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Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address)Room/suite

3 BETHESDA METRO CENTER NO 1100

City or town, state or country, and ZIP + 4

BETHESDA, MD 208146302

F Name and address of principal officer

JOHN M GRAU

3 BETHESDA METRO CENTER NO 1100

BETHESDA,MD 208146302

D Employer identification number

53-0115267

E Telephone number

(301) 657-3110

G Gross receipts \$ 34,589,087

I Tax-exempt status

☐ 501(c)(3)

☒ 501(c) ( 6 )

☐ (insert no )

☐ 4947(a)(1) or

☐ 527

J Website: WWW.NECANET.ORG

K Form of organization

☐ Corporation☐ Trust☒ Association☐ Other

L Year of formation 1901

M State of legal domicile MD

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities NECA IS DEDICATED TO ENHANCING THE ELECTRICAL CONTRACTING INDUSTRY THROUGH CONTINUING EDUCATION, LABOR RELATIONS, CURRENT INFORMATION AND PROMOTIONAL ACTIVITIES. IT IS THE VOICE OF THE ELECTRICAL CONTRACTING INDUSTRY, WORKING TO PROMOTE HIGHER STANDARDS, QUALITY WORKMANSHIP AND TRAINING FOR A SKILLED WORKFORCE.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	130
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	130
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	78
	6	Total number of volunteers (estimate if necessary)	6	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	6,513,415
Revenue	b	Net unrelated business taxable income from Form 990-T, line 34	7b	591,476
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	0	200,000
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	22,035,961	23,413,988
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	906,748	649,749
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,617,904	663,403
			25,560,613	24,927,140
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	346,126	350,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	9,233,733	9,523,325
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) $\rightarrow$ 0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	13,887,378	16,748,371
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	23,467,237	26,621,696
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	2,093,376	-1,694,556
			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	28,851,073	27,273,733
	21	Total liabilities (Part X, line 26)	10,971,094	11,435,738
	22	Net assets or fund balances. Subtract line 21 from line 20	17,879,979	15,837,995

Part II

Signature Block

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.

Sign Here

\*\*\*\*\*

Signature of officer

2012-11-14

Date

TRACI PICKUS SECRETARY-TREASURER

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

SUBRINA L WOOD

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions)  
P00365899

Firm's name (or yours if self-employed), address, and ZIP + 4

TATE AND TRYON  
2021 L STREET NW SUITE 400  
WASHINGTON, DC 20036

EIN  $\rightarrow$  52-1855942

Phone no  $\rightarrow$  (202) 293-2200

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

☒ Yes

☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ ☒

1

Briefly describe the organization's mission

NECA IS DEDICATED TO ENHANCING THE ELECTRICAL CONTRACTING INDUSTRY THROUGH CONTINUING EDUCATION, LABOR RELATIONS, CURRENT INFORMATION AND PROMOTIONAL ACTIVITIES IT IS THE VOICE OF THE ELECTRICAL CONTRACTING INDUSTRY, WORKING TO PROMOTE HIGHER STANDARDS, QUALITY WORKMANSHIP AND TRAINING FOR A SKILLED WORKFORCE

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

"ELECTRICAL CONTRACTOR" MAGAZINE -- THE MAGAZINE OF THE ELECTRICAL CONTRACTING BUSINESS EDUCATES THE INDUSTRY THROUGH TIMELY ARTICLES AND COLUMNS ON SUCH TOPICS AS THE NATIONAL ELECTRICAL CODE, ESTIMATING, PROJECT MANAGEMENT, NETWORKING, LIGHTING, POWER QUALITY, FIBER OPTICS, INTEGRATED SYSTEMS AND OTHER TECHNOLOGIES AND PROJECT PROFILES THAT EXAMINE HOW CONTRACTORS OPERATE IN DIFFERENT MARKETS AND SITUATIONS

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

FIELD AND OTHER SERVICES -- NECA PROVIDES A NUMBER OF SERVICES TO MEMBERS AS PART OF ITS MISSION TO ADVANCE THE ELECTRICAL CONTRACTING INDUSTRY FIELD SERVICES HELP MEMBERS BY MEDIATING LOCAL LABOR DISPUTES AND PROVIDING COUNSELING LABOR RELATIONS SERVICES HELP WITH U S DEPARTMENT OF LABOR REGULATIONS, NEGOTIATION OF NATIONAL LABOR AGREEMENTS, EDUCATION AND TRAINING FOR EMPLOYEES, PROVIDING STATISTICAL ANALYSES OF LABOR TRENDS, AND IN GENERAL, HELPING TO PROMOTE A POSITIVE IMAGE FOR UNIONIZED ELECTRICAL CONSTRUCTION GOVERNMENT AFFAIRS MONITORS FEDERAL LEGISLATION AND PUBLISHES GUIDANCE FOR FEDERAL REGULATORY COMPLIANCE SAFETY SERVICES BENEFIT MEMBERS BY ENSURING A SAFE WORK ENVIRONMENT FOR MEMBER EMPLOYEES NECA'S CODES AND STANDARDS GROUP PROVIDES INPUT TO THE NATIONAL ELECTRICAL CODE PANELS, AND ALSO REPRESENTS CONTRACTORS' INTERESTS IN THE FORMATION OF ELECTRICAL STANDARDS BUSINESS DEVELOPMENT HELPS PROMOTE CONTRACTORS' INTERESTS TO A VARIETY OF CUSTOMER AUDIENCES

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

CONVENTION AND EXPOSITIONS -- NECA'S CONVENTION AND TRADE SHOW PROVIDES AN OPPORTUNITY FOR MEMBERS TO EXCHANGE IDEAS AND ATTEND EDUCATIONAL SEMINARS, IT IS ALSO AN EXCEPTIONAL SHOWCASE FOR THE LATEST ELECTRICAL PRODUCTS AND SERVICES

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

MANAGEMENT EDUCATION INSTITUTE MEI HELPS NECA'S MEMBERS RUN THEIR BUSINESSES BETTER BY OFFERING EXPERT-LED MANAGEMENT TRAINING FOR EMPLOYEES AT ALL LEVELS WORKING WITHIN THE ELECTRICAL CONTRACTING INDUSTRY, PUBLISHING IMPORTANT BUSINESS DATA, PROVIDING TOOLS FOR MEMBERS TO ACCURATELY ACCOUNT FOR JOB COSTS, AND PUBLISHING THE MANUAL OF LABOR UNITS AND THE FINANCIAL PERFORMANCE REPORT

4d

















Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses \$

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	1	No
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)?  . . . . .	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  . . . . .	3	No
4	<b>Section 501(c)(3) organizations.</b> 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 I  . . . . .	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II  . . . . .	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  . . . . .	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  . . . . .	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  . . . . .	10	No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	No
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	Yes
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? If "Yes," complete Schedule G, Part I . . . . .	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	19	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements . . . . .	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			Yes	No
Check if Schedule O contains a response to any question in this Part V			<input type="checkbox"/>	<input type="checkbox"/>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a105		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	2a78		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes	
4a	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	Yes	
b	If "Yes," enter the name of the foreign country: AC See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).	7a		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d	If "Yes," indicate the number of Forms 8282 filed during the year.			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a	Did the organization make any taxable distributions under section 4966?	9b		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter	10a		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10b		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.			
11	Section 501(c)(12) organizations. Enter	11a		
a	Gross income from members or shareholders.	11b		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13b		
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.	13c		
c	Enter the aggregate amount of reserves on hand.			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	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?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	Yes	
10b	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?	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	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	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	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?		No
16b	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?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MD
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	THE ORGANIZATION 3 BETHESDA METRO CENTER NO 1100 BETHESDA, MD 208146302 (301) 657-3110

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

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

Form **990** (2011)



## Part VII

<b>1b</b>	<b>Sub-Total . . . . .</b>	<b>▼</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A . . . . .</b>	<b>▼</b>			
<b>d</b>	<b>Total (add lines 1b and 1c) . . . . .</b>	<b>▼</b>	2,180,034	210,533	413,979

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 34

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	4	Yes
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	5	No

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CAL HART COMPANY 761 PALMER AVENUE PALMER PROFESSIO HOLMDEL, NJ 07733	ADVERTISING REPRESENTATIVE	293,989
HFI LLC 210 SMOKERISE TRACE PEACHTREE CITY, GA 30269	EXHIBIT SALES	256,242
MATRIX MEDIA GROUP INTERNATIONAL LLC PO BOX 25904 ALEXANDRIA, VA 22313	WEB DESIGN SERVICES	186,872
SRDS PO BOX 8500-8601 PHILADELPHIA, PA 191788601	ADVERTISING	150,504

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 4

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	200,000				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f . . . . .			200,000			
Program Service Revenue			Business Code					
	2a	MEMBERSHIP DUES	900099	11,622,082	11,622,082			
	b	ADVERTISING INCOME	900099	6,143,429		6,087,430	55,999	
	c	ANNUAL CONVENTION	900099	4,424,338	4,424,338			
	d	EDUCATIONAL COURSES	900099	688,712	688,712			
	e	PUBLICATION	541800	431,685	5,700	425,985		
	f	All other program service revenue		103,742			103,742	
	g	Total. Add lines 2a-2f . . . . .			23,413,988			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .			509,474		509,474	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .			31,088		31,088	
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) . . . . .						
	7a	(i) Securities		(ii) Other				
		9,802,222						
		9,661,947						
		140,275						
	d	Net gain or (loss) . . . . .			140,275		140,275	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .		a				
	b	Less direct expenses . . . . .		b				
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .		a				
	b	Less direct expenses . . . . .		b				
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances . . . . .		a				
			447,581					
b	Less cost of goods sold . . . . .		b					
			0					
c	Net income or (loss) from sales of inventory . .			447,581	447,581			
Miscellaneous Revenue		Business Code						
11a	PAC ADMINISTRATION FUN		900099	113,964	113,964			
b	MISCELLANEOUS INCOME		900099	70,770			70,770	
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .			184,734				
12	Total revenue. See Instructions . . . . .			24,927,140	17,302,377	6,513,415	911,348	

Part IX

Statement of Functional Expenses

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

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	350,000			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees . . . . .	1,647,272			
6	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	5,505,032			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	1,125,426			
9	Other employee benefits . . . . .	690,097			
10	Payroll taxes . . . . .	555,498			
11	Fees for services (non-employees)				
a	Management . . . . .				
b	Legal . . . . .	163,022			
c	Accounting . . . . .	109,357			
d	Lobbying . . . . .				
e	Professional fundraising See Part IV, line 17 . . . . .				
f	Investment management fees . . . . .	52,054			
g	Other . . . . .	1,803,088			
12	Advertising and promotion . . . . .	181,157			
13	Office expenses . . . . .	1,185,451			
14	Information technology . . . . .	213,417			
15	Royalties . . . . .				
16	Occupancy . . . . .	1,064,385			
17	Travel . . . . .	1,264,362			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19	Conferences, conventions, and meetings . . . . .	4,397,080			
20	Interest . . . . .				
21	Payments to affiliates . . . . .				
22	Depreciation, depletion, and amortization . . . . .	107,903			
23	Insurance . . . . .	89,831			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
a	FAS 158 ADJUSTMENT	2,032,689			
b	COMMISSIONS	1,999,654			
c	PRINTING & PUBLICATIONS	1,300,596			
d	TAXES & LICENSES	380,794			
e					
f	All other expenses	403,531			
25	Total functional expenses. Add lines 1 through 24f	26,621,696			
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			714,793	1	607,808
	2	Savings and temporary cash investments . . . . .			3,953,703	2	4,393,469
	3	Pledges and grants receivable, net . . . . .				3	
	4	Accounts receivable, net . . . . .			2,851,463	4	2,537,550
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .				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 Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .				7	
	8	Inventories for sale or use . . . . .			390,110	8	378,474
	9	Prepaid expenses and deferred charges . . . . .			819,577	9	856,798
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D . . . . .	10a	2,905,049	186,008	10c	431,052
	b	Less accumulated depreciation . . . . .	10b	2,473,997			
	11	Investments—publicly traded securities . . . . .			19,308,760	11	17,470,062
	12	Investments—other securities. See Part IV, line 11 . . . . .				12	
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			626,659	15	598,520
	16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			28,851,073	16	27,273,733
Liabilities	17	Accounts payable and accrued expenses . . . . .			1,713,041	17	1,607,984
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			436,145	19	498,044
	20	Tax-exempt bond liabilities . . . . .				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				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 D . . . . .			8,821,908	25	9,329,710
	26	Total liabilities. Add lines 17 through 25 . . . . .			10,971,094	26	11,435,738
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			17,879,979	27	15,837,995
	28	Temporarily restricted net assets . . . . .				28	
	29	Permanently restricted net assets . . . . .				29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			17,879,979	33	15,837,995
	34	Total liabilities and net assets/fund balances . . . . .			28,851,073	34	27,273,733

Part XI Reconciliation of Net Assets

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	24,927,140
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,621,696
3	Revenue less expenses Subtract line 2 from line 1	3	-1,694,556
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	17,879,979
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-347,428
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	15,837,995

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> 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?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:  
Software Version:  
EIN: 53-0115267  
Name: NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION  
INC

Form 990, Special Condition Description:

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

4d. Other program services
(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ ) MANAGEMENT EDUCATION INSTITUTE MEI HELPS NECA'S MEMBERS RUN THEIR BUSINESSES BETTER BY OFFERING EXPERT- LED MANAGEMENT TRAINING FOR EMPLOYEES AT ALL LEVELS WORKING WITHIN THE ELECTRICAL CONTRACTING INDUSTRY, PUBLISHING IMPORTANT BUSINESS DATA, PROVIDING TOOLS FOR MEMBERS TO ACCURATELY ACCOUNT FOR JOB COSTS, AND PUBLISHING THE MANUAL OF LABOR UNITS AND THE FINANCIAL PERFORMANCE REPORT

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES FREEMAN BOARD OF GOVERNORS	1 00	X						0	0	0
MICK E MANNING BOARD OF GOVERNORS	1 00	X						0	0	0
GREGORY RUSSELL BOARD OF GOVERNORS	1 00	X						0	0	0
JOHN F KOSTYO BOARD OF GOVERNORS	1 00	X						0	0	0
JIMMY D COKER BOARD OF GOVERNORS	1 00	X						0	0	0
JOHN L MUSSELL BOARD OF GOVERNORS	1 00	X						0	0	0
RICK HENRY BOARD OF GOVERNORS	1 00	X						0	0	0
DAVID J HELSEL BOARD OF GOVERNORS	1 00	X						0	0	0
FRANK E SCHETTER BOARD OF GOVERNORS	1 00	X						0	0	0
CARL JARRETT BOARD OF GOVERNORS	1 00	X						0	0	0
JOHN S EVERSON BOARD OF GOVERNORS	1 00	X						0	0	0
FREDERICK A JENSEN BOARD OF GOVERNORS	1 00	X						0	0	0
LEWIS FRAIN BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT L DOUGLASS BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT SMITH BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS L HEDGES BOARD OF GOVERNORS	1 00	X						0	0	0
KENNETH A PAGANINI BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT GONZALES BOARD OF GOVERNORS	1 00	X						0	0	0
PATRICK L MARK BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS G ISPAS BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS L HEDGES BOARD OF GOVERNORS	1 00	X						0	0	0
KENNETH A PAGANINI BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT GONZALES BOARD OF GOVERNORS	1 00	X						0	0	0
PATRICK L MARK BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS G ISPAS BOARD OF GOVERNORS	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CRAIG CLARK BOARD OF GOVERNORS	1 00	X						0	0	0
JAMES PETERSON BOARD OF GOVERNORS	1 00	X						0	0	0
IAN M LOGIE BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL D TOMAN BOARD OF GOVERNORS	1 00	X						0	0	0
SCOTT MADDOX BOARD OF GOVERNORS	1 00	X						0	0	0
ANDY DELAPARTE BOARD OF GOVERNORS	1 00	X						0	0	0
DAVID LONG BOARD OF GOVERNORS	1 00	X						0	0	0
JONATHAN R BORDEN BOARD OF GOVERNORS	1 00	X						0	0	0
RILO STEPHENS BOARD OF GOVERNORS	1 00	X						0	0	0
TIM MUNDY BOARD OF GOVERNORS	1 00	X						0	0	0
BRAD BUTLER BOARD OF GOVERNORS	1 00	X						0	0	0
STEVE T WATANABE BOARD OF GOVERNORS	1 00	X						0	0	0
JEFF L WHEELER BOARD OF GOVERNORS	1 00	X						0	0	0
STEVE C GARDNER SR BOARD OF GOVERNORS	1 00	X						0	0	0
BRADLEY R WEIR BOARD OF GOVERNORS	1 00	X						0	0	0
LAWRENCE H CLENNON BOARD OF GOVERNORS	1 00	X						0	0	0
DANIEL M WILCOX BOARD OF GOVERNORS	1 00	X						0	0	0
CRAIG R MARTIN BOARD OF GOVERNORS	1 00	X						0	0	0
JOHN CORSIGLIA BOARD OF GOVERNORS	1 00	X						0	0	0
DANIEL F PALMER BOARD OF GOVERNORS	1 00	X						0	0	0
JEFF W CARDWELL BOARD OF GOVERNORS	1 00	X						0	0	0
ANTHONY J MALONEY III BOARD OF GOVERNORS	1 00	X						0	0	0
DAN HARPENAU BOARD OF GOVERNORS	1 00	X						0	0	0
DONALD D BARRIGAR BOARD OF GOVERNORS	1 00	X						0	0	0
DOUG HAGUE BOARD OF GOVERNORS	1 00	X						0	0	0



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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
WILLIAM B LICH BOARD OF GOVERNORS	1 00	X						0	0	0
HERMON L MILTON BOARD OF GOVERNORS	1 00	X						0	0	0
KIRK DAVIS BOARD OF GOVERNORS	1 00	X						0	0	0
MARTIN WEST BOARD OF GOVERNORS	1 00	X						0	0	0
EJ DEUBLER III BOARD OF GOVERNORS	1 00	X						0	0	0
JAMES M STARK SR BOARD OF GOVERNORS	1 00	X						0	0	0
JAMES H CORNELIUS BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS M DRISCOLL BOARD OF GOVERNORS	1 00	X						0	0	0
JONATHAN OSTROW BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS SCHMITT BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT J TURNER BOARD OF GOVERNORS	1 00	X						0	0	0
JERRY DANCEY BOARD OF GOVERNORS	1 00	X						0	0	0
PAUL KOSMIDES BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL HANSON BOARD OF GOVERNORS	1 00	X						0	0	0
BLAIR MAHAN BOARD OF GOVERNORS	1 00	X						0	0	0
GLADE MCINNIS BOARD OF GOVERNORS	1 00	X						0	0	0
JERRY W ROOT BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT J UNTERREINER BOARD OF GOVERNORS	1 00	X						0	0	0
MICK CABBAGE BOARD OF GOVERNORS	1 00	X						0	0	0
GARY DEMMEL BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT J LISOWSKI BOARD OF GOVERNORS	1 00	X						0	0	0
NEIL C VITALE BOARD OF GOVERNORS	1 00	X						0	0	0
GEORGE BRESTLE BOARD OF GOVERNORS	1 00	X						0	0	0
BOB MCDADE BOARD OF GOVERNORS	1 00	X						0	0	0
JOSEPH F FARINA BOARD OF GOVERNORS	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN S KOGUT BOARD OF GOVERNORS	1 00	X						0	0	0
JEFFREY L SEIDEL BOARD OF GOVERNORS	1 00	X						0	0	0
DONALD W LESLIE JR BOARD OF GOVERNORS	1 00	X						0	0	0
STEVEN LAZZARO BOARD OF GOVERNORS	1 00	X						0	0	0
LEO J VILLENEUVE BOARD OF GOVERNORS	1 00	X						0	0	0
BRIAN W HAAS BOARD OF GOVERNORS	1 00	X						0	0	0
LINDSAY T MILLS BOARD OF GOVERNORS	1 00	X						0	0	0
JOSEPH R PELLERITE BOARD OF GOVERNORS	1 00	X						0	0	0
GREGORY A RICK BOARD OF GOVERNORS	1 00	X						0	0	0
RONALD D BECKER BOARD OF GOVERNORS	1 00	X						0	0	0
WILLIAM J MEYER BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL B JOYCE BOARD OF GOVERNORS	1 00	X						0	0	0
DAVID A DICKEY BOARD OF GOVERNORS	1 00	X						0	0	0
LAVERNE A WOLGAMOTT BOARD OF GOVERNORS	1 00	X						0	0	0
RUSS ZIMMERMAN BOARD OF GOVERNORS	1 00	X						0	0	0
JOHN S FRANTZ BOARD OF GOVERNORS	1 00	X						0	0	0
LARRY K LAFAVE BOARD OF GOVERNORS	1 00	X						0	0	0
ROB CHERRY BOARD OF GOVERNORS	1 00	X						0	0	0
KARL JENSEN BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL J HAMILTON BOARD OF GOVERNORS	1 00	X						0	0	0
THOMAS G MOORE JR BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT J BRUCE BOARD OF GOVERNORS	1 00	X						0	0	0
HENRY KANDZERSKI JR BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL A GRANT BOARD OF GOVERNORS	1 00	X						0	0	0
DAVID N ESTES SR BOARD OF GOVERNORS	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JIM SUNVISON BOARD OF GOVERNORS	1 00	X						0	0	0
RALPH E KENDRICK JR BOARD OF GOVERNORS	1 00	X						0	0	0
STEVE HARGROVE BOARD OF GOVERNORS	1 00	X						0	0	0
MARVIN L GROVES II BOARD OF GOVERNORS	1 00	X						0	0	0
ROBERT A CORBO BOARD OF GOVERNORS	1 00	X						0	0	0
WAYNE BRICKMEYER BOARD OF GOVERNORS	1 00	X						0	0	0
TOM WILEY BOARD OF GOVERNORS	1 00	X						0	0	0
JIM HAVELL BOARD OF GOVERNORS	1 00	X						0	0	0
JOSEPH B GUEDRI III BOARD OF GOVERNORS	1 00	X						0	0	0
PAUL C SORENSEN BOARD OF GOVERNORS	1 00	X						0	0	0
ANDREW R DAHLMAN BOARD OF GOVERNORS	1 00	X						0	0	0
MARVIN D NELSON BOARD OF GOVERNORS	1 00	X						0	0	0
ROCKY SHARP BOARD OF GOVERNORS	1 00	X						0	0	0
JAMES A SMITH BOARD OF GOVERNORS	1 00	X						0	0	0
MICHAEL KELLIHER BOARD OF GOVERNORS	1 00	X						0	0	0
GERALD W SCHULZ BOARD OF GOVERNORS	1 00	X						0	0	0
BOB BLACKHAM BOARD OF GOVERNORS	1 00	X						0	0	0
REX FERRY PRESIDENT	10 00	X		X				0	0	0
DENNIS F QUEBE PRESIDENT ELECT	10 00	X		X				0	0	0
DAVID R MACKAY VICE PRESIDENT	10 00	X		X				0	0	0
GREG E STEWART VICE PRESIDENT	10 00	X		X				0	0	0
ALEX OWEN VICE PRESIDENT	10 00	X		X				0	0	0
DAVID HARDT VICE PRESIDENT	10 00	X		X				0	0	0
JOHN LAMBERT VICE PRESIDENT	10 00	X		X				0	0	0
GEORGE ADAMS VICE PRESIDENT	10 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DANIEL G SCHAEFFER VICE PRESIDENT	10 00	X		X				0	0	0
RAYMOND K FRIEND VICE PRESIDENT	10 00	X		X				0	0	0
STANLEY R LAZARIAN VICE PRESIDENT	10 00	X		X				0	0	0
GARY A TUCCI VICE PRESIDENT	10 00	X		X				0	0	0
RON A AUTREY VICE PRESIDENT	10 00	X		X				0	0	0
JOHN M GRAU CHIEF EXECUTIVE OFFICER	40 00			X				525,529	0	79,369
J MICHAEL THOMPSON SECRETARY-TREASURER	40 00			X				206,629	0	40,006
DANIEL G WALTER VICE PRESIDENT, COO	40 00			X				245,061	0	43,055
RUSSELL J ALESSI PRESIDENT-ELECTRI INTL	40 00			X				0	210,533	37,139
GEARY M HIGGINS VP, LABOR RELATIONS	40 00				X			221,396	0	38,555
WILLIAM C ORGILL EXECUTIVE DIRECTOR	40 00					X		150,401	0	32,825
JOHN W MAISEL PUBLISHER	40 00					X		157,270	0	33,214
RICHARD A PARENTI EXECUTIVE DIRECTOR	40 00					X		195,999	0	38,131
ROBERT D GIBSON EXECUTIVE DIRECTOR	40 00					X		197,758	0	34,260
B DAVID ROBERTS EXECUTIVE DIRECTOR	40 00					X		279,991	0	37,425

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.

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

Name of the organization NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC	Employer identification number 53-0115267
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1

Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2

Political expenditures ▶ \$
- 3

Volunteer hours

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

- 1

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a

Was a correction made? ☐ Yes ☐ No
- b

If "Yes," describe in Part IV

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

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4

Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- Check
- ☐
- if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- 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.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	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.														
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	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 \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
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 \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

		(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			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
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
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

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	11,622,082
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).		
a	Current year	2a	304,360
b	Carryover from last year	2b	
c	Total	2c	304,360
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	304,360

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
------------	------------------	-------------

SCHEDULE D  
(Form 990)

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC

Employer identification number

53-0115267

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► \_\_\_\_\_

4

Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► \_\_\_\_\_

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year  
► \$ \_\_\_\_\_

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X

► \$ \_\_\_\_\_

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b

Assets included in Form 990, Part X

► \$ \_\_\_\_\_

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

Cat No 52283D

Schedule D (Form 990) 2011



Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance . . . . .				
b	Contributions . . . . .				
c	Investment earnings or losses . . . . .				
d	Grants or scholarships . . . . .				
e	Other expenditures for facilities and programs . . . . .				
f	Administrative expenses . . . . .				
g	End of year balance . . . . .				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations . . . . .

(ii) related organizations . . . . .

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land . . . . .			
b	Buildings . . . . .			
c	Leasehold improvements . . . . .			
d	Equipment . . . . .			
e	Other . . . . .	2,905,049	2,473,997	431,052
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				431,052



Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	24,927,140
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,621,696
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,694,556
4	Net unrealized gains (losses) on investments	4	-347,428
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	-347,428
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,041,984

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	24,527,658
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	-347,428
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	-347,428
3	Subtract line 2e from line 1 . . . . .	3	24,875,086
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a	52,054
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	52,054
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	24,927,140

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements . . . . .	1	26,569,642
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	0
3	Subtract line 2e from line 1 . . . . .	3	26,569,642
4	Amounts 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	52,054
b	Other (Describe in Part XIV) . . . . .	4b	
c	Add lines 4a and 4b . . . . .	4c	52,054
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	26,621,696

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part 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 additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND THEREFORE, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC

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

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Employer identification number  
53-0115267

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount 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) ELECTRI INTERNATIONAL3 BETHESDA METRO CENTER BETHESDA,MD 20814	52-1643734	501(C)(3)	350,000		FMV	ADMINISTRATIVE SUPPORT	SUPPORT ONGOING EFFORTS OF ELECTRI INTERNATIONAL TO ADVANCE THE ELECTRICAL INDUSTRY

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

1

3

Enter total number of other organizations listed in the line 1 table . . . . .

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) if additional space is needed.

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

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 NECA PROVIDES CONTRIBUTED ADMINISTRATIVE SUPPORT TO ELECTRI INTERNATIONAL NECA MANAGEMENT AND GOVERNING BODY RECEIVE PERIODIC UPDATES FROM ELECTRI INTERNATIONAL ON PROGRAM PURPOSE ACHIEVEMENTS

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC

Employer identification number  
53-0115267

Part I

Questions Regarding Compensation

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

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN M GRAU	(i)	478,541	25,000	21,988	44,025	35,344	604,898	0
	(ii)	0	0	0	0	0	0	0
(2) J MICHAEL THOMPSON	(i)	181,734	6,001	18,894	21,113	18,893	246,635	0
	(ii)	0	0	0	0	0	0	0
(3) DANIEL G WALTER	(i)	221,224	10,001	13,836	25,601	17,454	288,116	0
	(ii)	0	0	0	0	0	0	0
(4) RUSSELL J ALESSI	(i)	0	0	0	0	0	0	0
	(ii)	200,800	0	9,733	22,220	14,919	247,672	0
(5) GEARY M HIGGINS	(i)	196,731	7,000	17,665	22,608	15,947	259,951	0
	(ii)	0	0	0	0	0	0	0
(6) WILLIAM C ORGILL	(i)	144,967	2,000	3,434	16,628	16,197	183,226	0
	(ii)	0	0	0	0	0	0	0
(7) JOHN W MAISEL	(i)	148,600	5,000	3,670	17,325	15,889	190,484	0
	(ii)	0	0	0	0	0	0	0
(8) RICHARD A PARENTI	(i)	186,000	6,000	3,999	21,450	16,681	234,130	0
	(ii)	0	0	0	0	0	0	0
(9) ROBERT D GIBSON	(i)	181,800	4,500	11,458	20,625	13,635	232,018	0
	(ii)	0	0	0	0	0	0	0
(10) B DAVID ROBERTS	(i)	188,700	6,000	85,291	20,790	16,635	317,416	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINES 4A-B	JOHN GRAU HAS A DEFERRED SEVERANCE PLAN. THE TOTAL AMOUNT ACCRUED FOR THE PLAN AT 12/31/2011 WAS \$101,301. B. DAVID ROBERTS TOOK A WITHDRAWAL OF \$80,880 FROM THE 457 PLAN.



**SCHEDULE O**  
(Form 990 or 990-EZ)Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.**  
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

**2011****Open to Public  
Inspection**Name of the organization  
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC**Employer identification number**

53-0115267

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	(A) REGULAR MEMBERSHIP REGULAR MEMBERSHIP SHALL BE AVAILABLE TO PERSONS, FIRMS, CORPORATIONS, AND OTHER PERMANENTLY ESTABLISHED ENTITIES WHOSE PRINCIPAL BUSINESS IS ELECTRICAL POWER, COMMUNICATIONS OR CONTROLS CONTRACTING AND WHO HAVE AN ESTABLISHED PLACE OF BUSINESS AS DEFINED BY THE BOARD OF GOVERNORS REGULAR MEMBERS IN GOOD STANDING SHALL BE AUTHORIZED TO CAST THE FOLLOWING VOTES BY BALLOT IN ALL MATTERS REFERRED TO MEMBERS BY THE ASSOCIATION AND/OR CHAPTERS OF THE ASSOCIATION AND REQUIRING A VOTE BY BALLOT BASED UPON "MANHOURS" IN THE PRIOR CALENDAR YEAR, REGULAR MEMBER, REPORTING (1) 1 TO 75,000 MANHOURS SHALL HAVE ONE (1) VOTE, (2) 75,001 TO 150,000 MANHOURS SHALL HAVE TWO (2) VOTES AND (3) IN EXCESS OF 150,000 MANHOURS SHALL HAVE THREE (3) VOTES EACH REGULAR MEMBER SHALL DESIGNATE AN "ACCREDITED REPRESENTATIVE" WHO IS AN OWNER, PARTNER, OFFICER OR OCCUPANT OF ANOTHER SENIOR POSITION THE "ACCREDITED REPRESENTATIVE" SHALL REPRESENT AND VOTE ON BEHALF OF THE REGULAR MEMBER (B) HONORARY MEMBERSHIP HONORARY MEMBERSHIP SHALL BE AVAILABLE TO ANY PERSON ELECTED TO SUCH STATUS BY THE BOARD OF GOVERNORS FOR DISTINGUISHED SERVICE TO THE ELECTRICAL INDUSTRY (C) VETERAN MEMBERSHIP VETERAN MEMBERSHIP SHALL BE AVAILABLE TO PERSONS HAVING REPRESENTED A REGULAR MEMBER IN GOOD STANDING FOR AT LEAST FIFTEEN (15) YEARS AND NOT CURRENTLY ENGAGED IN THE ELECTRICAL CONTRACTING BUSINESS VETERAN MEMBERS SHALL BE ELECTED BY THE EXECUTIVE COMMITTEE (D) INDIVIDUAL MEMBERSHIP INDIVIDUAL MEMBERSHIP SHALL BE AVAILABLE TO INDIVIDUALS AND/OR OTHER ENTITIES MEETING ALL REGULAR MEMBERSHIP REQUIREMENTS FOR MEMBERSHIP IN THIS ASSOCIATION BUT {I} NOT BEING ACCEPTED FOR MEMBERSHIP IN A CHAPTER OF THIS ASSOCIATION OR {II} HAVING ONCE HELD MEMBERSHIP IN A CHAPTER OF THIS ASSOCIATION, DENIED CONTINUATION OF SUCH MEMBERSHIP APPLICANTS FOR INDIVIDUAL MEMBERSHIP MUST BE APPROVED BY A MAJORITY VOTE OF THE EXECUTIVE COMMITTEE BEFORE APPROVING INDIVIDUAL MEMBERSHIPS, THE EXECUTIVE COMMITTEE SHALL COMMUNICATE FULLY WITH CHAPTERS CONCERNED A PROSPECTIVE INDIVIDUAL MEMBER WILL HAVE THE OPPORTUNITY TO RESPOND IN WRITING TO ANY CHAPTER POSITION AND TO BE HEARD BY THE EXECUTIVE COMMITTEE AND HAVE THE RIGHT OF APPEAL TO THE BOARD OF GOVERNORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF GOVERNORS IS THE ULTIMATE GOVERNING BODY OF THIS ASSOCIATION AND SHALL CONTROL ALL ITS ASSETS AND AFFAIRS AND FORMULATE ITS POLICIES AND PROGRAMS THE BOARD OF GOVERNORS SHALL CONSIST OF (A) ONE (1) GOVERNOR ELECTED FROM AND BY THE MEMBERS OF EACH CHAPTER EMPOWERED TO ELECT GOVERNORS AFFILIATED WITH THIS ASSOCIATION (B) THE PRESIDENT OF THIS ASSOCIATION (C) THE PRESIDENT ELECT (D) THE DISTRICT VICE PRESIDENTS (E) THE VICE PRESIDENT AT LARGE SELECTION OF GOVERNORS - EACH CHAPTER LOCATED IN AN ODD-NUMBERED DISTRICT SHALL, IN JANUARY OF EACH ODD-NUMBERED YEAR, SELECT ONE OF ITS ACTIVE REGULAR MEMBERS TO SERVE AS A MEMBER OF THE BOARD OF GOVERNORS OF THIS ASSOCIATION FOR A TERM OF TWO (2) YEARS EACH CHAPTER LOCATED IN AN EVEN-NUMBERED DISTRICT SHALL, IN JANUARY OF EACH EVEN-NUMBERED YEAR, SELECT ONE OF ITS ACTIVE REGULAR MEMBERS TO SERVE AS A MEMBER OF THE BOARD OF GOVERNORS OF THIS ASSOCIATION FOR A TERM OF TWO (2) YEARS GOVERNORS SHALL TAKE OFFICE UPON SELECTION AND NOTIFICATION SENT TO THE SECRETARY/TREASURER IN WRITING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	NECA REVIEWED THE INITIAL DRAFT OF THE FORM 990 WITH THE AUDIT COMMITTEE VIA CONFERENCE CALL. UPON APPROVAL BY THE AUDIT COMMITTEE, NECA FORWARDED THE DRAFT OF THE FORM 990 TO THE EXECUTIVE COMMITTEE VIA E-MAIL AND ANSWERED ANY QUESTIONS THAT AROSE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	<p>THE NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION EXECUTIVE COMMITTEE, BOARD OF GOVERNORS, COMMITTEES, TASK FORCES, WORKING GROUPS AND OTHERS IN THE NECA GOVERNANCE STRUCTURE, AS WELL AS ALL NECA EMPLOYEES MUST ACT AT ALL TIMES IN THE BEST INTERESTS OF NECA AND NOT FOR PERSONAL OR THIRD-PARTY GAIN OR FINANCIAL ENRICHMENT. THE NECA EXECUTIVE COMMITTEE HAS THE EXCLUSIVE AUTHORITY AND RESPONSIBILITY TO DECIDE AN APPROPRIATE REACTION TO THE DISCLOSURE. THE EXECUTIVE COMMITTEE MAY, AT ITS DISCRETION, CHOOSE AMONG THE FOLLOWING REACTIONS. DISCLOSURE OF THE DISCLOSURE REGARDING A VOLUNTEER'S OTHER INTEREST IS WORTHY OF THE EXECUTIVE COMMITTEE'S ATTENTION, BUT THE DISCLOSURE ITSELF, AND THE EXECUTIVE COMMITTEE'S AWARENESS OF THE DISCLOSURE, IS CONSIDERED SUFFICIENT TO CORRECT FOR ANY BIAS THAT IT MIGHT ENTAIL. IN SHORT, THE EXECUTIVE COMMITTEE WOULD LIKELY DECIDE THAT ALTHOUGH THE VOLUNTEER CLEARLY HAS SOME OTHER INTEREST, THE EXECUTIVE COMMITTEE WILL SIMPLY TAKE THE INFORMATION INTO ACCOUNT AS THE MEMBER PARTICIPATES IN DECISION-MAKING. RECUSAL. THE OTHER INTEREST THAT HAS BEEN DISCLOSED AFFECTS AN IMPORTANT POLICY OR PROGRAM FOR THE ORGANIZATION. TO ASSURE THE ORGANIZATION AND ITS CONSTITUENCY THAT EXECUTIVE COMMITTEE DECISION-MAKING IS WITHOUT BIAS, IT IS BEST FOR THE VOLUNTEER TO RECUSE HIMSELF/HERSELF WHEN THE EXECUTIVE COMMITTEE TAKES REPORTS, DEBATES, OR MAKES DECISIONS, REGARDING THAT POLICY OR PROGRAM. IN SHORT, THE VOLUNTEER WOULD BE ASKED TO SIT OUT ANY WORK OF THE EXECUTIVE COMMITTEE IN THE AREA WHERE HE/SHE HAS CONFLICTING INTERESTS. RESIGNATION. THE OTHER INTEREST RELATES TO A CONTINUING, PERVASIVE, AND IMPORTANT EXECUTIVE COMMITTEE FUNCTION, ONE THAT CANNOT EASILY BE ISOLATED ON AN AGENDA SO AS TO PERMIT RECUSAL. IN THIS CASE, THE MEMBER MIGHT BE ASKED TO RESIGN HIS/HER POSITION, SINCE THIS IS THE ONLY WAY TO ENSURE THAT THE OTHER INTEREST DOES NOT INTRUDE UPON AND SKEW EXECUTIVE COMMITTEE DECISION-MAKING. WHILE THIS IS AN EXTREME AND RARE RESULT OF A MEMBER'S DISCLOSURE, IT IS SOMETIMES THE BEST AND ONLY FAIR ALTERNATIVE. EFFECTIVE JANUARY 2010, AT THE EXECUTIVE COMMITTEE'S FIRST MONTHLY MEETING OF EACH YEAR, THE COMMITTEE WILL REVIEW THE CONFLICT OF INTEREST POLICY. THE MEMBERS OF THE COMMITTEE WILL THEN HAVE THE OPPORTUNITY TO DISCUSS ANY POTENTIAL CONFLICTS.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE OF THE EXECUTIVE COMMITTEE, IS THE BODY CHARGED WITH REVIEWING THE CEO'S COMPENSATION PACKAGE. THE COMMITTEE REVIEWS MARKET DATA AND THE CEO'S PERFORMANCE IN DETERMINING WHAT AN EQUITABLE COMPENSATION PACKAGE SHOULD BE. IN TURN, THE CEO OF THE ASSOCIATION IS CHARGED WITH PREPARING EVALUATIONS FOR THE ORGANIZATION'S SENIOR MANAGEMENT TEAM BASED ON EACH INDIVIDUAL'S PERFORMANCE DURING THE CURRENT YEAR. THIS DATA IS THEN USED BY THE CEO, WITH ADVISEMENT FROM THE COMPENSATION COMMITTEE, IN SETTING COMPENSATION PACKAGES FOR THE ORGANIZATION'S OFFICERS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	NECA'S GOVERNING DOCUMENTS ARE AVAILABLE ON-LINE AT WWW.NECANET.ORG NECA'S CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -347,428

Identifier	Return Reference	Explanation
DESCRIPTION OF THE AUDIT COMMITTEE REVIEW PROCESS	FORM 990, PART XII, LINE 2C	THIS PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR



Identifier	Return Reference	Explanation
		FORM 990 PART VII & SCHEDULE J THE STAFF OFFICERS, KEY EMPLOYEES, AND HIGHLY COMPENSATED EMPLOYEES LISTED ON THIS RETURN ALSO PARTICIPATE IN THE NECA EMPLOYEE PENSION PLAN (THE PLAN) THE PLAN IS A QUALIFIED DEFINED BENEFIT PENSION PLAN BENEFITS UNDER THE PLAN WERE FROZEN EFFECTIVE DECEMBER 31, 2003

Identifier	Return Reference	Explanation
DESCRIPTION OF THE AUTHORITY DELEGATED TO THE EXECUTIVE COMMITTEE	FORM 990, PART VI, LINE 1A	THE EXECUTIVE COMMITTEE IS COMPRISED OF 12 MEMBER OFFICERS OF THE ASSOCIATION (ELECTED BY THE BOARD OF GOVERNORS) AND FOUR STAFF OFFICERS (IN AN ADVISORY CAPACITY) WHO WHEN MEETING AS THIS COMMITTEE, DOES SO AS OFFICERS OF THE NATIONAL ASSOCIATION WITH THE GOAL OF IMPLEMENTING THE OBJECTIVES, POLICIES AND PROGRAMS SET BY THE BOARD OF GOVERNORS THE COMMITTEE REPORTS TO, AND IS SUBJECT TO INSTRUCTIONS FROM, THE BOARD OF GOVERNORS

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC

Employer identification number  
53-0115267

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) ELECTRI INTERNATIONAL - THE FOUNDATION FOR 3 BETHESDA METRO CENTER SUITE 1100 BETHESDA, MD 208145330 52-1643734	RESEARCH ACTIVITIES	MD	501(C)(3)	170(B)(1)(A)(VI)	NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION		No
(2) ELECTRICAL CONSTRUCTION PAC 3 BETHESDA METRO CENTER SUITE 1100 BETHESDA, MD 208145330 52-1156960	SUPPORT CANDIDATES WHO BACK ISSUES IN THE ELECTRICAL CONSTRUCTION INDUSTRY	MD	527		NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION		No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate 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	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

Yes

No

No

No

No

No

No

No

No

No

No

No

Yes

No

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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.

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Form

4562

Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment  
Sequence No 179

Department of the Treasury  
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION INC	Business or activity to which this form relates  FORM 990 PAGE 10	Identifying number  53-0115267
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Part I

Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7	Listed property Enter the amount from line 29	7		
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9	Tentative deduction Enter the smaller of line 5 or line 8	9		
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10		
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13	Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions )

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III

MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV

Summary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	0
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	



Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No			
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost	
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25		
26 Property used more than 50% in a qualified business use									
		%							
		%							
		%							
27 Property used 50% or less in a qualified business use									
		%			S/L -				
		%			S/L -				
		%			S/L -				
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28			
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29		

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions )		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions)					
43 Amortization of costs that began before your 2011 tax year				43	
44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report				44	