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DLN: 93493318029822

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 Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 A For the 2011 D Employer identification number **B** Check if applicable AMERICAN CHEMISTRY COUNCIL 53-0104410 Address change E Telephone number Doing Business As Name change (202) 249-7000 ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite **G** Gross receipts \$ 234,245,667 Terminated City or town, state or country, and ZIP + 4 WASHINGTON, DC 20002 Amended return Application pending Name and address of principal officer Is this a group return for CALVIN M DOOLEY 700 2ND ST NE WASHINGTON, DC 20002 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) Group exemption number Website: ► WWW AMERICANCHEMISTRY COM L Year of formation 1950 M State of legal domicile NY Summary Part I Briefly describe the organization's mission or most significant activities TO DELIVER BUSINESS VALUE TO ITS MEMBERS THROUGH EXCEPTIONAL ADVOCACY Activities & Governance Check this box 🔰 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 52 Number of independent voting members of the governing body (Part VI, line 1b) . 52 4 5 250 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 0 Total number of volunteers (estimate if necessary) 6 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** O 0 8 Contributions and grants (Part VIII, line 1h) . 107,219,100 95,129,560 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,361,868 3,839,859 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,337,390 1,502,397 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 112,918,358 100,471,816 13 130,000 285,000 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 32,820,054 36,410,991 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 0 79,512,646 68,321,917 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 112,462,700 105,017,908 19 Revenue less expenses Subtract line 18 from line 12 . 455,658 -4,546,092 (Assets or delatables) **Beginning of Current End of Year** Year 114,632,540 112,825,016 20 Total assets (Part X, line 16) . . . Met./ 21 Total liabilities (Part X, line 26) 64,284,499 69,832,586 22 Net assets or fund balances Subtract line 21 from line 20 50,348,041 42,992,430 Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. ***** Signature of officer Sign Here RAYMOND J O'BRYAN CFO/CAC Type or print name and title Date Check if Preparer's taxpayer identification number Preparer's WILLIAM E TURCO CPA (see instructions) P00369217 Paid employed 🕨 🧧 Preparer's

Firm's name (or yours

if self-employed), address, and ZIP + 4

Use Only

MCGLADREY LLP

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

9737 WASHINGTONIAN BLVD 400

GAITHERSBURG, MD 208787340

EIN 42-0714325

Phone no (301) 296-3600

Par		nt of Program Service			r
		<u> </u>	e to any question in this Part I	11	!
1	•	ie organization's mission			
ENG	AGEMENT, COMMU		TIONAL ADVOCACY USING FIC RESEARCH WE ARE CO CONMENT AND SOCIETY		
2			rogram services during the ye		┌ Yes ┌ No
	If "Yes," describe t	these new services on Sched	ule O		
3	Did the organization services?	n cease conducting, or make	significant changes in how it o	conducts, any program	┌ Yes ┌ No
	If "Yes," describe t	these changes on Schedule O			
4	expenses Section	501(c)(3) and 501(c)(4) org	complishments for each of its anizations and section 4947(uses, and revenue, if any, for e	a)(1) trusts are required to re	port the amount of
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			REVERSE EPA'S RECONSIDERATION DS WOULD COST APPROXIMATELY \$		
4b	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
		ADEMY OF SCIENCES (NAS), ŠEEKII	S EPA TO ADOPT IRIS (INTEGRATED NG TO ENSURE THAT FUTURE CHEM)		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	TECHNICAL DATA PRO		HE BOILER MACT RULES A CONSTRU PROVIDED, AMONG OTHER THINGS, ES		
	Other program se	rvices (Describe in Schedul	e O)		
	(Expenses \$		g grants of \$) (Revenue \$)
4e	Total program sei	vice expenses►\$			

Part IV	Checklist	of Red	uired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1883	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? <i>If</i> "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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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 "Yes," complete Schedule G, Part I</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? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 283			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
_				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νo
b	·			
	If "Yes," enter the name of the foreign country ►			
	, , , <u> </u>			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	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
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
J.	organization solicit any contributions that were not tax deductible?			
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
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	7c		
4	file Form 8282?	70		
u	11 Tes, indicate the number of Forms 8282 med during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	, 9		
	Form 1098-C?	7h		
1	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.	_		
	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		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
2-		12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," optor the amount of tax, exempt interest received or asserted during the	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
C	Enter the aggregate amount of reserves on hand			
4 ~		140		NI o
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No_
D	THE SECOND DECLARATION AND TO THE PROPERTIES OF THE PROPERTY O	140		

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.

Se	ection A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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?	\vdash	Yes	
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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	evenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
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	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	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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 ▶ DC			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

- - 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 RAYMOND O'BRYAN 700 2ND ST NE

WASHINGTON, DC 20002 (202) 249-6160

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		11136)	related organizations
See Additional Data Table										
				\vdash			_			

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

(A) Name and Title	(B) Average hours per week (describe	director/trustee)							(D) portable pensation om the zation (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estimated amount of other compensation from the organization and related	
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	
See Additional Data Table											\dashv		
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1b Sub-Total				•	•		F	1		l			
d Total (add lines 1b and 1c) .					•		*		7,124,653		0		1,581,906
2 Total number of individuals (incl					ted	• above) who	o receiv		an	<u>"</u>		1,301,300
\$100,000 of reportable compen	sation from the	organız	atıonl	► 17									
3 Did the organization list any form on line 1a? If "Yes," complete Sch					ey e	mploy	ee, d	or highes	st compens	sated employee		Yes	No
4 For any individual listed on line in organization and related organization	1a, is the sum of	f report	able d	om							3		No_
individual5 Did any person listed on line 1a	receive or accri	e comi	• nensa	• tion	• fror	n anv	• unre	· ·	 nanization	or individual for	4	Yes	
services rendered to the organiz										•	5		No
Section B. Independent Con	tractors												
Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
	(A) ne and business add	dress							Desc	(B) cription of services		Comper	
OGILVY PUBLIC RELATIONS PO BOX 7247-7417 PHILADELPHIA, PA 19170									PUBLIC REL	ATIONS		3	,968,815
PURPLE STRATEGIES LLC 815 SLATERS LANE ALEXANDRIA, VA 22314									PUBLIC REL	ATIONS		3	,737,242
THE HAMNER INSTITUTES FOR HEALTH SCIENC SIX DAVIS DRIVE PO BOX 12137 RESEARCH TRIANGLE PARK, NC 27709	CE								RESEARCH			3	,409,644
TOXSTRATEGIES INC 25301 CINCO RANCH BLVD STE G265 KATY, TX 77494									RESEARCH			1	,852,498
APCO WORLDWIDE 700 12TH STREET NW SUITE 800 WASHINGTON, DC 20005									MEDIA MON	ITORING			903,841
2 Total number of independent cont				nto.c	1 +a	+	licto	d abovo) who rocal			I _	

Part V	4444	Statement o	r kevenue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
##	1a	Federated cam	paigns 1a					
医与	ь	Membership du	es 1b					
50€	l c	Fundraising eve	ents 1c					
چۇرى ±2.								
ಕ್ಷ≣	d		rations 1d					
<u>≅</u> يو	e	Government grants	s (contributions) 1e					
	f		ons, gifts, grants, and 1f		İ	į		
医黑		similar amounts no						
<u>च</u> ठ	g		butions included in					
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ _	s 1a-1f	▶-				
O u	Ĺ"	Total. Add lines	5 1d-11					
<u>a</u>				Business Code				
Ħ	2a	MEMBERSHIP DUES	S	900099	73,871,010	73,871,010		
ج وي	ь	CHEMTREC REG FI	EES	900099	11,762,109	11,762,109		
a a	l c	O/H REIMBURSEMI	ENT	900099	5,412,625	5,412,625		
Ş	l .	<u> </u>						
33	d	MEETINGS/SEMINA	_	900099	2,012,493	2,012,493		
E	e	SEPARATE PROGRA		900099	1,715,440	1,715,440		
Program Serwce Revenue	f	All other progra	im service revenue		355,883	355,883		
Ě	g	Total. Add lines	s 2a – 2f	▶	95,129,560			
	3		ome (including dividen	+	55,125,500			
			ar amounts)	. F	3,108,801			3,108,801
	4		tment of tax-exempt bond p	· · ·	. ,			, ,
	5			- -	14,160			14,160
		Royalties	(ı) Real		- 1,			
	62	Gross rents	(1) Keal 296,663	(II) Personal				
	6a	Less rental	831					
	b	expenses						
	C	Rental income or (loss)	295,832					
	d		me or (loss)		295,832			295,832
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	134,504,078	(4)				
	ь	than inventory Less cost or other basis and	133,773,020					
	_c	sales expenses Gain or (loss)	731,058					
	d		s)		731,058			731,058
<u>Ф</u>	8a	Gross income fi	rom fundraısıng		,02,000			
Other Revenue		\$ of contributions See Part IV, lin	reported on line 1c) e 18					
₽	ь	Less direct ex	penses b					
ರ <u> </u>	c		ا (loss) from fundraising	events 🛌				
	9a		rom gaming activities					
	ь	Less direction	penses b					
	c		loss) from gaming activ	vities 🕒				
	10a	Gross sales of returns and allo	inventory, less	vities				
	ь		a pods sold b					
	c	Net income or (loss) from sales of inve	entory 🟲				
		Miscellaneous	s Revenue	Business Code				
	11a	SPONSORSHII	p	541800	681,755			681,755
	Ь	OTHER INCOM		900099	510,650			510,650
		5 THER INCOL	· <u>-</u>		•			•
	ر د	A II a b b a						
	d		ue					
	e	Total. Add lines			1,192,405			
	12	Total revenue.	See Instructions	· · •	100,471,816	95,129,560	0	5,342,256

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 285,000 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 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 7,310,060 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 21,964,790 Pension plan contributions (include section 401(k) and section 2,853,786 403(b) employer contributions) Other employee benefits 2,661,907 1,620,448 10 Fees for services (non-employees) 11 Management 2,613,855 Legal Accounting 121,830 10,280,000 Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees 109,608 14,599,493 g Other 3,795,432 12 Advertising and promotion . . . Office expenses 2,613,544 13 Information technology 1,387,958 14 15 Royalties . . 16 6,250,440 1,699,093 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 2,562,099 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,582,806 23 269,768 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) RESEARCH 9,437,401 PANEL MANAGEMENT EXPENS 5,282,477 SEPARATE PROGRAMS 2,246,818 PUBLIC POLICY 2,224,108 d е f All other expenses 1,245,187 25 Total functional expenses. Add lines 1 through 24f 105,017,908 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

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 2 6.323.536 2 2,425,844 3 3 2.809.321 4 1.942.466 4 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 8 9 659.572 9 925,720 Prepaid expenses and deferred charges 26,184,859 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 15,715,908 b Less accumulated depreciation 11,314,127 10c 10,468,951 84,711,672 85,797,538 11 11 8,647,342 6,548,263 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 4,064,662 15 818,542 15 114,632,540 16 112,825,016 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 8,590,675 17 8,311,125 17 Accounts payable and accrued expenses . 18 18 19 43,371,343 19 47,887,097 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 12,322,481 25 13,634,364 D 26 64,284,499 26 69,832,586 **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 50,348,041 27 42,992,430 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 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 50.348.041 33 42.992.430 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 114.632.540 34 112.825.016

Pai	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		100,4	71,816
2	Total expenses (must equal Part IX, column (A), line 25)	2			17,908
3	Revenue less expenses Subtract line 2 from line 1	3		-4,5	546,092
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		50,3	348,041
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-2,8	309,519
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		42,9	92,430
Par	Tt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	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 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 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?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

Software ID: Software Version:

EIN: 53-0104410

Name: AMERICAN CHEMISTRY COUNCIL

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours		tion (that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DR STEPHANIE A BURNS CHAIR	1 00	Х		х				0	0	0
CRAIG O MORRISON VICE CHAIR	1 00	Х		х				0	0	0
DR FREDERICK J PALENSKY BOARD MEMBER	1 00	Х						0	0	0
FRANCIS X SHERMAN BOARD MEMBER	1 00	Х						0	0	0
DR WARREN HUANG BOARD MEMBER	1 00	Х						0	0	0
MARK C ROHR BOARD MEMBER	1 00	Х						0	0	0
MICHAEL J GRAFF BOARD MEMBER	1 00	Х						0	0	0
JOHN EDWARD MCGLADE BOARD MEMBER	1 00	Х						0	0	0
JOSEPH D GREULICH BOARD MEMBER	1 00	Х						0	0	0
MICHAEL E CAMPBELL BOARD MEMBER	1 00	Х						0	0	0
GREGORY BABE BOARD MEMBER	1 00	Х						0	0	0
BERNARD ROCHE BOARD MEMBER	1 00	Х						0	0	0
BRUCE D RUBIN BOARD MEMBER	1 00	Х						0	0	0
JAMES J O'BRIEN BOARD MEMBER	1 00	Х						0	0	0
PATRICK PREVOST BOARD MEMBER	1 00	Х						0	0	0
HANS U ENGEL BOARD MEMBER	1 00	Х						0	0	0
MS INGA CARUS BOARD MEMBER	1 00	Х						0	0	0
DAVID N WEIDMAN BOARD MEMBER	1 00	Х						0	0	0
CRAIG A ROGERSON BOARD MEMBER	1 00	Х						0	0	0
HUGH C WELSH BOARD MEMBER	1 00	Х						0	0	0
PETER L CELLA BOARD MEMBER	1 00	Х						0	0	0
GARY W SPITZER BOARD MEMBER	1 00	Х						0	0	0
DAVID E KEPLER BOARD MEMBER	1 00	Х						0	0	0
JAMES P ROGERS BOARD MEMBER	1 00	Х						0	0	0
THOMAS BATES BOARD MEMBER	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and	Independ	ent C	ontr	act	ors	·				
(A) Name and Title	(B) Average hours per					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
		trustee	Trustee	H	0)88	pensated	¥			
RANDALL S DEARTH BOARD MEMBER	1 00	Х						0	0	0
STEVE D PRYOR BOARD MEMBER	1 00	Х						0	0	0
PATRICK MURPHY BOARD MEMBER	1 00	Х						0	0	0
PIERRE BRONDEAU BOARD MEMBER	1 00	Х						0	0	0
JIM L GALLOGLY BOARD MEMBER	1 00	Х						0	0	0
ANDREAS C KRAMVIS BOARD MEMBER	1 00	Х						0	0	0
EDWARD A ROSE BOARD MEMBER	1 00	Х						0	0	0
DR JOHN REKERS BOARD MEMBER	1 00	Х						0	0	0
JO SEPH D RUPP BO A RD MEMBER	1 00	Х						0	0	0
MICHAEL H MCGARRY BOARD MEMBER	1 00	Х						0	0	0
ERIK FYRWALD BOARD MEMBER	1 00	Х						0	0	0
MICHAEL R BOYCE BOARD MEMBER	1 00	Х						0	0	0
CHUCK ANDERSON BOARD MEMBER	1 00	Х						0	0	0
STEVE F ANGEL BOARD MEMBER	1 00	Х						0	0	0
JAMES B NICHOLSON BOARD MEMBER	1 00	Х						0	0	0
SVEN ROYALL BOARD MEMBER	1 00	Х						0	0	0
HUGH B VANDERBILT JR BOARD MEMBER	1 00	Х						0	0	0
JEFFRY N QUINN BOARD MEMBER	1 00	Х						0	0	0
JAMES N HARTON BOARD MEMBER	1 00	Х						0	0	0
GEORGES CRAUSER BOARD MEMBER	1 00	Х						0	0	0
CHARLIE CREW BOARD MEMBER	1 00	Х						0	0	0
CHRIS PAPPAS BOARD MEMBER	1 00	Х						0	0	0
JOHN J PARO BOARD MEMBER	1 00	Х						0	0	0
FRED FESTA BOARD MEMBER	1 00	Х						0	0	0
THOMAS L SHEPHERD BOARD MEMBER	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and I	ndepend	ent Co	ntr	act	ors					
(A) Name and Title	(B) Average hours		(tion that a		y)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
GEOFFROY PETIT BOARD MEMBER	1 00	Х						0	0	0
MIKE MCDONNELL BOARD MEMBER	1 00	Х						0	0	0
CALVIN DOOLEY PRESIDENT & CEO	38 00			х				2,259,296	0	244,180
RAYMOND J O'BRYAN CFO & CAO	38 00			х				477,392	0	227,746
DELL PERELMAN GENERAL COUNSEL & CHIEF OF STAFF	38 00			х				453,573	0	164,762
SAM MCMAKIN MANAGING DIRECTOR, INFORMATION TECH	38 00				х			196,296	0	49,844
GEORGE R SPEIGHT MANAGING DIRECTOR, CHEMTREC	38 00				x			234,826	0	54,686
NACOLE HINTON MANAGING DIRECTOR, HUMAN RESOURCES	38 00				х			243,965	0	47,539
ROBERT J SIMON VP, CHEMICAL PRODUCTS & TECH	38 00				х			262,731	0	51,608
STEVEN K RUSSELL VICE PRESIDENT, PLASTICS	38 00				х			301,754	0	47,936
ANNE WOMACK KOLTON VICE PRESIDENT, COMMUNICATIONS	38 00				х			341,565	0	101,721
ROGER BERNSTEIN VICE PRESIDENT, STATE AFFAIRS	38 00				х			380,617	0	143,163
MICHAEL P WALLS VP, REGULATORY & TECHNICAL AFFAIRS	38 00				х			392,379	0	124,424
WALTER MOORE VICE PRESIDENT, FEDERAL AFFAIRS	38 00				х			430,388	0	50,975
TINA BAHADORI MANAGING DIR, LONG RANGE INITIATIVES	38 00					х		273,418	0	59,222
DEBRA PHILLIPS MANAGING DIRECTOR, RESPONSIBLE CARE	38 00					х		214,893	0	54,246
HASMUKH SHAH SR DIRECTOR, CHEMICAL PRODUCTS & TECHNOLOGY	38 00					х		220,958	0	70,994
MICHAEL H LEVY SR DIRECTOR, PFPG AND ERSC	38 00					Х		222,624	0	51,017
SARAH BROZENA SR DIRECTOR, HEALTH PRODUCTS	38 00					х		217,978	0	37,843

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DLN: 93493318029822

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

		_				 	-			-	
AIM	ERICAN (CHEMIS	IKI CC	ONCIL							

Employer identification number

53-0104410

art I-A	Complete if the organization is exem	ipt under section 501(c) or is a section 52/	organization.

- in opposition to candidates for public office in Part IV Political expenditures 120.115 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 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?
- Was a correction made?
- If "Yes," describe in Part IV

Name of the organization

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities 120,115
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- √ Yes 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) A mount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
See Additional Data Table				

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 Over \$1,0	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1,000,000 If the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 If the excess over \$1			expenses, and share of excess lob	bying expenditures)		_	•	
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beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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

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

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	73,871,010
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	10,280,000
b	Carryover from last year	2b	6,197,301
С	Total	2c	16,477,301
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	4,432,261
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	12,045,040
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES		ACC'S POLITICAL ACTIVITIES CONSIST OF MAKING CORPORATE POLITICAL CAMPAIGN CONTRIBUTIONS TO STATE LEGISLATIVE CANDIDATES FOR THEIR ELECTION CAMPAIGNS, AND PARTICIPATING IN PUBLIC REFERENDUM CAMPAIGNS ON ISSUES THROUGH ACC FUNDING OF CAMPAIGN COMMITTEES

Additional Data Software ID: **Software Version: EIN:** 53-0104410 Name: AMERICAN CHEMISTRY COUNCIL Form 990, Schedule C, Part 1-C, Line 5 (b) Address (c) EIN (d) A mount paid from (e) A mount of political (a) Name filing organization's own contributions received internal funds If none, and promptly and enter -0directly delivered to a separate political organization If none, enter -0-ABERCROMBIE FOR GOVERNOR 1050 ALA MOANA BOULEVARD 2500 SUITE D28 HONOLULU, HI 96814 ALAN OLSEN FOR OREGON STATE 2475 N BAKER DRIVE 500 **SENTATE** CANBY, OR 97013 ALEJO FOR ASSEMBLY 1127 11TH ST 606 1500 SACRAMENTO, CA 95814 ALYSON HUBER FOR ASSEMBLY 1127 11TH ST 606 1500 SACRAMENTO, CA 95814 ANDY GARDINER CAMPAIGN 1817 ANTILLES PLACE 500 ORLANDO, FL 32806 ANTHONY CANELLA FOR SENATE 9365 LAGUNA POINTE WAY 1500 ELK GROVE, CA 95758 BATESMILLER TEAM FRIENDS OF PO BOX 39 100 WARREN MILLERLLER GLANELG, MD 21737 BEN HUESO FOR STATE ASSEMBLY C/O NANCY HALEY TREASURER 1500 330 ENCI ENCINITAS, CA 92024 BEVERLY GARD FOR STATE SENATE 3660 N 50 F 1000 COMMITTEE GREENFIELD, IN 46040 BLAKESLEE FOR SENATE 2012 C/O VONA COPP 9321 SILVER 1500 BEND LANE ELK GROVE, CA 95624 BURZICHELLI FOR ASSEMBLY ATTN EILEEN DOMANICO 500 CHEMISTRY COUN TRENTON, NJ 08608 BURZICHELLI FOR ASSEMBLY ATTN EILEEN DOMANICO 500 CHEMISTRY COUN TRENTON, NJ 08608 CATHLEEN GALGIANI FOR SENATE 10011 FOLSOM BLVD 263 1500 SACRAMENTO, CA 95827 CERETTO FOR ASSEMBLY 4645 PERRY COURT 250 LEWISTON, NY 14092 CITIZENS FOR BEISER 2206 KRUG PLACE 250 ALTON,IL 62002 CITIZENS FOR CHRISTINE J PO BOX 242 500 JOHNSON SHABBONA,IL 60550 CITIZENS FOR CHRISTINE RADOGNO 410 MAIN ST SUITE B 1500 LEMONT, IL 60439 CITIZENS FOR DAN BURLING PO BOX 272 250 WARSAW, NY 14569 CITIZENS FOR DAVID LUECHTEFELD PO BOX 171 500 OKAWVILLE, IL 62271 CITIZENS FOR DELORES KELLEY 150 PO BOX 21514 BALTIMORE, MD 21282 CITIZENS FOR DONNE TROTTER 8704 S CONSTANCE AVE STE 500 323 CHICAGO, IL 60617 CITIZENS FOR JOHN CULLERTON 29 S LASALLE STREET SUITE 1000 CHICAGO, IL 60603 CITIZENS FOR KYLE MCCARTER 40 COMMERCE LN 500 LEBANON, IL 62254 CITIZENS FOR PAMELA J ALTHOFF PO BOX 2275 500 CRYSTAL LAKE, IL 600392275 CITIZENS FOR SHANE CULTRA 105 104 W LINCOLN AVE STE A 500 ONARGA, IL 609551176 CITIZENS FOR STEVE LANDEK 7674 W 63RD ST 500 SUMMIT, IL 60501 CITIZENS FOR TIMOTHY W JONES PO BOX 434 300 EUREKA, MO 63025 CITIZENS TO ELECT KURT SCHAEFER PO BOX 1614 500 COLUMBIA, MO 65205 CITIZENS TO ELECT TOM CROSS 24047 W LOCKPORT ST SUITE 1500 201 PLAINFIELD, IL 60544 CLAY FORD PO BOX 13484 500 PENSACOLA,FL 32591 CLAY INGRAM FOR HOUSE 10381 VINTAGE DRIVE 500 PENSACOLA,FL 32591 COMMITTEE TO ELECT BETHANY 127 ST AUGUSTINE COURT 500 HALL-LONG MIDDLETOWN, DE 19709 COMMITTEE TO ELECT DAVID 501 PIERCETON RD 1000 WOLKINS WINONA LAKE, IN 46590 COMMITTEE TO ELECT DOUG 2990 C GULF BREEZE 500 BROXON PARKWAY GULF BREEZE, FL 32563 COMMITTEE TO ELECT JOAN CARTER PO BOX 1573 500 CONWAY BALTIMORE, MD 21203 COMMITTEE TO ELECT MICHAEL W 320 DOUGLAS AVENUE 500 TYRON CRYSTAL LAKE, IL 60014 COMMITTEE TO RE-ELECT BALFOUR 2312 WATERSCAPE TRAIL 750 SNELLVILLE, GA 30078 COMMITTEE TO RE-ELECT R M PO BOX 839 500 CHANNEL GREENSBORO, GA 30642 COMMITTEE TO RE-ELECT VINCENT 699 3RD ST 500 R PRIETO SECAUCUS, NJ 07094 COUNCIL WOMAN JAN PERRY OFFICE HOLDER ACCOUNT 500 1531 PURDUE A LOS ANGELES, CA 90025 CURREN PRICE FOR SENATE C/O THE CAPITOL ALLIANCE 1500 925 L STRE SACRAMENTO, CA 95814 DAVID RALSON CAMPAIGN PO BOX 188 500 BLUE RIDGE, GA 30513 DEMOCRATIC PARTY OF HAWAII 1050 ALA MOANA BLVD 2660 1500 HONOLULU, HI 96814 DEMPSEY FOR SENATE TWO WESTBURY DRIVE 500 ST CHARLES, MO 63301 DR RICHARD PAN FOR ASSEMBLY 915 L STREET SUITE C415 1500 SACRAMENTO, CA 95814 DR ED HERNANDEZ OD DEMOCRAT 556 SOUTH FAIR OAKS 1500 FOR ASSEMBLY 2008 **AVENUE 101-5** PASADENA, CA 91105 ELECTION FUND OF ALEX DECROCE 760 ROUTE 10 WEST SUITE 500 WHIPPANY, NJ 07981 ELECTION FUND OF BARBARA BUONO 75 WOODBRIDGE AVENUE 500 METUCHEN, NJ 08840 ELECTION FUND OF JIM BEACH FOR 2240 ROUTE 70 WEST SUITE 500 SENATE CHERRY HILL, NJ 080020000 ELECTION FUND OF JOE PO BOX 398 PENNACCHIO CEDAR KNOLLS, NJ 07927 ELECTION FUND OF JOHN S 17 MAIN STREET 500 WISNIEWSKI SAYREVILLE, NJ 08872 ELECTION FUND OF JOSEPH CRYAN PO BOX 2245 500 UNION, NJ 07083 ELECTION FUND OF LOUIS 2240-15 RT 70 500 GREENWALD FOR ASSEMBLY CHERRY HILL, NJ 08002 ELECTION FUND OF NI GILL EILEEN DOMANICO 500 CHEMISTRY COUNCIL O TRENTON, NJ 08608 ELECTION FUND OF PAMELA R 2240-15 RT 70 500 LAMPITT FOR ASSEMBLY CHERRY HILL, NJ 080020000 ELECTION FUND OF QUIJANO FOR 311 WHENRY STREET 500 LINCOLN, NJ 07035 ELECTION FUND OF SENATOR BOB 830 SHIRLEY PARKWAY 500 SMITHPISCATAWAY, NJ 08854 ELECTION FUND OF SENATOR PO BOX 1467 500 JOSEPH VITALE WOODBRIDGE, NJ 07095 FRIENDS FOR DEBRA HEFFERNAN 12 LORE AVENUE 350 WILMINGTON, DE 19809 FRIENDS OF AJ WILHELMI **422 WHITNEY AVE** 500 JOLIET,IL 604357018 FRIENDS OF ANDY OLSON PO BOX 891 500 ALBANY, OR 973020082 FRIENDS OF BILL DENNY 36 AUTUMN HILL DRIVE 250 JACKSON, MS 39211 FRIENDS OF BILL HAINE PO BOX 67 500 ALTON,IL 620020067 FRIENDS OF BRUCE HANNA 612 NW CECIL AVE 500 ROSEBURG, OR 97470 FRIENDS OF CAROL SENTE 1152 GEORGETOWN WAY 250 VENON HILLS, IL 60061 FRIENDS OF CHARLES BUSBY PO BOX 901 250 PASCAGOULA, MS 39567 FRIENDS OF CHRIS GARRETT 628 1ST STREET 500 LAKE OSWEGO, OR 97034 FRIENDS OF DARRELL POLLOCK 602 HUNTERS CREEK DRIVE 300 LEBANON, MO 65536 FRIENDS OF DAVID BLOUNT PO BOX 1018 500 JACKSON, MS 39201 FRIENDS OF DERRICK LEON DAVIS C/O CHARLES E HERBERT JR 125 6703 WILBU CAPITOL HEIGHTS, MD 20743 FRIENDS OF ERIC GARCETTI 8271 MELROSE AVENUE SUITE 500 OFFICEHOLDER LOS ANGELES, CA 90046 FRIENDS OF ERIC GARCETTI 8271 MELROSE AVENUE SUITE 500 **OFFICEHOLDER** 105 LOS ANGELES, CA 90046 FRIENDS OF GREG MATTHEWS PO BOX 2376 500 GRESHAM, OR 97030 FRIENDS OF HANK ZUBER **429 HANLEY ROAD** 250 OCEAN SPRINGS, MS 39564 FRIENDS OF HARDIE DAVIS PO BOX 235 500 GRACEWOOD, GA 30812 FRIENDS OF HERB MCMILLAN PO BOX 6075 150 ANNAPOLIS, MD 21401 FRIENDS OF J B JENNINGS PO BOX 446 150 PHOENIX, MD 21131 FRIENDS OF JAMES E MALONE JR 5205 EAST DRIVE SUITE H 100 BALTIMORE, MD 21227 FRIENDS OF JAN JONES 12850 HWY 9 SUITE 600-356 500 MILTON, GA 30004 FRIENDS OF JIM ALESI 100 MERIDAN CENTRE S-310 500 ROCHESTER, NY 14618 FRIENDS OF JIM BECKETT PO BOX 722 250 BRUCE, MS 38915 FRIENDS OF JIM CONTE PO BOX 4006 250 **HUNTINGTON, NY 11743** FRIENDS OF JIM ELLINGTON 7020 JACKSON RAYMOND 250 ROAD RAYMOND, MS 19154 FRIENDS OF JOHN ASTLE 51 FLEET STREET 250 ANNAPOLIS, MD 21401 FRIENDS OF KARLA DRENNER PO BOX 348 500 AVONDALE ESTATES, GA 30002 FRIENDS OF KELLY SCHULZ 6773 BALMORAL RIDGE 100 NEW MARKET, MD 21774 FRIENDS OF LYNN SMITH 8 EVERGREEN DRIVE 500 NEWNAN, GA 30263 FRIENDS OF MARGARET ROSE 1401 PENNSYLVANIA AVE 500 HENRY 1604 WILMINGTON, DE 19806 FRIENDS OF MICHAEL J MADIGAN PO BOX 3188 1000 CHICAGO, IL 60654 FRIENDS OF MIKE BUSCH 1010 HULL STREET SUITE 202 500 BALTIMORE, MD 21230 FRIENDS OF MIKE FORTNER ATTN GARY R SAAKE 28W200 500 FLANDERS L WINFIELD, IL 60190 FRIENDS OF NANCY COLLINS 1604 BRIAR RIDGE ROAD 500 TUPELO, MS 38804 FRIENDS OF PAM BEIDLE PO BOX 397 150 LINTHICUM, MD 21090 FRIENDS OF PAM ROTH PO BOX 828 250 MORRIS,IL 60450 FRIENDS OF PETE HAMMEN 821 S GRUNDY STREET 500 BALTIMORE, MD 21224 FRIENDS OF PHILIP GUNN 101 PINEHAVEN COVE 300 CLINTON, MS 39056 FRIENDS OF ROSS TOLLESON PO BOX 1356 500 PERRY,GA 31069 FRIENDS OF SAM MIMS PO BOX 222 250 MCCOMB, MS 39469 FRIENDS OF SCOTT DELANO 250 2008 BAYOU LAPORTE BILOXI, MS 39531 FRIENDS OF STEPHANIE T BOLDEN 512 W 4TH STREET 350 WILMINGTON, DE 19801 FRIENDS OF STEVE HOLLAND PO BOX 62 250 CLINTON, MS 39060 FRIENDS OF TERRY BROWN 22 HILLSIDE DRIVE 500 COLUMBUS, MS 39702 FRIENDS OF TERRY ENGLAND 1060 OLD HOG MOUNTAIN 500 ROAD AUBURN, GA 30011 FRIENDS OF TERRY LINK 811 SHERIDAN RD 500 WAUKEGAN, IL 600852031 FRIENDS OF TIM FREEMAN 792 NW GARDEN VALLEY ROAD 500 ROSEBURG, OR 97470 FRIENDS OF TIM SCHMITZ 1921 W WILSON ST STE A PMB 250 BATAVIA, IL 60510 FRIENDS OF TOM MCCALL 2835 WASHINGTON HIGHWAY 500 ELBERTON, GA 30635 FRIENDS OF TOMMIE WILLIAMS 148 WILLIAMS AVENUE 500 LYONS, GA 30436 FRIENDS TO ELECT BOB MARSHALL 204 S FRANKLING STREET 500 STATE SENATOR WILMINGTON, DE 19805 GALIVAN FOR SENATE PO BOXTWO 500 SPRING BROOK, NY 14140 GRISANTI FOR SENATE PO BOX 288 500 BUFFALO, NY 14207 HALL FOR ASSEMBLY C/O MCKINLEY PILLOWS 1500 FUNDRAISING SACRAMENTO, CA 95814 HARKEY FOR ASSEMBLY C/O WENDY WARFIELD 1500 ASSOCIATES 921 SACRAMENTO, CA 95814 HENRY T PEREA FOR ASSEMBLY 1127 11TH STREET SUITE 606 1500 SACRAMENTO, CA 65814 HERNANDEZ FOR ASSEMBLY C/O MCKINLEY PILLOWS 1500 FUNDRAISING SACRAMENTO, CA 95814 HOLLY J MITCHELL FOR ASSEMBLY 1100 O STREET SUITE 200 1500 SACRAMENTO, CA 95814 HOLSMAN FOR MISSOURI PO BOX 480572 400 KANSAS CITY, MO 64131 HOUSE REPUBLICAN FUND PO BOX 5629 500 AUGUSTA, ME 04330 JEFF MILLER FOR SENATE 3711 A ARLINGTON AVE 1500 RIVERSIDE, CA 92506 JUAN VARGAS FOR SENATE 2010 C/O RIVER CITY BUSINESS 1500 SERVICES 54 SACRAMENTO, CA 95841 KENNEDY FOR SENATE PO BOX 73 500 BUFFALO, NY 14220 LAMOUREUX FOR SENATE 208 CRAIGWOOD CIRCLE 500 RUSSELLVILLE, AR 72801 LATINO LEGISLATIVE CAUCUS 1127 11TH ST SUITE 606 1000 **FOUNDATION** SACRAMENTO, CA 95814 LINDA HALDERMAN FOR ASSEMBLY **504 VAN NESS AVENUE** 1500 FRESNO, CA 93721 MAINE PAC PO BOX 877 500 BUCKSPORT, ME 04416 MANUEL PEREZ FOR ASSEMBLY 2012 921 11TH ST 619 1500 SACRAMENTO, CA 65814 MAZIARZ STATE SENATE PO BOX 220 500 NIAGARA FALLS, NY 14304 MIKE GATTO FOR ASSEMBLY 2010 1100 O STREET SUITE 200 1500 SACRAMENTO, CA 95814 MIMI WALTERS FOR SENATE C/O WENDY WARFIELD 1500 ASSOCIATES 921 SACRAMENTO, CA 95814 NEW YORKERS FOR KLEIN 3602 EAST TREMONT AVENUE 500 SUITE 205 BRONX, NY 10465 NICK SACCO FOR SENATE 7202 HUDSON AVENUE 500 NORTH BERGEN, NJ 07047 PARSON FOR STATE SENATE 940 N REDEL PLACE 500 BOLIVAR, MO 65613 PAVING THE WAY FOR A 169 COLES CORNER RD 500 PROSPEROUS MAINE PAC WINTERPORT, ME 04496 PERRY FOR HOUSE 6 FOXBORO COVE 500 JACKSONVILLE, AR 72076 PETERSON FOR SENATE COMMITTEE 1306 W NEWPORT PK 500 WILMINGTON, DE 19804 RE-ELECT TONY STRICKLAND 515 S FIGUEROA STREET 16TH 1500 LOS ANGELES, CA 90071 RE-ELECT TONY STRICKLAND 515 S FIGUEROA STREET 16TH 1500 FL LOS ANGELES, CA 90071 REPUBLICAN ASSEMBLY CAMPAIGN 315 STATE STREET 500 COMMITTEE ALBANY, NY 12210 RESPECT MAINE PO BOX 211 500 HAMPDEN, ME 04444 RIDLEY-THOMAS FOR SUPERVISOR C/O CHARLOTTE DOBBS CO 1500 3700 WILSH LOS ANGELES, CA 90010 RILEY FOR ASSEMBLY 43 FRANKLIN DRIVE 500 BRIDGETON, NJ 08302 RONALD CALDERON FOR SENATE 925 L STREET SUITE 1490 1500 SACRAMENTO, CA 95814 SAMPLE FOR SENATE 2340 NORTH HWY 7 500 HOT SPRINGS, AZ 71909 SAN JOSE SILICON VALLEY CHAMBER 101 WEST SANTA CLARA 5300 OF COMMERCE STREET SAN JOSE, CA 95113 SAN JOSE SILICON VALLEY CHAMBER 101 WEST SANTA CLARA 540 OF COMMERCE STREET SAN JOSE, CA 95113 SCHMITT FOR SENATE PO BOX 220722 500 KIRKWOOD, MO 63122 SENATOR BOB DUTTON FOR 1020 12TH STREET 401 1500 **ASSEMBLY** SACRAMENTO, CA 95814 SENATOR LOU CORREA 1127 11TH STREET SUITE 505 1500 OFFICEHOLDER COMMITTEE SACRAMENTO, CA 95814 SOLORIO FOR SENATE 2014 1127 11TH STREET SUITE 606 1500 SACRAMENTO, CA 65814 STEVE KNIGHT FOR ASSEMBLY 1020 12TH STREET 401 1500 SACRAMENTO, CA 95814 SUPPORTERS OF THOMAS 'MAC' PO BOX 2502 500 MIDDLETON LA PLATA, MD 20646 SWEENEY FOR SENATE 300 NORTH MARION AVENUE 1000 WENONAH, NJ 08090 TAXPAYERS FOR ROD WRIGHT2012 C/O MCKINLEY PILLOWS 1500 **FUNDRAISING** SACRAMENTO, CA 95814 TIM GOLDEN FOR STATE SENATE PO BOX 1251 500 VALDOSTA, GA 31603 TOM GOODSON CAMPAIGN 630 CIDCO ROAD 500 COCOA,FL 32926 TONY MENDOZA FOR SENATE 1127 11TH STREET SUITE 606 1500 SACRAMENTO, CA 95814 TORRES FOR ASSEMBLY C/O DEBORAH DUDLEY 1500 ASSOCIATES 807 HUNTINGTON BEACH, CA 92647 TRUDI WILLIAMS CAMPAIGN PMB 273 6900-29 DANIELS 500 PARKWAY FORT MYERS, FL 33912 VAN DREW FOR SENATE PO BOX 941 500 CAPE MAY COURT HOUSE, NJ 08210 WESSON FOR CITY COUNCIL 2011 4300 DON FELIPE DRIVE 500 LOS ANGELES, CA 90008 WILL WEATHERFORD FOR STATE PO BOX 7339 500 SENATE WESLEY CHAPEL, FL 33545 WILLIAMS FOR HOUSE 11311 ARCADE DRIVE SUITE 500 LITTLE ROCK, AR 72212 WILMER AMINA CARTER FOR SENATE 1005 -12TH STREET SUITE H 1500 SACRAMENTO, CA 95814 WOLF FOR SENATE 1127 11TH ST SUITE 505 1500

SACRAMENTO, CA 95814

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DLN: 93493318029822

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

tema	Revenue Service P- Attach to Fo	orm 990. F See separate instructions.			inspect	1011
	me of the organization ERICAN CHEMISTRY COUNCIL		Emple	oyer identification	on numbe	r
				104410		
Pa	organizations Maintaining Donor Ac		unds o	r Accounts.	Complet	e if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(1) Funds and oth	eraccour	nts
L	Total number at end of year	(a) Bollot davised fallas	(,	s, r anas ana och	er accour	11.5
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
1	Aggregate value at end of year					
5	Did the organization inform all donors and donor advi- funds are the organization's property, subject to the		or advis	ed	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				┌ Yes	┌ No
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes" to	o Form	990, Part IV,	lıne 7.	
L 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualiceasement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	ertified	historic structu		ā
	easement on the last day of the tax year	ſ		Held at the E	nd of the	Vear
а	Total number of conservation easements		2a	ricia de ene El	id of the	TCui
ь	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified his	-	2c			
d	Number of conservation easements included in (c) ac	` ′	2d			
3	Number of conservation easements modified, transfe	L erred released extinguished or terminate	d by the	organization du	rına	
	the taxable year ►	nisa, roisassa, examgaisnoa, or terminate	u 2,	organization au	9	
ŀ	Number of states where property subject to conserva	ation easement is located 🛌				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of v	violations, and	┌ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents du	ring the year 🛌		
7	A mount of expenses incurred in monitoring, inspectings \$	ng, and enforcing conservation easements	during	the year		
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion		┌ Yes	┌ No
•	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financial				
ar	Organizations Maintaining Collectio Complete if the organization answered "	ns of Art, Historical Treasures,	or Oth	er Similar As	sets.	
La	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	116, not to report in its revenue stateme for public exhibition, education or research	h in fur			.,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in				
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA!		r financ			
а	Revenues included in Form 990, Part VIII, line 1			▶ \$		
	, , = =					

b Assets included in Form 990, Part X

Part	IIII Organizations Maintaining Co	llections of Art,	His	torio	cal T	reası	ures, or O	<u>the</u>	<u>r Similar As</u>	sets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th	e foll	_		_			ion	
а	Public exhibition		d	Γ	Loan	orexo	hange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how	they	furth	er the	organızatıon	's ex	kempt purpose i	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Complet	te ıf	the o	organ	ızatıo			es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lan or other intermed	diary	for c	ontribi	utions	or other ass	ets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	ollow	ıng ta	ble						
									An	nount	
C	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	<i>(</i>									
Par	t V Endowment Funds. Complete										
		(a)Current Year	(b)	Prior Y	'ear	(c)T	wo Years Back	(d)	Three Years Back	(e) Four `	ears Back
1a	Beginning of year balance							_			
b	Contributions							_			
С	Investment earnings or losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
e	and programs							\vdash			
f	•							_			
g	End of year balance										
2	Provide the estimated percentage of the year	r end balance held as	S								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiza	tıon t	hat a	re hel	d and	admınıstered	d for	the		
	organization by (i) unrelated organizations								3a(Yes	No
				•		•		•	3a(
b	(ii) related organizations If "Yes" to 3a(ii), are the related organizatio			ched	ule R?	• •		•			
4	Describe in Part XIV the intended uses of th					•		•			<u> </u>
Par	VI Land, Buildings, and Equipme					10.					
			,		Cost or		(b)Cost or ot	her	(c) Accumulated	1	
	Description of property				(inves		basis (othe		depreciation	(d) B	ook value
1 a L	and										
ЬE	Buildings		•								
	easehold improvements						9,454	,911	766,520		8,688,391
	quipment						10,823		10,681,28	_	142,501
	Other		-				5,906		4,268,10	+	1,638,059
	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>			, line	10(c).)	3,300			+	10,468,951
	, , , , , , , , , , , , , , , , , , , ,	. ,	. //		, , , , ,				Schedule D		

Investments—Other Securities. See	orm 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)Other (A) 177,459 698 SHS HARBOR FD CAP APP FD	6,548,263	F
(A) 177,433 030 3113 HARBORTB CAL ALL TD	0,540,203	<u>'</u>
Table (Calume (b) about a sure form 000 Part V and (D) to a 12)	6 549 363	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of the of 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	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:		
Part X Other Liabilities. See Form 990, Part X	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount	

D~	TAVE Description of Change in Net Assets from Form 000 to Financial Chataman	.+-	r age -r
-	Reconciliation of Change in Net Assets from Form 990 to Financial Statemer		100 471 016
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	100,471,816
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	105,017,908
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,546,092
4	Net unrealized gains (losses) on investments	4	-2,809,519
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	-2,809,519
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-7,355,611
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	91,180,779
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)		
е	Add lines 2a through 2d	2e	-7,465,989
3	Subtract line 2e from line 1	3	98,646,768
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 109,608		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	1,825,048
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	100,471,816
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	98,402,519
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	455,280
3	Subtract line 2e from line 1	3	97,947,239
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 109,608		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4 c	7,070,669
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	105,017,908
Pai	t XIV Supplemental Information		

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ACC, RFHEE, AMERICHEM PAC ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTIONS 501(C)(6), 501(C)(3), AND 527 OF THE INTERNAL REVENUE CODE, RESPECTIVELY IN ADDITION, RFHEE QUALIFIES FOR CHARITABLE CONTRIBUTIONS DEDUCTIONS AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION INCOME THAT IS NOT RELATED TO EXEMPT PURPOSES, LESS APPLICABLE DEDUCTIONS, IS SUBJECT TO FEDERAL AND STATE CORPORATE INCOME TAXES THERE WAS NO NET TAX LIABILITY FOR UNRELATED BUSINESS INCOME TAX FOR THE YEAR ENDED DECEMBER 31, 2011 THE COUNCIL FOLLOWS THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE COUNCIL MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LERGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIES POSITIONS AND HAS CONCLUDED THAT THE COUNCIL HAS TAKEN NO UNCERTAIN TAX POSITIONS AND HAS EVALUATED THE COUNCIL IS NO LONGER SUBJECT TO US FEDERALLY, THE COUNCIL IS FOR YEARS BEFORE ZAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE ZOON
PART XII, LINE 2D - OTHER ADJUSTMENTS		AFFILIATE INCOME INCLUDED IN CONSOLIDATED FINANCIAL STATEMENT 589,151 CHEMICAL PRODUCTS & TECHNOLOGY DIVISION EXPENSES -5,245,621
PART XII, LINE 4B - OTHER ADJUSTMENTS		SEPARATE PROGRAMS INCLUDED IN LINE 2, PART VIII, PG 10 1,715,440
PART XIII, LINE 2D - OTHER ADJUSTMENTS		AFFILIATE EXPENSES INCLUDED IN CONSOLIDATED FINANCIAL STATEMENT 455,280
PART XIII, LINE 4B - OTHER ADJUSTMENTS		CHEMICAL PRODUCTS & TECHNOLOGY DIVISION EXPENSES 5,245,621 SEPARATE PROGRAMS INCLUDED IN LINE 2, PART VIII, PG 10 1,715,440

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493318029822

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN CHEMISTRY COUNCIL

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

Inspection

Employer identification number

53-0104410

Part I General Informa	ation on Grants	and Assistance					
 Does the organization main the selection criteria used t Describe in Part IV the organization 	to award the grants o	rassistance?					ΓYes Γ
Form 990, Part IV	, line 21 for any re	ecipient that received	more than \$5,000.	Check this box if no	one recipient rece	rganization answered eived more than \$5,0 · · · · · ·	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) RESEARCH FOUNDATION FOR HEALTH AND ENVIORNMENTAL EFFECTS700 SECOND STREET NE WASHINGTON, DC 20002	52-1945222	501(C)(3)	285,000				GENERAL SUPPORT
2 Enter total number of section 3 Enter total number of other							1

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

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

Identifier Return Reference

Explanation

Schedule I (Form 990) 2011

DLN: 93493318029822

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	the organization
AMERICAN	CHEMISTRY COUNCIL

Employer identification number

53-0104410

Pa	tt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	\sqcap	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	\sqcap	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement orprovision of all the expenses describ			1b		
2	Did the organization require substantiation prior to reii officers, directors, trustees, and the CEO/Executive D			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all that					
	Compensation committee		Written employment contract			
	✓ Independent compensation consultant	<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, Pa or a related organization	rt V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	ymei	nt?	4a		Νo
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
c	c Participate in, or receive payment from, an equity-based compensation arrangement?					Νo
	If "Yes" to any of lines $4a-c$, list the persons and prov	ıde tl	he applicable amounts for each item in Part III			
	Only FO1(a)(2) and FO1(a)(4) are minutions only myster		nlata linea E O			
5	Only 501(c)(3) and 501(c)(4) organizations only must For persons listed in form 990, Part VII, Section A, lin					
3	compensation contingent on the revenues of	ie Ia	, and the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, lincompensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lipayments not described in lines 5 and 67 If "Yes," des			7		
8	Were any amounts reported in Form 990, Part VII, pair subject to the initial contract exception described in R in Part III			8		
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958-6(c)$?	ebutt	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	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Additional Data Table							

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

Return eference	Explanation
	FOLLOWING ARE THE EMPLOYEE DEFERRALS INTO THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN - 457(F) CALVIN DOOLEY - \$196,509
\$	RAYMOND O'BRYAN - \$172,924 DELL PERELMAN - \$109,940 MICHAEL WALLS - \$69,602 ROGER BERNSTEIN - \$91,146 GEORGE R SPEIGHT, JR - \$1,168 FOLLOWING ARE THE DISBURSEMENTS FORM THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN - 457(F) CALVIN DOOLEY - \$108,728 RAYMOND O'BRYAN - \$39,492 DELL PERELMAN - \$21,594 MICHAEL WALLS - \$23,579 ROGER BERNSTEIN - \$30,255
	LINE F

Schedule J (Form 990) 2011

Software ID: Software Version:

EIN: 53-0104410

Name: AMERICAN CHEMISTRY COUNCIL

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
CALVIN DOOLEY	(1) (11)	2,134,068 0	0	125,228 0	225,662 0	33,909 0	2,518,867 0	90,308 0
RAYMOND J O'BRYAN	(I) (II)	421,400	0	55,992 0	205,424 0	30,936 0	713,752 0	23,672
DELL PERELMAN	(ı) (ıı)		0	38,094 0	142,440 0	29,456 0	625,469 0	13,602
SAM MCMAKIN	(ı) (ıı)		0	0	24,022	27,840 0	248,158 0	0
GEORGE R SPEIGHT	(ı) (ıı)		0	16,500 0	33,668 0	22,212	290,706 0	0
NACOLE HINTON	(ı) (ıı)	243,831	0	134 0	29,400 0	20,015	293,380 0	0
ROBERT J SIMON	(ı) (ıı)		0	1,257 0	29,400 0	24,400 0	316,531 0	0
STEVEN K RUSSELL	(ı) (ıı)	298,734	0	3,020 0	28,849 0	23,243	353,846 0	0
ANNE WOMACK KOLTON	(ı) (ıı)	335,282	0	6,283 0	79,400 0	31,588 0	452,553 0	0
ROGER BERNSTEIN	(ı) (ıı)		0	46,755 0	123,646 0	23,787	528,050 0	34,146 0
MICHAEL P WALLS	(ı) (ıı)		0	40,079 0	102,102	26,616 0	521,097 0	10,446
WALTER MOORE	(ı) (ıı)	419,123	0	11,265 0	25,654 0	29,616 0	485,658 0	0
TINA BAHADORI	(ı) (ıı)		0	2,737 0	29,400 0	37,180 0	339,998 0	0
DEBRA PHILLIPS	(I) (II)	214,893	0 0	0	24,924 0	36,351 0	276,168 0	0
HASMUKH SHAH	(I) (II)		0	0	49,476 0	23,305	293,739 0	0
MICHAEL H LEVY	(ı) (ıı)		0	14,523 0	32,500 0	20,644 0	275,768 0	0
SARAH BROZENA	(1) (11)	203,388	0 0	14,590 0	33,571 0	6,321 0	257,870 0	0

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As Filed Data -

DLN: 93493318029822

OMB No 1545-0047

Inspection

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.

FAttach to Form 990 or 990-EZ.

Name of the organization AMERICAN CHEMISTRY COUNCIL Employer identification number 53-0104410

		53-0104410
ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	ACC HAS APPROXIMATELY 150 MEMBER COMPANIES THAT EITHER PRODUCE OR SELL PRODUCTS OF CHEMISTRY IN THE UNITED STATES
	FORM 990, PART VI, SECTION A, LINE 7A	ACC'S MEMBERS ELECT ITS BOARD OF DIRECTORS AT AN ANNUAL MEETING
	FORM 990, PART VI, SECTION A, LINE 7B	BY LAW AMENDMENTS THAT SUBSTANTIALLY CHANGE ANY EXISTING BY LAW PROVISIONS MUST BE APPROVED BY TWO-THIRDS OF THE MEMBERS PRESENT AT AN ANNUAL OR SPECIALLY CALLED MEETING
	FORM 990, PART VI, SECTION B, LINE 11	IN ACCORDANCE WITH THE COUNCIL'S BOARD APPROVED RESOLUTION, THE 2011 IRS FORM 990 WAS REVIEWED BY THE ACC BOARD FINANCE, AUDIT AND MEMBERSHIP COMMITTEE. THE BOARD FINANCE, AUDIT AND MEMBERSHIP COMMITTEE WAS PROVIDED AN ELECTRONIC COPY OF THE FORM 990 FOR REVIEW NO LESS THAN 4 DAYS PRIOR TO THE FILING DEADLINE AND ANY COMMENTS WERE RESOLVED TO EFFECT A TIMELY FILING OF THE FORM 990
	FORM 990, PART VI, SECTION B, LINE 12C	EACH DIRECTOR, OFFICER, AND EMPLOYEE OF ACC IS TO ANNUALLY SUBMIT A DISCLOSURE STATEMENT, PROVIDED BY ACC, LISTING ALL ORGANIZATIONS WITH WHICH HE OR SHE IS "AFFILIATED" (AS DEFINED IN THE CONFLICT-OF-INTEREST POLICY), DESCRIBING THE NATURE OF THE AFFILIATION, AND INDICATING WHETHER HE OR SHE HAS OR MAY HAVE A CONFLICT-OF-INTEREST INVOLVING ANY ACC FINANCIAL TRANSACTION IN THE EVENT THERE IS A CHANGE IN THE INFORMATION IN THE DISCLOSURE STATEMENT, THE PERSON SUBMITTING IT IS TO PROMPTLY SUBMIT WRITTEN NOTIFICATION OF THE CHANGE THE CHAIRMAN OF THE BOARD AND THE PRESIDENT AND CEO SHALL BE RESPONSIBLE FOR THE ADMINISTRATION OF THIS POLICY ALL DISCLOSURES REQUIRED UNDER THIS POLICY SHALL BE PROVIDED TO THE ACC PRESIDENT AND CEO INFORMATION DISCLOSED UNDER THIS POLICY WILL BE HELD IN CONFIDENCE BY THE CHAIRMAN OF THE BOARD AND THE PRESIDENT AND CEO AND BY THOSE PERSONS THEY AUTHORIZE TO RECEIVE IT WHERE THE BEST INTERESTS OF THE ASSOCIATION REQUIRES FURTHER DISCLOSURE THIS REVIEW PROCESS WILL BE REPORTED ANNUALLY TO THE BOARD BY THE CHAIRMAN A DIRECTOR WHO HAS DECLARED OR HAS BEEN FOUND TO HAVE A CONFLICT-OF-INTEREST IN ANY PROPOSED TRANSACTION OR OTHER MATTER IS TO REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE PROPOSED TRANSACTION OR OTHER MATTER, INCLUDING NOT VOTING ON THE MATTER IN QUESTION AND, IF SO REQUESTED BY THE CHAIRMAN OR ANY OTHER DIRECTOR, NOT BEING PRESENT AT THE TIME OF THE VOTE WITH RESPECT TO RESTRAINT ON PARTICIPATION BY EMPLOYEES, THE PRESIDENT AND CEO IS TO TAKE SUCH ACTION AS IS NECESSARY TO ENSURE THAT THE TRANSACTION OR OTHER MATTER IS COMPLETED IN THE BEST INTERESTS OF ACC WITHOUT THE INVOLVEMENT OF THE PERSON WHO HAS THE CONFLICT-OF-INTEREST
	FORM 990, PART VI, SECTION B, LINE 15	THE ACC COMPENSATION COMMITTEE IS COMPRISED OF THE ACC CHAIRMAN OF THE BOARD AND THE IMMEDIATE PAST CHAIRMAN OF THE BOARD THE COMPENSATION COMMITTEE REVIEWS THE PERFORMANCE AND SETS THE ANNUAL COMPENSATION OF THE ACC PRESIDENT AND CEO PURSUANT TO AGREED UPON CONTRACTUAL TERMS THE COMPENSATION COMMITTEE ALSO REVIEWS AND APPROVES THE ANNUAL COMPENSATION AS RECOMMENDED BY THE PRESIDENT AND CEO FOR COVERED INDIVIDUALS COVERED INDIVIDUALS CONSIST OF CHIEF EMPLOYED EXECUTIVES, OFFICERS, VICE PRESIDENTS AND KEY EMPLOYEES FOR 2010, THE COMPENSATION COMMITTEE REVIEWED PERFORMANCE, AWARDED THE BONUS, AND APPROVED THE 2011 BASE COMPENSATION FOR THE PRESIDENT AND CEO FOR THE REMAINING COVERED INDIVIDUALS, THE PRESIDENT AND CEO RECOMMENDED BONUSES AND 2011 BASE SALARIES TO THE COMPENSATION COMMITTEE, USING UPDATED MARKET BASED DATA, SIMILAR TO THAT USED DURING THE COMPREHENSIVE BENCHMARK STUDY THAT WAS PERFORMED IN 2008 THE RECOMMENDATIONS OF THE PRESIDENT AND CEO WERE THEN APPROVED BY THE COMPENSATION COMMITTEE AT ITS DECEMBER 2010 MEETING
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT MAKE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC, EXCEPT TO THE EXTENT REQUIRED BY LAW
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -2,809,519

DLN: 93493318029822

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

Schedule R (Form 990) 2011

Employer identification number

OMB No 1545-0047

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

MERICAN CHEMISTRY COUNCIL				53-010441	0		
Part I Identification of Disregarded Entities (Cor	nplete if the organizat	ion answered "Yes	" on Form 990, Pa	art IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)			(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during	anizations (Completengent)	e if the organization	n answered "Yes"	on Form 990, Pa	rt IV, line 34 becaus	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	section (e) (f Public charity status (if section 501(c)(3)) Olirect co		(g) Section 512(controlle organizat	
AN DESCRIPCIO FOUNDATION FOR HEALTH AND ENVIRONMENTAL EFFECTS						Yes	No
(1) RESEARCH FOUNDATION FOR HEALTH AND ENVIRONMENTAL EFFECTS 700 2ND STREET NE	RESEARCH	VA	501(C)(3)	LINE 11A,	AMERICAN CHEMISTRY COUNCIL		No
WASHINGTON, DC 20002 52-1945222							
2) AMERICAN CHEMISTRY COUNCIL POLITICAL ACTION COMMITTEE					AMEDICAN CHEMICIPY		
700 2ND STREET NE	POLITICAL ACTIVITIES	VA	527		AMERICAN CHEMISTRY COUNCIL		No
VASHINGTON, DC 20002							
3) COALITION FOR AMERICAN JOBS							
700 2ND STREET NE	PLANS AND EXECUTES ADVOCACY STRATEGIES	DC	501(C)(6)		AMERICAN CHEMISTRY COUNCIL		No
NASHINGTON, DC 20002 27-5075681						$oldsymbol{ol}}}}}}}}}}}}}}}}}$	

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 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)	, ·	(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?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(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) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership			

(4)

(5)

(6)

		·						
P	art V	Transactions With Related Organizations (Complete if the organization answered "Ye	es" 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 th	e tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?				1
а	Recei	ot of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			[:	1a		No
ь	Gift, g	rant, or capital contribution to related organization(s)			[:	1b	Yes	1
c	Gıft, g	rant, or capital contribution from related organization(s)			[:	1c		No
d	Loans	or loan guarantees to or for related organization(s)			[:	1d		No
e	Loans	or loan guarantees by related organization(s)			[:	1e		No
								1
f	Sale	fassets to related organization(s)			[:	1f		No
g	Purch	ase of assets from related organization(s)			[:	1 g		No
h	Excha	nge of assets with related organization(s)			[:	1h		No
i	Lease	of facilities, equipment, or other assets to related organization(s)				1i		No
								1
j	Lease	of facilities, equipment, or other assets from related organization(s)			[:	1j		No
k	Perfor	mance of services or membership or fundraising solicitations for related organization(s)			[:	1k		No
ı	Perfor	nance of services or membership or fundraising solicitations by related organization(s)				11		No
n	n Sharır	g of facilities, equipment, mailing lists, or other assets with related organization(s)			[:	1m		No
n	Sharıı	g of paid employees with related organization(s)			[:	1n		No
								1
c	Reimb	ursement paid to related organization(s) for expenses			[:	10		No
p	Reimb	ursement paid by related organization(s) for expenses			[:	1 p		No
								1
q	Other	transfer of cash or property to related organization(s)			[:	1q	Yes	1
r	Other	transfer of cash or property from related organization(s)			[:	1r		No
					_			
2	If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ionships and transact	ıon thresholds			
		(a)	(b)	(c)	(d	1)		
		Name of other organization	Transaction type(a-r)	Amount involved	Method of deter		ing am	ount
(1)	RESEARCH	FOUNDATION FOR HEALTH & ENVIRONMENTAL EFFECTS	В	285,000	CASH			
(2)	COALITION	FOR AMERICAN JOBS	Q		CASH			
(3)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
(3)								
			1	1	1			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate allocations		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (j) Genera manag partne		S? Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		eral or aging ener?	g (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