

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



# 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

2011

Open to Public Inspection

A	For the	2011 calendar year, or tax year beginning and en	nding		
В	Check if applicable	C Name of organization		D Employer identific	ation number
,	applicable	CAROLINA ASPHALT PAVEMENT			
2	Addres				
Г	Name change			56-09	511901
F	Initial return		oom/suite	E Telephone number	
F	Termin	· ·	09	· ·	338-8004
F	⊸ated ∏Ameno	lad	ر ن		
F	lreturn ∏Applic	City or town, state or country, and ZIP + 4  RALEIGH, NC 27604		G Gross receipts \$	750,523.
<u> </u>	tion pendin			H(a) Is this a group re	
				for affiliates?	Yes X No
_		SAME AS C ABOVE		H(b) Are all affiliates incl	
		empt status 501(c)(3)X 501(c) ( 6 ) ◀ (Insert no.) 4947(a)(1) or	527		ist (see instructions)
		e: > WWW.CAROLINAASPHALT.ORG	T	H(c) Group exemption	
		organization: X Corporation	L Year o	of formation: 1949 M	State of legal domicile: NC
H	art I	Summary			
မွ	1	Bnefly describe the organization's mission or most significant activities: TO PRO			HOT MIXED
Governance		ASPHALT, AND TO PROVIDE MEMBERS WITH THE S			ABLE THEM
ern	2	Check this box 🕨 💹 if the organization discontinued its operations or disposed	d of more	than 25% of its net as:	
õ	3	Number of voting members of the governing body (Part VI, line 1a)		3	26
જ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	26
es	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	3
<u>₹</u>	6	Total number of volunteers (estimate if necessary)		6	3
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T-line 34.		7b	0.
		I RECEIVED 1		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	L_	0.	0.
	9	Program service revenue (Part VIII, line 2g) $(\frac{\varphi}{\tau})$	L	575,313.	669,317.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8,894.	13,360.
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line-12)	584,207.	682,677.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		15,400.	15,400.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ø	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		240,037.	317,878.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
be	Ь.		0.		
ũ	17	Other expenses (Part IX, column (A), lines 11a·11d, 11f·24e)		332,655.	301,446.
	t	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		588,092.	634,724.
	ŀ	Revenue less expenses Subtract line 18 from line 12		-3,885.	47,953.
Net Assets or Fund Balances	3	- C	Rad	ginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)	50	358,611.	398,195.
ASS	21	Total liabilities (Part X, line 16)		17,371.	11,223.
₩.	22	Net assets or fund balances Subtract line 21 from line 20		341,240.	386,972.
P	art II	Signature Block		341,240.	300,312.
-		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ante, and to the heet of my	knowledge and hallof it is
		t, and complete. Declaration of prepared (other than officer) is based on all information of which			Kilowieuge allu Dellei, it is
11 40	, 001100	t, and complete, bedy unity of prepary (office than officer) is based on an information of which	ii piepaiei	nas any knowledge.	1.//
e:~		Signature of office		Date	
Sig				56.0	
He	re	CHRISTIE BARBEE, EXECUTIVE DIRECTOR Type or print name and title			
			n	ate Check	PTIN
D-:	.	Print/Type preparer's name  KRISTEN HOYLE, CPA  Preparer's signature  Ch	-   "	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>-</b> 7
Pai			<b>.</b>	self-employed	
	parer	Firm's name THOMAS, JUDY & TUCKER P. A	0.0	Firm's EIN	56-1965804
use	Only	Firm's address 4700 FALLS OF NEUSE ROAD STITE 40	UU		0 571 5055
		RALEIGH, NC 27609		Phone no. 91	L9-571-7055
мa	v tne II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2011)

	990 (2011) ASSOCIATION, INC.	56-0511901	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission'		
	TO PROMOTE THE USE OF HOT MIXED ASPHALT, AND TO PROVIDE	MEMBERS WIT	<u>H</u>
	THE SERVICES THAT ENABLE THEM TO PRODUCE HIGH QUALITY PA		ALS
	IN THE MOST TECHNICALLY AND COST EFFICIENT MANNER. THE A	ASSOCIATION	
	REGULARLY SPONSORS SEMINARS AND WORKSHOPS ON A VARIETY OF	OF TECHNICAL	
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	X 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	X 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	5
	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 t	0
	others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$		)
	TO PROMOTE THE USE OF HOT MIXED ASPHALT, AND TO PROVIDE		
	THE SERVICES THAT ENABLE THEM TO PRODUCE HIGH QUALITY PA		ALS
	IN THE MOST TECHNICALLY AND COST EFFICIENT MANNER. THE A		
	REGULARLY SPONSORS SEMINARS AND WORKSHOPS ON A VARIETY (		
	SUBJECTS. CAPA TAKES AN ACTIVE ROLE IN GOVERNMENTAL AFF		
	REPRESENTING THE INDUSTRY'S VIEWPOINTS AND CONCERNS TO V		IC
	AGENGIES AND GOVERNING BODIES ON ENVIRONMENTAL, ENGINEER	RING, AND	
	LEGISLATIVE ISSUES.		
		<del></del>	
		<del></del>	
4b	(Code) (Expenses \$	Je \$	)
		·	
		<del></del>	<del></del>
		<del></del>	
		<del></del>	
4c	(Code) (Expenses \$	ue \$	)
			· /
4d	Other program services (Describe in Schedule O)		_
	(Expenses \$ Including grants of \$ ) (Revenue \$	1	

4e Total program service expenses ▶

Form 990 (2011) ASSOCIATION, INC.
Part IV Checklist of Required Schedules

1 le the organization described in section 501(c)(s) or 4947(s)(1) (other than a private foundation)?  1 "Yes," complete Schedule D, Schedule B, Schedule of Contribution?  2 le the organization required to complete Schedule D, Schedule of Contribution?  3 de the organization required in complete Schedule D, Part II  4 de complete Schedule D, Part II  5 le the organization required in complete Schedule D, Part II  6 bit of the organization as defined in Reviews Proceeding 8479 II "Yes," complete Schedule D, Part III  7 bit the organization as defined in Reviews Proceeding 8479 II "Yes," complete Schedule D, Part III  8 bit the organization annual man and videor divides or any similar funds or accounts? If "Yes," complete Schedule D, Part II  9 bit the organization manifian any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II  9 bit the organization manifian any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II  9 bit the organization manifian and part of the schedule of the organization manifian and part of the schedule D, Part III  9 bit the organization manifian and part of the schedule of the organization manifian and part of the schedule D, Part III  9 bit the organization manifian and part of the schedule of the schedule D, Part IV  10 bit the organization manifiant collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV  10 bit the organization manifiant and part III is the schedule D, Part IV  11 bit the organization manifiant organization in the schedule D, Part IV  12 bit the organization manifiant and part III is the schedule D, Part IV  13 bit the organization manifiant and part III is the schedule D, Part IV  14 bit the organization manifiant and part III is the schedule D, Part IV  15 bit the organization manifiant and manifiant or other itsibilities in Part IX, line 197 If "Yes," complete Schedule D, Part IV  16 bit the organization manifiant and manifian				Yes	No
2 Is the organization required to complete Schedule of Contributions?  Det 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 II  Section 801(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the stay year? If "Yes," complete Schedule C, Part II  Is the organization associated in Review Procedule C, Part III  Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advised in Review Procedule of any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advised on the distribution or any similar funds or accounts for which donors have the right to provide advised on the distribution or any similar funds or accounts for which donors have the right to provide advised on the distribution or any similar funds or accounts for which donors have the right to provide advised on the similar state of provides advised to provide advis	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dut the organization engage in decis of indirect political campaign activities on behalf of or in opposition to candidates for public offices if "Yes," complete Schedule C, Part I    4 Section 691(6)(3) organizations. Dut the organization engage in lobbying activities, or have a section 501(6)(4) election in effect during the tax year? II "Yes," complete Schedule C, Part II    5 Is the organization assection 501(6)(4), 501(6)(5), or 501(6)(8) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 96.199 II "Yes," complete Schedule C, Part II    5 Dut the organization maintain any donor adversed 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 II    5 Dut the organization report on hold a conservation essement, including assements to preserve open space, the environment, historical areas, or historic structures? If "Yes," complete Schedule D, Part II    5 Dut the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide corect counseling, debt management, credit organization, hold assets in temporally restricted endowments, permanent endowments, or quise-sendowments? If "Yes, complete Schedule D, Part V, II, VIII, X, or X as applicible.  5 Dut the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D, Part X, II    5 Dut the organization report an amount for orwestments - other securities in Part X, line 10° If "Yes," complete Schedule D, Part X    5 Dut the organization report an amount of or westments - other securities in Part X, line 10° If "Yes," complete Schedule D, Part X    5 Dut the organization report an amount for meetiments - ordanization report and amount of orwestments - ordanization report and amount for meetiments - organization and produce of the part X    6 Dut the organization		If "Yes," complete Schedule A	1_		X
public office? If "Yes," complete Schedule C, Part I  Section 501(R) capanizations. Dut the organization engage in lobbying activities, or have a section 501(R) electron in effect during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(d), 501(	2	· · · · · · · · · · · · · · · · · · ·	2		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule (P. Part III 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 96:187 If "Yes," complete Schedule (P. Part III is the organization and an any donor advised funds or any similar funds or accounts If If "Yes," complete Schedule (P. Part III is the organization received in any donor advised funds or any similar funds or accounts If "Yes," complete Schedule (P. Part III is Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not based in Part X, or provide credit counseling, dobt management, credit repair, or debt negotiation services? If "Yes," complete Schedule (P. Part III is organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quesiendowments? If "Yes," complete Schedule (P. Part III is organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quesiendowments? If "Yes," complete Schedule (P. Part IV is organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quesiendowments? If "Yes," complete Schedule (P. Part IV is organization report an amount for liand, buildings, and equipment in Part X, line 10º If "Yes," complete Schedule (P. Part IV is organization report an amount for investments - other securities in Part X, line 10º If "Yes," complete Schedule (P. Part IV is organization report an amount for investments - other securities in Part X, line 10º If "Yes," complete Schedule (P. Part X iii organization report an amount for investments - other securities in Part X, line 10º If "Yes," complete Schedule (P. Part X iii organization separate or cons	3		•		
during the tax year? If "Yes," complete Schedule C, Part II  b Is the organization a section \$50(e)(s), 501(e)(s), or \$51(e)(s),			3		X
5 Is the organization a section \$01(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 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or vives and the environment, historical relationship of the main and the environment, historical relationship of the environment, historical relationship of the main and the environment, historical resources, or other similar assets? If "Yes," complete Schedule D, Part IV  5 Did the organization report an amount in Part X, incl. 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  6 Did the organization answerd to any of the following questions is "Yes," then complete Schedule D, Part IV III the organization report an amount for investments - other securities in Part X, line 102 If "Yes," complete Schedule D, Part IV III X X III X X III X III X X I	4	···			
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the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		- 6		
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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 Did the organization device for or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasivendowments? If "Yes," complete Schedule D, Part V 11 If the organization is 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 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII 11 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 11 Did the organization report an amount for investments - other securities 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 11 Did the organization report an amount for other tassities 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 X VIII 11 Did the organization report an amount for other tashilities 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 X VIII 11 Did the organization report an amount for other tashilities in Part X, line 25? If "Yes," complete Schedule D, Part X VIII 11 Did the organization as school described in section 1700(h)(link)(line 12 that is 5% ormplete Schedule D, Part X VI	•		_		
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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 10 Did the organization, devictly or through a related organization, hold assests in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V, 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 X ID Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII ID Did the organization report an amount for other assets 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 ID 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 X ID Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X ID Did the organization obtain separate, independent audited financial statements for the tax year in International part of the part X, line 15 that is 5% or more of its total assets reported in Part X, line 16 that is 50 the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X X, IX, and XIII X  11b Was the organization mental an office, employees, or agents outside of the United States?  12c Did the organization mental and office, employees, or agents outside of the United States?  12d Did the organization mental and office, employees, or agents outside of the United States?  12d Did the organization report on Part I	_	·	Ω		v v
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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, Parts I and IV  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV  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  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  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  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	13		13		
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20a X		complete Schedule G, Part III	19		X
		- ·	20a		
	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Form 990 (2011) ASSOCIATION, INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
_	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
252	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
U	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	0.51		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	25b		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	000		v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		X
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	Ì	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		Ī	
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	]		
	Note. All Form 990 filers are required to complete Schedule O	_38	X	
		Form 5	9 <b>90</b> (2	2011)

# Form 990 (2011) ASSOCIATION, INC. [Pairt V] Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	- [35]	, ,	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		- x	ζ,
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	, , , , , , , , , , , , , , , , , , ,		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	, . , ,		£
	filed for the calendar year ending with or within the year covered by this return 2a 3	^		,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-	`
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>C</b> 1		
7	Organizations that may receive deductible contributions under section 170(c).	6b		
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?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		
-	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	,		
е	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.			
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b_		
10	Section 501(c)(7) organizations. Enter:			•
a b	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
·· a	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	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.		'	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			i
	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	

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Form 990 (2011) ASSOCIATION, INC. 56-0511901 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion A. Governing Body and Management								
		·	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26	٠.	, i						
	If there are material differences in voting rights among members of the governing body, or if the governing	Ι,							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			7					
b	Enter the number of voting members included in line 1a, above, who are independent  1b 26								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	,							
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5		X					
6	Did the organization have members or stockholders?	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х						
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X_						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	ļ							
	ın Schedule O how this was done	12c	X						
13	Did the organization have a written whistleblower policy?	13	Х						
14	Did the organization have a written document retention and destruction policy?	14	X						
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
	The organization's CEO, Executive Director, or top management official	15a	X						
b	Other officers or key employees of the organization	15b	Х						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		<u> X</u>					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
<u></u>	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►NC								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ıvaılab	le						
	for public inspection. Indicate how you made these available. Check all that apply								
	Own website X Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	icial						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ion 🕨							
	TERESA GRIFFITH - 919-838-8004 1101 HAYNES STREET STE 209 RALEIGH NC 27604								

Form 990 (2011) ASSOCIATION, INC.

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	(do	(C) Positio (do not check mor box, unless persor			) than	one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	stee or director	Institutional trustee	Officer e P P P P P P P P P P P P P P P P P P	Key employee	Highest compensated At/		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) TOM SPROULE								_		
BOARD MEMBER	1.00	X	<u> </u>			ļ	<u> </u>	0.	0,	0.
(2) EDDIE SPENCER	1 00					ļ				
EX-OFFICIO	1.00	X		Х			<u> </u>	0.	0.	0.
(3) BILL TOMLINSON	1 00	١,,					Ì			
BOARD MEMBER	1.00	X	-			├	<del> </del>	0.	0.	0.
(4) DAVID CARR	1 00	١,,				-	ł			
BOARD MEMBER	1.00	X	<u> </u>					0.	0.	0.
(5) DON DEDMON, SR.	1 00	\					ŀ		0	•
BOARD MEMBER	1.00	X					<u> </u>	0.	0.	0.
(6) R.E. BARNHILL, III	1.00	x							•	•
BOARD MEMBER	1.00	1				<del> </del>		0.	0.	0.
(7) LEE COOPER	1.00	X						0.	0.	0
BOARD MEMBER (8) ALLEN HENDRICKS	1.00	A					<b></b>	1	<u></u>	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(9) DREW BOGGS	1 2000					-	┢		•	<u>.</u>
VICE-PRESIDENT	1.00	x		х			ļ	0.	0.	0.
(10) TRAVIS PADGETT						$\vdash$	<u> </u>			
BOARD MEMBER	1.00	x						0.	0.	0.
(11) DANE HUFFMAN									<u> </u>	
BOARD MEMBER	1.00	X						0.	0.	0.
(12) JULE SMITH										
SECRETARY/TREASURER	1.00	X		Х				0.	0.	0.
(13) GEORGE MARSH		Γ							-	
BOARD MEMBER	1.00	X						0.	0.	0.
(14) JAMES ROSS										
BOARD MEMBER	1.00	X				L.		0.	0.	0.
(15) JOHN MCCAULEY										
BOARD MEMBER	1.00	X	Ш			ļ		0.	0.	0.
(16) TOM HUDSON										
BOARD MEMBER	1.00	X	Ш				_	0.	0.	0.
(17) DAVID JOHNSON										
BOARD MEMBER	1.00	X		لب				0.	0.	0.

Form 990 (2011) ASSOCIAT:	ION, INC	J.							56-0511	901	Р	age 8
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
(A) Name and title	(B) Average hours per week	(do	not c	(C Pos heck ss pe	C) Ition more rson i		one n an	(D) Reportable compensation from	(E) Reportable compensation from related		ed of	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org an	npensa rom th ganizat d relat anizat	ation ie tion ted
(18) GABE WHITAKER												
BOARD MEMBER	1.00	X		<u> </u>				0.	0.	<del></del>		0.
(19) WILEY ROARK	1							_	_			
BOARD MEMBER	1.00	X						0.	0.	<u>-</u>		<u>0.</u>
(20) ROBERT PARKER	1											_
BOARD MEMBER	1.00	X	<del>-</del> -					0.	0.	<u>;</u>		0.
(21) RICHARD RHODES	1 00	٠,							•			•
BOARD MEMBER	1.00	X.	-					0.	0.	-		0.
(22) TIM ROSE	1 00	-				}		0.	0			0
BOARD MEMBER	1.00	A		-			-	U .	0.	<del>'</del>		0.
(23) DALE ROSE BOARD MEMBER	1.00	v						0.	0.			0.
(24) JIM RUSSELL	1.00	1		-	-			0.	0.	<del></del>		
BOARD MEMBER	1.00	×		ĺ	1			0.	0.			0.
(25) IVAN CLAYTON	1.00	<del> </del>			<del> </del>	$\vdash$		- 0.		+		
PRESIDENT	1.00	x		х		1		0.	0.			0.
(26) GEORGE REAVES					† ·	1				<del>                                     </del>		
BOARD MEMBER	1.00	X						0.	0.	.		0.
1b Sub-total						<b>&gt;</b>		0.	0.			0.
c Total from continuation sheets to Part V	II, Section A					$\blacktriangleright$		164,800.	0.	. 1	9,5	42.
d Total (add lines 1b and 1c)						<b>&gt;</b>		164,800.	0.	. 1	9,5	42.
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed a	bove	e) wł	o re	eceived more than \$100	,000 of reportable			
compensation from the organization												1
											Yes	No
3 Did the organization list any former officer,			e, ke	y er	nplo	yee,	or I	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s										3	ļ	X
4 For any individual listed on line 1a, is the su									the organization			
and related organizations greater than \$15			•						d	4	X	<del> </del>
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				•		elati	ed organization or indivi	dual for services	_		x
Section B. Independent Contractors	ipiete Scriedai	<del>- 0 1</del>	<u>Ul St</u>	<i>3</i> (11	pers	-		-		5	L	<u> </u>
Complete this table for your five highest co	mpensated in	dene	ende	ent c	onti	racto	rs t	hat received more than	\$100,000 of compen	sation	from	
the organization Report compensation for	•	•								Janon		
(A)	,							(B)		((	C)	
Name and business	address	N	INC	3				Description of s	ervices	Compe		'n
							1	·				
	<del></del>						+	·	-			
					<u> </u>		-					

SEE PART VII, SECTION A CONTINUATION SHEETS

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2011)

ASSOCIATION, INC.

56-0511901

(A)	(B)		ployees, and Highest (C)					(D)	(E)	(F)		
<ul> <li>Name and title</li> </ul>	Average hours per	(cl			ition that		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other		
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
27) CHRISTIE B. BARBEE	1							1,-1,-	- ,	<del></del>		
XECUTIVE DIRECTOR	40.00		-	Х				164,800.	0.	19,542		
										-,-		
							:					
				ļ								
								. 144				
										-		
·												
								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
· · · · · · · · · · · · · · · · · · ·												

Form 990 (2011) ASSOCIATION, INC. 56-0511901 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512. revenue revenue 513, or 514 1 a Federated campaigns 1a Membership dues 1b 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 Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f Business Code 2 a MEMBERSHIP DUES 900099 599,176 Program Service 599,176 **b MEETINGS AND CONFERENC** 900099 70,141 70,141 All other program service revenue Total. Add lines 2a-2f 669,317.  $\triangleright$ Investment income (including dividends, interest, and 3 other similar amounts) 10,973. 10,973. Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 70,233. assets other than inventory b Less cost or other basis 67,753. 93 and sales expenses 2,480. -93 c Gain or (loss) 2,387 d Net gain or (loss) 2,387. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue e Total. Add lines 11a-11d

682,677.

669,317.

0.

13,360. Form **990** (2011)

Total revenue See instructions

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# 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)

	not include amounts reported on lines 6b, 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	15 400		, ,	
_	organizations in the United States. See Part IV, line 21	15,400.			
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	184,342.			
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	96,050.			
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	7,136.			
9	Other employee benefits	12,474.			
10	Payroll taxes	17,876.			
11	Fees for services (non-employees).				
а	Management		<del></del>		
b	Legal	5,044.		<u> </u>	
С	Accounting	5,638.			
d	Lobbying		,		
e	Professional fundraising services. See Part IV, line 17	<u>-</u>	· · · · · · · · · · · · · · · · · · ·	-	
f	Investment management fees	FF 102			
g		55,103.		<del>-</del>	
12	Advertising and promotion	20,912. 7,727.	·	<u> </u>	
13	Office expenses Information technology	1,141.		<del> </del> -	
14 15	Royalties	-			
16	Occupancy	60,993.		<del> </del>	
17	Travel	7,117.			
18	Payments of travel or entertainment expenses	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	81,259.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,755.			
23	Insurance	7,899.			· · · · · · · · · · · · · · · · · · ·
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		9,794.			
b	EQUIPMENT RENTAL	8,610.			
С	TELEPHONE	7,749.			
d	DUES AND SUBSCRIPTIONS	7,482.			
е	All other expenses	9,364.			
25	Total functional expenses Add lines 1 through 24e	634,724.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Par	<u>t X.</u>	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		10,216.	1	4,500.
	2	Savings and temporary cash investments		112,420.	2	107,661.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		9,139.	4	45,460.
	5	Receivables from current and former officers, di	, ,	•	, , , , ,	
		employees, and highest compensated employee	es. Complete Part II	` , '		,
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c	(3)(B), and contributing	, , ,		,
		employers and sponsoring organizations of sections				
		employees' beneficiary organizations (see instru	ctions)		6	
Assets	7	Notes and loans receivable, net			7	
488	8	Inventories for sale or use			8	
`	9	Prepaid expenses and deferred charges		4,610.	9	4,610.
	10a	Land, buildings, and equipment cost or other		)	,	
		basis. Complete Part VI of Schedule D	10a 75,798.	, ,		
	b	Less. accumulated depreciation	10ь 53,290.	19,433.	10c	22,508.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line	1	202,793.	12	213,456.
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets	-	14		
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	358,611.	16	398,195.
	17	Accounts payable and accrued expenses		17,371.	17	11,223.
	18	Grants payable			18	· · · · · · · · · · · · · · · · · · ·
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities			20	
တ္ဆ	21	Escrow or custodial account liability. Complete I	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director	s, trustees, key employees,			
abi		highest compensated employees, and disqualifi	ed persons Complete Part II			1
=		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ited third parties		23	
	24	Unsecured notes and loans payable to unrelated	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	17-24) Complete Part X of			
		Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		17,371.	26	11,223.
		Organizations that follow SFAS 117, check he	ere 🕨 🗓 and complete			
es		lines 27 through 29, and lines 33 and 34.				
Juc	27	Unrestricted net assets		341,240.	27	386,972.
3ala	28	Temporarily restricted net assets			28	
Jd E	29	Permanently restricted net assets	<u></u>		29	
Fur		Organizations that do not follow SFAS 117, c	neck here 🕨 🔲 and			
ō		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds		30		
Ass	31	Paid-in or capital surplus, or land, building, or ed	uipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
Ż	33	Total net assets or fund balances		341,240.	33	386,972.
	34	Total liabilities and net assets/fund balances		358,611.	34	398,195.

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

Form	990 (2011) ASSOCIATION, INC.	56-053	11901	Pa	qe 12		
Pa	rt XI Reconciliation of Net Assets		<del></del>		<u> </u>		
	Check if Schedule O contains a response to any question in this Part XI				$\mathbf{X}$		
	•						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	68	2,6	77.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	63	4,7	24.		
3	Revenue less expenses Subtract line 2 from line 1	3	4	7,9	53.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	34	1,2	40.		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	_	2,2	21.		
6_	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						
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				$\mathbf{x}$		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	, ,				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	<u></u>		
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			ŀ		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O		,			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a		,			
	separate basis, consolidated basis, or both						
	X Separate basis Consolidated basis Both consolidated and separate basis						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audıt					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			Ì		

Form **990** (2011)

## **SCHEDULE C**

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

See separate instructions.

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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, Part V, line 35c (Proxy Tax), then

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	511901 ion.
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).	Yes No
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV.  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  If "Yes," describe in Part IV.  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).	Yes No
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?  4a Was a correction made?  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).	Yes No
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? 4a Was a correction made?  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 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? 4a Was a correction made?  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).	
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? 4a Was a correction made?  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).	
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4a Was a correction made?  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).	
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).	Yes No
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).	
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527	
exempt function activities > \$	
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL,	
line 17b  A Did the files experiented file Form 1100 DOL for the year?	
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	of political
contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregat	ed fund or a
political action committee (PAC). If additional space is needed, provide information in Part IV.	
filing organization's contribution funds if none, enter -0-below delivere political	ount of political ons received and the thing and directly do to a separate of the thing and the thin

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

LHA

Schedule C (Form 990 or 990 EZ) 2011 Part II-A. Complete if the org	ASSOC	IATION	, INC.	on 501(c)(3) and file	56-	0511901 Page 2
(election under sec			iipi uiidei secti	on sor(c)(s) and me	su Form 5706	
<del></del>		• • • • • • • • • • • • • • • • • • • •	liated group (and list	ın Part IV each affiliated	group member's na	me address FIN
expenses, and shar				iii ait iv each ainilatea	group member s na	me, address, Elly,
. —			nd "limited control" p	rovisions annly		
a the ming organiza	tion chock	CO DOX A al	id anniced control p	TOVISIONS APPLY	(a) Filing	(b) Affiliated group
		bying Expe			organization's	totals
(The term "expend	ditures" m	ieans amou	ints paid or incurred	d.)	totals	
1a Total lobbying expenditures to influ	ence pub	lic opinion (	grass roots lobbying)	1		
b Total lobbying expenditures to influ			, , ,		····	<del></del>
c Total lobbying expenditures (add li			-, ( <b>-</b> , <b>g</b> ,	†		
d Other exempt purpose expenditure		,				
e Total exempt purpose expenditure		s 1c and 1c	I)	Ì		
f Lobbying nontaxable amount. Enter	•			oth columns		
If the amount on line 1e, column (a) o			bying nontaxable ar		· · · · · · · · · · · · · · · · · · ·	· · ·
Not over \$500,000	. (5) 10.		the amount on line 1		•	- ^ , , , , , ,
Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the ex			, h
Over \$1,000,000 but not over \$1,5				cess over \$1,000,000.		, ^
Over \$1,500,000 but not over \$17,			0 plus 5% of the exc			· ·
Over \$17,000,000	000,000	\$1,000,0		.ess over \(\psi_1,500,000\)	•	1
[ <del></del>		Ψ1,000,	500		*	,
g Grassroots nontaxable amount (en	ter 25% o	f line 1f)				- <del> </del> -
h Subtract line 1g from line 1a If zero		•		}		<del> </del>
i Subtract line 1f from line 1c If zero	•			}		<u> </u>
J If there is an amount other than zer	-		line 1: did the organi	zation file Form 4720		<u> </u>
reporting section 4911 tax for this		, IIII 111 OI	inte 11, dia tre organi	241011 1116 1-01111 47 20		Yes No
roporting doction for that for this	your	4-Vear Ave	eraging Period Unde	r Section 501/h)		Yes No
(Some organiz	ations tha			on do not have to comp	lete all of the five	
				es 2a through 2f on pag		
				ear Averaging Period		
				T		
Calendar year (or fiscal year beginning in)	(a)	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
(or fiscal year beginning in)						
2a Lobbying nontaxable amount						
b Lobbying ceiling amount					*****	
(150% of line 2a, column(e))		•				
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
f Grassroots lobbying expenditures				1		

Schedule C (Form 990 or 990-EZ) 2011

56-0511901 Page 3

Schedule C (Form 990 or 990-EZ) 2011 ASSOCIATION, INC. 56-051190

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

For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(8	a)	(b	)
of th	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or			, 1	,
	local legislation, including any attempt to influence public opinion on a legislative matter		*		, ,,
	or referendum, through the use of			, , ,	, , ,
а	Volunteers?			,	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?			L	
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?			ļ	
j	Total Add lines 1c through 1i	<u> </u>	ļ		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			, ,	
þ	If "Yes," enter the amount of any tax incurred under section 4912	1			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		(=)	L	
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)	((5), or se	ection	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."	d "No" OF	<del></del>		e 3, is
1	Dues, assessments and similar amounts from members	tion	1	393	,1/0.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poli	iicai		ļ	
_	expenses for which the section 527(f) tax was paid).		20	1 1 7	7,949.
	Current year  Carryover from last year		2a 2b		, 343.
			20 2c	15	7,949.
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 e	2290			
7	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?	pomiou.	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	17	7,949.
_	rt IV Supplemental Information				15-25
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5,	Part II-A, and	Part II-B, III	ne 1 Also, o	complete
this	part for any additional information				
	· · · · · · · · · · · · · · · · · · ·				

# **SCHEDULE D**

(Form 990) ·

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Inspection :

Name of the organization

CAROLINA ASPHALT PAVEMENT

Employer identification number

	ASSOCIATION, INC.		<u> 56-0511901</u>
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 hold in donor advised	funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a	_	Yes No
U	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	or deficit advisor, or for any other purpose cor	
Pai		rapization answered "Vee" to Form 900. Port	Yes No
			TV, lifte 7
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e	· —	
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	` '	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4	4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conservat		•
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o		er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, 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		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial da	un, provide
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	· •	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$
	•		

		PION, INC.							11901	
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, d	or Other	Simila	r Asse	ts (contini	ued)
3	Using the organization's acquisition, accession	on, and other recor	ds, check	any of the	following tha	it are a sigr	nificant u	se of its	collection i	tems
	(check all that apply).									
а	Public exhibition	•			hange progra	ams				
b	Scholarly research	•	• [(	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co				_			se in Par	t XIV	
5	During the year, did the organization solicit or					er sımılar a	ssets		~	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arrang		lete if the	organizatio	n answered	"Yes" to Fo	orm 990,	Part IV, i	ine 9, or	
	reported an amount on Form 990, Par		<del></del> .							
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for o	contribution	s or other as	sets not in	cluded		7	
	on Form 990, Part X?							<u> </u>	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV	and complete the f	ollowing t	able						
									Amount	
	Beginning balance		•				1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance	000 D-+ V I	- 010				1f		٦.,	
	Did the organization include an amount on Fo	orm 990, Part X, line	9217					L.	J Yes	L No
Par	t V Endowment Funds. Complete if	f the ergopization a	noworod	"Von" to Eo	rm 000 Dort	N/ line 10				
,i a	Endownient i unus: Complete ii				(c) Two yea		1 Thron wa	nro baok	(-) Four v	eoro book
4	Registring of year balance	(a) Current year	(0) -	rior year	(C) TWO yea	IS DACK (Q	) Three ye	als Dack	(e) Four y	ears back
	Beginning of year balance Contributions	·						<del></del>		
b		·	1							
ب د	Net investment earnings, gains, and losses Grants or scholarships									
ď	Other expenditures for facilities		1							
е	and programs		1							
f	Administrative expenses	<del></del>	1		<del>                                     </del>	_			,	
g	End of year balance	<del>_</del>								<del></del>
2	Provide the estimated percentage of the curr	rent vear end balan	ce (line 1	a. column (a	a)) held as				l	
a	Board designated or quasi-endowment	,	%	g, (c	-,,					
b	Permanent endowment ▶	%								
	Temporarily restricted endowment ▶	<del></del> %								
_	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.								
За	Are there endowment funds not in the posse		zation tha	it are held a	ind administe	ered for the	organiza	ation		
	by	•					J		Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required	on Sched	lule R?					3b	
_4	Describe in Part XIV the intended uses of the	organization's end	owment	funds						
Pai	t VI Land, Buildings, and Equipm	ent. See Form 99	0, Part X	line 10						
	Description of property	(a) Cost or		(b) Cost	or other	( <b>c</b> ) Acc	umulated	:   E	(d) Book	value
		basis (invest	ment)	basis	(other)	depre	eciation		,_	
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other				5,798.		<u>53,29</u>	0.		,508.
<u>Tota</u>	l. Add lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colun	nn (B), line 1	10(c))				22	<u>,508.</u>

Schedule D (Form 990) 2011

ASSOCIATION, INC.

Part VII   Investments - Other Securities. See Form				
(Including name of security)  (1) Financial derivatives		(c) Me	thod of valuation.	
• • • • • • • • • • • • • • • • • • • •	b) Book value		d-of-year market value	
• •				•
			*	
(3) Other		·		
(A) BLACKROCK GLOBAL				
(B) ALLOCATION	8,280.	END_OF_VEND	MARKET VALUE	
(C) COLUMBIA INDEX FUND	35,566.	END-OF-YEAR		
(D) JOHN HANCOCK BOND C	22,180.	END-OF-YEAR		
(E) PIMCO REAL RETURN	49,517.	END-OF-YEAR		
(F) TEMPLETON GLOBAL BOND	43,311.	END-OF-IEAR	MARKET VALUE	
(G) FUND	33,196.	END OF VEND	MADEEM TEATTE	
	33,190.	END-OF-IEAR	MARKET VALUE	
(H) UNIT VAN KAMPEN GLOBAL 45	20 750	END OF VEND	MADIZEE IZATITE	
(I) DIVIDEND	38,758.	1 (	MARKET VALUE	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)	213,456.			- ,
Part VIII Investments - Program Related. See Form	n 990, Part X, line 13			
(a) Description of investment type (i	b) Book value		ethod of valuation d-of-year market value	
		COST OF EIT		
(1)		<del></del>		
(2)				
(3)				
(4)		<del></del>		
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ►  Part IX Other Assets. See Form 990, Part X, line 15			· · · · · · · · · · · · · · · · · · ·	
Part IX Other Assets. See Form 990, Part X, line 15	ation.	<del></del>		
(a) Descrip			(h) Pook volu	
(a) Descrip	311011		(b) Book valu	e
(1)	511011		(b) Book valu	e
(1) (2)	511011		(b) Book valu	e
(1) (2) (3)	31011		(b) Book valu	e
(1) (2) (3) (4)	3.071		(b) Book valu	e
(1) (2) (3) (4) (5)	3.011		(b) Book valu	e
(1) (2) (3) (4) (5) (6)	3.011		(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7)	3.001		(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8)	3.001		(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9)	3.011		(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9)			(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25		h) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)		b) Book value	(b) Book valu	e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)				e
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. See Form 990, Part X, line 25  1. (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)				e

*****	dule D (Form 990) 2011 ASSOCIATION, INC.  t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Eineneiel State	56-0511901 Page 4
		Audited Financial State	ments
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Stateme		Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	1 1
	Recoveries of prior year grants	2c	† .
d	Other (Describe in Part XIV)	2d	1'
	Add lines 2a through 2d	24	1 22
е 3	Subtract line 2e from line 1		2e 3
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		3
4	Investment expenses not included on Form 990, Part VIII, line 7b	45	•
a	Other (Describe in Part XIV)	4a   4b	-
b	Add lines 4a and 4b	40	1 4-
c			4c   5
Pai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  † XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses per	
	Total expenses and losses per audited financial statements	ents with Expenses per	1
1	Amounts included on line 1 but not on Form 990, Part IX, line 25		1
2		اما	
a	Donated services and use of facilities	2a	4
b	Prior year adjustments	2b	-
c	Other losses	2c	-
d	Other (Describe in Part XIV)	2d	1 _ 1
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-
	Other (Describe in Part XIV)	4b	-
	Add lines 4a and 4b		4c
Par	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  TXIV Supplemental Information		5
L		II leas to and 4 Part IV leas t	h and Oh Dart V line 4 Dart
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp		
	RT X, LINE 2: THE ASSOCIATION HAS ADOPTED		
FAI	(1 X, DINE 2. THE ADDOCTATION HAD ADDOFTED	THE PROVISIONS C	F FASE ASC
740	, INCOME TAXES. USING THIS GUIDANCE, TAX	POSITIONS INITI	ALLY NEED TO
BE	RECOGNIZED IN THE FINANCIAL STATEMENTS WH	EN IT IS MORE-LI	KELY-THAN-NOT
THI	E POSITIONS WILL BE SUSTAINED UPON EXAMINA	TION BY THE TAX	AUTHORITIES.
ΙΤ	ALSO PROVIDES GUIDANCE FOR DERECOGNITION,	CLASSIFICATION,	INTEREST AND
	NALTIES, ACCOUNTING IN INTERIM PERIODS, DI		
		-	
OF DO	DECEMBER 31, 2011 AND 2010, THE ASSOCIATION		
POS	SITIONS THAT OUALIFY FOR EITHER RECOGNITION	N OR DISCLOSURE	TN THE

# CAROLINA ASPHALT PAVEMENT ASSOCIATION, INC. 56-05<u>11901 Page 5</u> Schedule D (Form 990) 2011 Part XIV Supplemental Information (continued) FINANCIAL STATEMENTS. THE ORGANIZATION IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS; HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS. THE ORGANIZATION BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATION FOR YEARS PRIOR TO 2009.

Schedule D (Form 990) 2011 ASSOCIATION, INC.

Part XIV Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
JNIT VAN KAMPEN COHEN & STEERS	15,170.	FMV
JNIT FIRST TRUST UNCOMMON VALUES	10,789.	FMV

# SCHEDULE I (Form 990)

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

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

OMB No 1545-0047 Open to Public Inspection

> ▶ Attach to Form 990. Department of the Treasury Internal Revenue Service Internal Revenue Service Name of the organization CAROLINA ASPHALT PAVEMENT

Name of the organization CAROLINA ASPHALT PAVEMENT	ASPHALT FOR THE	AVEMENT					Employer identification number 56 - 0511901
Part I General Information on Grants and Assistance	Ind Assistance						1001100
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	to substantiate th	e amount of the grants	s or assistance, the	grantees' eligibility	for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assistance?	stance?						☐ Yes 🛣 No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	t funds in the Unite	d 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	Governments an	d Organızations in th	ie United States. C	omplete if the orga	anization answered "\	res" 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. Part II can be duplicated if additional space is needed	\$5,000 Check this	s box if no one recipie	nt received more th	an \$5,000 Part II	can be duplicated if	additional space is nee	<b>→</b> Debe
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC 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
NATIONAL ASPHALT DAVEMENT							CONTESTS OF SWOTHING
ASSOCIATION - 5100 FORBES BLVD -							INDUSTRY ENVIRONMENTAL
LANTHAM, MD 20706	53-0231198	501C(6)	15,400.	0			SURVIVAL FUND
	nd government or	ganizations listed in th	ne line 1 table				•
s Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table	:				<b>A</b>
-HA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2011)

Schedule | (Form 990) (2011) ASSOCIATION, INC.

| 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.

Part III | Grants and Other Assistance to Individuals in the United States.

Page 2

56-0511901

(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 assistande
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	ide the information	required in Part I,	ine 2, and any other	additional information	
THE USE OF THE HMA INDUSTRY ENVIRONMENTAL SURVIVAL FUND IS MANAGED	ONMENTAL :	SURVIVAL F	UND IS MAN	AGED BY A	
COUNCIL CONSISTING OF THE STATE ASSOCIATION EXECUTIVES AND NAPA	SSOCIATION	N EXECUTIV	ES AND NAPA	4	
MEMBERS.					The state of the s
	·				:

Schedule I (Form 990) (2011)

132102 01-27-12

# **SCHEDULE J** (Form 990)

# **Compensation Information**

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

OMB No 1545-0047

Öpen to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990. ➤ See separate instructions. CAROLINA ASPHALT PAVEMENT

ASSOCIATION, INC.

**Questions Regarding Compensation** 

Employer identification number 56-0511901

			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,	4.	,	` '
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	•		
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	ĺ ,		,
			4	
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		·	
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to		•	
	establish compensation of the CEO/Executive Director. Explain in Part III		,	
	X Compensation committee Written employment contract		• 1	
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
		,		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	,		
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4		*
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		٠.	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		
b	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			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations 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		

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

Schedule J (Form 990) 2011

ASSOCIATION, INC.

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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).

Page 2

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, applicable column (D) and (E) amounts for that individual Do not list any individuals that are not listed on Form 990, Part VII

_									
_			(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	ISC compensation	(0)	( <u>0</u>	(E)	(F)
	(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Hetirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
		Ξ	164,800.	0	0	15,480.	4,062.	184,342.	0
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Schedule J (Form 990) 2011

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# SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

CAROLINA ASPHALT PAVEMENT ASSOCIATION. INC.

Employer identification number 56-0511901

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO PRODUCE HIGH QUALITY PAVING MATERIALS IN THE MOST TECHNICALLY AND
COST EFFICIENT MANNER. THE ASSOCIATION REGULARLY SPONSORS SEMINARS AND
WORKSHOPS ON A VARIETY OF TECHNICAL SUBJECTS. CAPA TAKES AN ACTIVE
ROLE IN GOVERNMENTAL AFFAIRS, REPRESENTING THE INDUSTRY'S VIEWPOINTS
AND CONCERNS TO VARIOUS PUBLIC AGENCIES AND GOVERNING BODIES ON
ENVIRONMENTAL, ENGINEERING, AND LEGISLATIVE ISSUES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SUBJECTS. CAPA TAKES AN ACTIVE ROLE IN GOVERNMENTAL AFFAIRS,
REPRESENTING THE INDUSTRY'S VIEWPOINTS AND CONCERNS TO VARIOUS PUBLIC
AGENGIES AND GOVERNING BODIES ON ENVIRONMENTAL, ENGINEERING, AND
LEGISLATIVE ISSUES.
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE DIRECTOR AND
PRESIDENT REVIEWS THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REVIEWS THE
POLICY ANNUALLY WITH ALL OFFICERS AND EMPLOYEES.
FORM 990, PART VI, SECTION B, LINE 15: STANDING COMMITTEE THAT IS TASKED
WITH YEARLY REVIEW OF EMPLOYEES AND RECOMMENDATION FOR COMPENSATION.
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS ARE
DISTRIBUTED AT ALL MEETINGS TO THE DIRECTORS AND ARE ALSO AVAILABLE UPON
REQUEST.