | | |
| | Management | | | 1 | |
| b | Legal | | | | |
| c | Accounting | 4,400. | | | |
| d | Lobbying | 15,000. | | | |
| e | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 2 | Advertising and promotion | 15,000. | | | • |
| 3 | Office expenses | 20,172. | | | |
| 4 | Information technology | | | | |
| 5 | Royalties | | | | |
| 6 | Occupancy | 39,196. | | | |
| 7 | Travel | 23,090. | | | |
| 3 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | 120,641. | | | |
|) | Interest | | | | |
| 1 | Payments to affiliates | | | - | |
| 2 | Depreciation, depletion, and amortization | 2 22 - | | | |
| 3 | Insurance | 3,395. | | | |
| 1 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) | | | | |
| а | COMMITTEE EXPENSE | 28,733. | | | |
| b | POSTAGE AND SHIPPING | 13,133. | | | |
| С | TELEPHONE | 6,589. | | | |
| d | | _ | | | _ |
| е | All other expenses | | | | |
| <u> </u> | Total functional expenses. Add lines 1 through 24e | 530,372. | | | |
| 3 | Joint costs Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. | † | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | Form 990 (3 |

132010 01-23-12

Form 990 (2011)
Part X | Balance Sheet

| Par | tΧ | Balance Sheet | | | | |
|-----------------------------|-----|---|-----------------------------|--------------------------|----------|------------------------------------|
| | | | - | (A) Beginning of year | | (B) End of year |
| 1 | 1 | Cash - non-interest-bearing | | 37,815. | 1 | 24,237. |
| | 2 | Savings and temporary cash investments | • | 180,766. | 2 | 181,058. |
| | 3 | Pledges and grants receivable, net | | | 3 | |
| | 4 | Accounts receivable, net | • | | 4 | <u> </u> |
| | 5 | Receivables from current and former officers, dire | ctors. trustees. kev | | | |
| | • | employees, and highest compensated employees | | | i | |
| | | of Schedule L | | | 5 | |
| | 6 | Receivables from other disqualified persons (as d | efined under section | | 7 | |
| | • | 4958(f)(1)), persons described in section 4958(c)(3 | | | | |
| | | employers and sponsoring organizations of section | | | | |
| | | employees' beneficiary organizations (see instructions) | | | 6 | |
| इं | 7 | Notes and loans receivable, net | | | 7 | |
| Assets | 8 | Inventones for sale or use | | | 8 | <u> </u> |
| • | 9 | Prepaid expenses and deferred charges | | | 9 | 24. |
| | | Land, buildings, and equipment cost or other | | | | |
| | .04 | basis Complete Part VI of Schedule D | 10a | | | |
| | h | Less accumulated depreciation | 10b | 1 | 10c | |
| | 11 | Investments - publicly traded securities | | 7,250. | 11 | 7,214. |
| | 12 | Investments - other securities. See Part IV, line 11 | | | 12 | |
| | 13 | investments - program-related. See Part IV, line 1 | | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets See Part IV, line 11 | | 15 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal | l line 34) | 225,831. | 16 | 212,533. |
| | 17 | Accounts payable and accrued expenses | 389. | 17 | 345. | |
| | 18 | Grants payable | | 18 | | |
| | 19 | Deferred revenue | | 87,384. | 19 | 78,738. |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| တ္ | 21 | Escrow or custodial account liability. Complete Pa | art IV of Schedule D | | 21 | |
| Liabilities | 22 | Payables to current and former officers, directors | , trustees, key employees, | | | |
| abi | | highest compensated employees, and disqualifie | d persons. Complete Part II | | | |
| = | | of Schedule L | | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelat | ed third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pay | ables to related third | | | |
| | | parties, and other liabilities not included on lines | 17-24) Complete Part X of | | | |
| | | Schedule D | | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | | 87,773. | 26 | <u>79,083.</u> |
| | | Organizations that follow SFAS 117, check her | re and complete | | | |
| es | | lines 27 through 29, and lines 33 and 34. | | | | |
| Ĕ | 27 | Unrestricted net assets | | | 27 | |
| 3ala | 28 | Temporarily restricted net assets | | | 28 | |
| ğ | 29 | Permanently restricted net assets | | | 29 | |
| Ē | | Organizations that do not follow SFAS 117, ch | eck here 🕨 🐰 and | | | |
| ō | | complete lines 30 through 34. | | | 1 1 | _ |
| ets | 30 | Capital stock or trust principal, or current funds | | 0. | | 0. |
| Ass | 31 | Paid-in or capital surplus, or land, building, or equ | upment fund . | 0. | 31 | 0. |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated inc | come, or other funds | 138,058. | | 133,450. |
| Z | 33 | Total net assets or fund balances | 138,058. | | 133,450. | |
| | 34 | Total liabilities and net assets/fund balances | <u> </u> | 225,831. | 34 | 212,533. Form 990 (2011) |

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. See separate instructions.

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A

| AMERICAN INSTITUTE OF ARCHITECTS, Employer identification number 42-0920934 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 2 Enter the amount of any excise tax incurred managers under section 4955 4 If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization is funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization's funds. If none, enter 0-c in the properties of the properti | | Section 501(c)(4), (5), or (6) organiza | | | -, · · · · · · · · · · · · · · · · · · · | ., |
|--|----|---|--------------------------------------|---------------------------|--|-------------------------------|
| Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 | | | | RCHITECTS, | E | mployer identification number |
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| Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 | | <u> </u> | , | , | | |
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| Inne 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0-intributions received and promptly and directly delivered to a separate political organization | | exempt function activities | | · · | | ▶\$ |
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| made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization. | _ | • • | · · | N) of all section 527 po | olitical organizations to | |
| political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization | | | | • | • | * * |
| (a) Name (b) Address (c) EIN (d) Amount paid from filing organization's funds. If none, enter -0- delivered to a separate political organization | | contributions received that were pr | omptly and directly delivered to | a separate political orga | anization, such as a se | parate segregated fund or a |
| filing organization's funds. If none, enter -0- filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization | | political action committee (PAC) If | additional space is needed, prov | vide information in Part | IV | |
| filing organization's funds. If none, enter -0- filing organization's funds. If none, enter -0- promptly and directly delivered to a separate political organization | | (a) Name | (b) Address | (c) EIN | (d) Amount paid fro | om (e) Amount of political |
| delivered to a separate political organization | | (2) | (3,1.12.12.1 | (-, | 1 | 's contributions received and |
| political organization | | | | | funds. If none, enter | |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990 or 990-EZ) 2011

132041 01-27-12

AMERICAN INSTITUTE OF ARCHITECTS,

| Schedule C (Form 990 or 990 EZ) 2011 | IOWA CHAPTE | R | 504()(0) | 42-0 | 0920934 Page 2 |
|--|--|---|--|--|--------------------------------|
| Part II-A Complete if the org | | mpt under section | 1 501(c)(3) and file | ed Form 5/68 | |
| (election under sec | | <u>.</u> | | | |
| | | liated group (and list in | Part IV each affiliated | group member's nar | me, address, EIN, |
| . — ' | re of excess lobbying | • | | | |
| B Check 🕨 🔛 if the filing organiza | tion checked box A ai | nd "limited control" pro | visions apply | | |
| | ts on Lobbying Expe ditures" means amou | nditures unts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a Total lobbying expenditures to infli | ence public opinion (| grass roots (obbying) | | | |
| b Total lobbying expenditures to infli | | • | · | | |
| c Total lobbying expenditures (add i | | -, (g, | | | |
| d Other exempt purpose expenditure | | | | | |
| e Total exempt purpose expenditure | | d) | · | | |
| f Lobbying nontaxable amount Ente | | | n columns | | |
| If the amount on line 1e, column (a) of | | bying nontaxable am | | <u> </u> | |
| Not over \$500,000 | | the amount on line 1e. | | | |
| Over \$500,000 but not over \$1,00 | | 00 plus 15% of the exc | ess over \$500,000. | | |
| Over \$1,000,000 but not over \$1,5 | ess over \$1,000,000. | | | | |
| Over \$1,500,000 but not over \$17 | ss over \$1,500,000 | | | | |
| Over \$17,000,000 | \$1,000, | 000 | | | |
| | | | | | |
| g Grassroots nontaxable amount (er | nter 25% of line 1f) | | | | |
| h Subtract line 1g from line 1a If zer | o or less, enter -0- | | | | |
| i Subtract line 1f from line 1c If zero | o or less, enter -0- | | | | |
| j If there is an amount other than ze | ro on either line 1h or | line 1i, did the organiza | ation file Form 4720 | | |
| reporting section 4911 tax for this | year? | | | | Yes No |
| | cations that made a solumns below. See th | eraging Period Under section 501(h) election ne instructions for line | n do not have to comp s 2a through 2f on pa | | |
| | Lobbying Expe | nditures During 4-Yea | ar Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) 2008 | (ь) 2009 | (c) 2010 | (d) 2011 | (e) Total |
| 2a Lobbying nontaxable amount | | | | | |
| b Lobbying ceiling amount | | | | | |
| (150% of line 2a, column(e)) | | <u> </u> | | <u>-</u> | |
| c Total lobbying expenditures | | | | | - |
| | | | | | |
| d Grassroots nontaxable amount | | | - | | - |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| (130% Of lifte 2d, Coldiffit (e)) | | | | | |
| | | 1 | | 1 | i . |

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2011 IOWA CHAPTER 42-092093

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

| For e | ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description | (| a) | (b) | |
|--------|---|----------------|------------------|-------------|--|
| | lobbying activity | Yes | No | Amo | ount |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or | | | | |
| | local legislation, including any attempt to influence public opinion on a legislative matter | | | | |
| | or referendum, through the use of | |] | | |
| а | Volunteers? | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | | |
| C | Media advertisements? | | | | |
| d | Mailings to members, legislators, or the public? | | ļ ļ | | |
| е | Publications, or published or broadcast statements? | | <u> </u> | | |
| f | Grants to other organizations for lobbying purposes? | | <u> </u> | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | ļ | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | |
| i | Other activities? | | | | |
| j | Total. Add lines 1c through 1i | | | | |
| | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | ļ | | |
| - | If "Yes," enter the amount of any tax incurred under section 4912 | | | | |
| | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | - F04/s | \ <u>(</u> \(\) | -4! | |
| Par | t III-A Complete if the organization is exempt under section 501(c)(4), sect | on sur(c |)(၁), or se | Ction | |
| | 501(c)(6). | | - | | NI. |
| | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | 1 | - | X |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | 2 | 37 | X |
| 3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), sect | ion 501/o | 3 \(5) or co | X | |
| rai | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered | | | | e 3, is |
| | answered "Yes." | _ | | | <u>. </u> |
| 1 | Dues, assessments and similar amounts from members | | 1 | 242 | <u>2,220.</u> |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political | ical | | | |
| | expenses for which the section 527(f) tax was paid). | | | | |
| а | Current year | | 2a | | 5,000. |
| b | Carryover from last year | | 2b | | 1,321. |
| С | Total . | | 2c | | <u>5,321.</u> |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | 1. | <u>4,533.</u> |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex | | | | |
| | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and | political | | | |
| | expenditure next year? | | 4 | | 1,788. |
| 5 | Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | |
| | t IV Supplemental Information | | | | |
| Com | plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, f | Part II-A; and | d Part II-B, lir | ne 1. Also, | complete |
| this p | part for any additional information. | | | | |
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN INSTITUTE OF ARCHITECTS, IOWA CHAPTER

Employer identification number 42-0920934

| FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS SEVERAL |
|---|
| CATEGORIES OF MEMBERSHIP. REGULAR MEMBERS ARE LICENSED ARCHITECTS DOING |
| |
| BUSINESS IN IOWA. ASSOCIATE MEMBERS ARE THOSE WITHOUT AN ARCHITECTURAL |
| LICENSE BUT ARE ELIGIBLE BY EDUCATION OR WORK EXPERIENCE. STUDENT |
| AFFILIATE MEMBERS CONSIST OF THOSE WHO ARE IN EDUCATIONAL PROGRAMS WORKING |
| TOWARDS A DEGREE IN ARCHITECTURE. PROFESSIONAL AFFILIATE MEMBERS ARE |
| NON-ARCHITECTS WORKING IN COMPANION PROFESSIONS SUCH AS ENGINEERS, PLANNERS |
| AND ARTISTS. ALLIED MEMBERS ARE NON-ARCHITECTS WORKING IN THE CONSTRUCTION |
| INDUSTRY. |
| |
| FORM 990, PART VI, SECTION A, LINE 7A: NOMINATIONS TO THE BOARD OF |
| |

DIRECTORS TO FILL OPEN POSITIONS ARE MADE BY COMMITTEE. THE SLATE OF NOMINEES IS PRESENTED TO THE MEMBERSHIP AT THE ANNUAL MEETING. POSITIONS ON THE BOARD ARE FILLED BY THOSE NOMINEES RECEIVING A MAJORITY OF VOTES.

FORM 990, PART VI, SECTION A, LINE 7B: THE ANNUAL BUDGET FOR THE ORGANIZATION, INCLUDING THE DUES STRUCTURE, IS PREPARED BY THE GOVERNING BODY AND PRESENTED TO THE MEMBERSHIP FOR APPROVAL BY MAJORITY VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, SECTION B, LINE 11: THE RETURN PREPARER PROVIDES AN INITIAL DRAFT OF THE COMPLETED FORM 990 TO MANAGEMENT FOR REVIEW AND UPON COMPLETION OF MANAGEMENT'S REVIEW, A FINAL DRAFT OF FORM 990 EDITING. IS PROVIDED TO THE OFFICERS OF THE ORGANIZATION IN ELECTRONIC FORM. UPON RESOLUTION OF COMMENTS BY THE OFFICERS, IF ANY, THE FINAL FORM 990 IS Schedule O (Form 990 or 990-EZ) (2011) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 132211 01-23-12

Schedule O (form 990 or 990-EZ) (2011) Page 2 Name of the organization AMERICAN INSTITUTE OF ARCHITECTS. **Employer identification number** 42-0920934 IOWA CHAPTER SIGNED BY MANAGEMENT AND FILED WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: ALL AFFECTED INDIVIDUALS MUST REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY WITHIN 30 DAYS OF COMMENCING SERVICE WITH THE ORGANIZATION. THE AFFECTED INDIVIDUALS MUST UPDATE AND RESUBMIT A POLICY ACKNOWLEDGEMENT ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15A: THE PROCESS FOR SETTING COMPENSATION OF THE ORGANIZATION'S EXECUTIVE VICE PRESIDENT INCLUDES FORMAL REVIEW AND APPROVAL BY THE OFFICERS, USE OF COMPARABLE COMPENSATION DATA FROM SURVEYS OF SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS, AND CONTEMPORANEOUS DOCUMENTATION OF DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. ALL OTHER OFFICERS OF THE ORGANIZATION SERVE IN A VOLUNTEER CAPACITY WITHOUT COMPENSATION. THE ORGANIZATION HAS NO KEY EMPLOYEES AS DEFINED BY THE IRS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND ITS FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC. SUCH DOCUMENTS ARE, HOWEVER, MADE AVAILABLE FOR REVIEW AT THE ADMINISTRATIVE OFFICE OF THE ORGANIZATION TO MEMBERS IN GOOD STANDING WHO SO REQUEST. FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: CHANGE IN MARKET VALUE OF MUTUAL FUND INVESTMENTS 58. FORM 990, PART XI, LINE 1, ACCOUNTING METHOD: THE ORGANIZATION USES THE CASH METHOD OF ACCOUNTING, EXCEPT THAT IT IS MODIFIED TO RECOGNIZE DUES REVENUE IN THE YEAR TO WHICH IT RELATES.

Schedule O (Form 990 or 990-EZ) (2011)

| Schedule O (Fo | orm 990 or | 990-EZ) | (2011) | | | | | | | | | _ | | | | Page 2 |
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