

# 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**

હ્ય

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)

2011 Open to Public

Open to Publ

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

A For the 2011 calendar year, or tax year beginning 2011 and ending JUN 30. D Employer identification number Check if applicable C Name of organization CPWR: THE CENTER FOR CONSTRUCTION RESEARCH AND TRAINING 52-1172454 Doing Business As CPWR ]Initial |return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 1000 301-578-8500 8484 GEORGIA AVENUE Amended 16,559,198. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion pending SILVER SPRING, MD 20910 H(a) Is this a group return Yes X No STAFFORD F Name and address of principal officer ERICH J. for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? \_ Yes L I Tax-exempt status X 501(c)(3) 501(c)( ) ◀ (insert no.) If "No," attach a list (see instructions) J Website: ► WWW.CPWR.COM H(c) Group exemption number ▶ K Form of organization: X Corporation . Year of formation: 1979 M State of legal domicile: MD Part I | Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1 Activities & Governance Check this box ▶ L if the organization discontinued its operations or disposed of more than 25% of its net assets. 10 Number of voting members of the governing body (Part VI, line 1a) 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 40 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 6 0 Total number of volunteers (estimate if necessary) 0. 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 7h **Prior Year Current Year** <u>14,211,031.</u> 13,773,140. Contributions and grants (Part VIII, line 1h) Revenue 1,003,049 929,619. 9 Program service revenue (Part VIII, line 2g) <u>9,233</u>. 15,948. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 15,242 9,492. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 159,375. 14,807,379 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0 0. Benefits paid to or for members (Part IX, column (A), line 4) 14 4,666,390 4,800,312. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part X Sediumn (A) line 11e) b Total fundraising expenses (Part IX, column (D) line 25) Other expenses (Fart (A) A) (Indes) 11 (Fit), 11f-24e) 10,078,476 10,165,227. 14,744,866 Total expenses Add lines 13-17 (must equal XX, column (A), line 25) 14,965,<u>539.</u> Revenue less expenses Subtract ine 18 from line 12 193,836. 62,513 19 Assets or Balances **Beginning of Current Year End of Year** 6,170,518 6,468,021. Total assets (Part X, line 16) 2,957,259 3,060,926. 21 Total liabilities (Part X, line 26) Net/ 213,259 407,095 Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign ERICH J. STAFFORD, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature P00543022 Terri McKnight

FIRM'S name GELMAN, ROSENBERG 3 - /3 - /3 self-employed IM IIICAN Paid & FREEDMAN C Firm's EIN 52-1392008 Preparer Firm's address 4550 MONTGOMERY AVE SUITE 650N Use Only

BETHESDA, MD 20814-2930

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

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

916

Phone no. (301) 951-9090

X Yes No

Form 990 (2011)

W

	rt III Statement of Program Service Accomplishments
1	Check if Schedule O contains a response to any question in this Part III  Briefly describe the organization's mission:
•	TO CARRY OUT RESEARCH, TRAINING AND OTHER RELATED SERVICES IN THE
	CONSTRUCTION INDUSTRY, WITH A FOCUS ON OCCUPATIONAL SAFETY, HEALTH AND
	WORKING CONDITIONS.
	MORRING CONDITIONS:
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	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?
_	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 4,387,787. including grants of \$) (Revenue \$)
	NIEHS HAZARDOUS MATERIALS WORKER HEALTH AND SAFETY TRAINING - INCLUDES
	ELEVEN NATIONAL CONSTRUCTION UNIONS INVOLVED IN TRAINING APPROXIMATELY
	14,000 MEMBERS ANNUALLY. CPWR AND ITS CONSORTIUM OF BUILDING TRADES
	UNIONS OFFER A COMPREHENSIVE MENU OF CONSTRUCTION SAFETY AND HEALTH
	TRAINING PROGRAMS, INCLUDING OSHA 500, 30, AND 10-HOUR PROGRAMS;
	HAZARDOUS WASTE TRAINING AND REFRESHERS; CONFINED SPACE TRAINING, LEAD
	AND ASBESTOS TRAINING, OSHA 7600 TRAINING AND OTHERS.
4b	(Code) (Expenses \$5, 641, 371. including grants of \$) (Revenue \$)
	CDC/NIOSH SAFETY AND HEALTH RESEARCH IN THE CONSTRUCTION INDUSTRY -
	RESEARCH GRANT SPONSORED BY NIOSH TARGETED TO IMPROVE THE SAFETY AND
	HEALTH OF WORKERS ON CONSTRUCTION SITES. IN EXCESS OF 20 DIFFERENT
	PROJECTS WERE FUNDED UNDER THIS PROGRAM.
	2 700 507
4c	(Code) (Expenses \$3,798,507. including grants of \$) (Revenue \$)
	DOE NATIONAL FORMER WORKERS' NOTIFICATION & MEDICAL SCREENING PROGRAM -
	PROVIDED MEDICAL SCREENING SERVICES AT 23 SITES IDENTIFIED BY THE
	DEPARTMENT OF ENERGY. THE PROGRAM DIRECTLY CONTACTS WORKERS, OBTAINS
	SIGNED CONSENTS AND INTERVIEWS PARTICIPANTS. IN 2012, OVER 2,100
	SCREENINGS WERE COMPLETED.
	Other program convent (Decembe in Schodule O.)
4d	700 000
10	(Expenses \$ 790,923 · including grants of \$ ) (Revenue \$ 929,619 ·)  Total program service expenses ► 14,618,588 ·
<u>48</u>	Total program service expenses Form 990 (2011)

Form 990 (2011) RESEARCH AND TRAINING
Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		3.7
_	Schedule D, Part III	8		X
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			<b>.</b>
10	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10		
• •	as applicable			, <sub>2</sub> , <sub>2</sub> ,
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	-		`
<u> </u>	Part VI	11a		х
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	١		₹.
45	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	4.5		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<del>-''</del> -		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>		_ <del></del>
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (	2011)

RESEARCH AND TRAINING

52-1172454 Page 4

	·		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	ļ	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		l	
	Schedule J	23	Х	<b></b> -
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			٦,
	Schedule K If "No", go to line 25	24a		X_
b	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	04-		
	any tax-exempt bonds?  Did the examplation set on on "on behalf of" inquer for bonds outstanding at any time during the year?	24c		ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24d	<del></del>	<del> </del>
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	>		, · ,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			х
31	contributions? If "Yes," complete Schedule M  Did the organization liquidate, terminate, or dissolve and cease operations?	30	-	
31	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
O_	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	•	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	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	99U (	2011)

52-1172454 Page 5

	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 1a 51			
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 40			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			,
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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
þ	, , , , , , , , , , , , , , , , , , , ,	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_	•	•
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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
C	to file Form 8282?	7.		х
a	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		•
e		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
a a	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	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 N/A	7.1		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a	ļ į		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	$\vdash$		
а	Is the organization licensed to issue qualified health plans in more than one state?  N/A	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  Enter the amount of receives an hand			
	Enter the amount of reserves on hand  Did the organization receive any payments for indeer tenning converse during the tay year?	46-		- <del>-</del> -
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes" has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14a		<u>X</u>
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<b>990</b> (	0044

52-1172454

Page 6

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

	Check if Schedule O contains a response to any question in this Part VI			$\mathbf{x}$
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15		×	
	If there are material differences in voting rights among members of the governing body, or if the governing			, , , , , , , , , , , , , , , , , , , ,
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			ξέ√"
b	Enter the number of voting members included in line 1a, above, who are independent 1b	,	,	,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	,		^ <u>`</u>
	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		Х
6	Did the organization have members or stockholders?	6		Х
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:	1.4	, )' , )'	#.25 <sup>1</sup> .
а	The governing body?	8a	Х	
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		ļ	
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		ļ	
			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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			~>
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1.0	- T	
40	In Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14	<b>X</b>	
15	Did the process for determining compensation of the following persons include a review and approval by independent	. *	ľ `	
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	150	X	-
۵ د	Other officers or key employees of the organization	15a 15b	_A_	х
Ü	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	<del> </del>	111
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	.3.	;	
	taxable entity during the year?	16a	÷ -:=	x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100	7	, ,,
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	1	
Sec	tion C. Disclosure	1		
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
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)	availab	le	
	for public inspection. Indicate how you made these available Check all that apply			
	Own website 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, ar	d finar	ncial	
	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 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 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 organization of the person	ition:	<b></b>	
	MARY TARBRAKE - 301-578-8500			
12200	8484 GEORGIA AVENUE, SUITE 100, SILVER SPRING, MD 20910			

01-23-12

52-1172454

# 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	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	an compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	stee or director	institutional trustee	Officer		Highest compensated employee		trom the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ERICH J. STAFFORD									<u> </u>	
EXECUTIVE DIRECTOR	35.00	X		X	ļ			210,625.	0.	80,535.
(2) SEAN MCGARVEY								]	_	_
PRESIDENT	1.00	X	_	X	_	ļ		0.	0.	0.
(3) BRENT BOOKER								_	_	_
SECRETARY-TREASURER	1.00	X		X		Į		0.	0.	0.
(4) RICHARD RESNICK									_	_
VP/GENERAL COUNSEL	1.00	X		X		·		0.	0.	0.
(5) REV, J. CLETUS KILEY										_
DIRECTOR	1.00	X				<u> </u>		0.	0.	0.
(6) MORRIS KLEINER										
DIRECTOR	1.00	X						0.	0.	0.
(7) NOEL C. BORCK										_
DIRECTOR	1.00	X						0.	0,	0.
(8) IZ CAKRANE	·									_
DIRECTOR	1.00	X				ļ		0.	0.	0.
(9) GARY M. MCKINNEY										_
DIRECTOR	1.00	X						0.	0.	0.
(10) PEYTON HAIRSTON									_	_
DIRECTOR	1.00	X						0.	0.	0.
(11) MARY TARBRAKE										
ASSOC, DIR-FINANCE/ADMIN	35.00	ļ		X				122,382.	0.	56,994.
(12) LAURA WELCH									_	
MEDICAL DIRECTOR	32.00					X		143,572.	0.	64,588.
(13) JANIE GITTLEMAN						ŀ			_	
ASSOC. DIR-SAFETY/HEALTH	35.00	ļ	ļ			X		140,400.	0.	61,457.
(14) JAMES PLATNER									_	
ASSOC, DIR-SCI,/TECH,	35.00	ļ.,		ļ	_	X		138,638.	0.	66,094.
(15) XIUWEN DONG							}		_	
DIR, DATA CENTER	35.00	ļ	_			X		117,697.	0.	59,762.
(16) EILEEN BETIT							•		_	
DIR. SPECIAL PROGRAMS	35.00	_	<u> </u>		<u> </u>	X	_	108,079.	0.	57,783.
							[			
				L_						Form <b>990</b> (2011)

52-1172454 Page 8

<u>Form</u>	990	(201)	11)

RESEARCH AND TRAINING

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
· (A)	(B) (C)						(D)	(E)			(F)		
Name and trtle	Average	e Position (do not check more than one						Reportable	Reportable		Est	imate	ed
	hours per	box,	unle	ss pe	rson	is both	an	compensation	compensatio			ount (	of
	week (describe		eran	uao	recto	irus	ee)	from	from related			other	
	hours for	directi				_		the organization	organization: (W-2/1099-MIS			oensa om the	
	related	10 93	stee			nsate		(W-2/1099-MISC)	(W-27 1000 Mile	,		anızatı	
	organizations	trust	nal tru		, e	ompe		1			•	relate	
	ın Schedule	Individual trustee or director	Institutional trustee	Jec.	Key employee	Highest compensated employee	Former				orga	nızatı	ons
	O)	틸	Inst	Officer	ş.	포함	ē						
					_				<del>.</del>				
	-												
1b Sub-total	<u></u>				L			981,393.		0.	44	7,2	13.
c Total from continuation sheets to Part VI	I, Section A					<b>•</b>		0.		0.			0.
d_Total (add lines 1b and 1c)						<b>•</b>		981,393.		0.	44'	7,2	13.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o r	eceived more than \$100	,000 of reportabl	e			
compensation from the organization													9
												Yes	No
3 Did the organization list any former officer,	director, or tru	istee	, ke	y en	nplo	yee,	or	highest compensated e	mployee on				1
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su	•		•					•	the organization				
and related organizations greater than \$150			-							-	4	X	
5 Did any person listed on line 1a receive or a					-		elat	ed organization or indivi	dual for services				
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Schedule	9 <i>J f</i>	or su	ich j	pers	on_			-		5		X
Complete this table for your five highest co	mponested inc	lono	ndo	nt o		ooto		that recovered more than	\$100,000 of com		otion fi		
the organization. Report compensation for		-								pens	ation ii	OIII	
(A)	ine calcindar y	cai c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ig w	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	O1 111	T	(B)	car.		(C	`	
Name and business	address						i	Description of s	ervices	C	omper		n
ZENITH ADMINISTRATORS							┪						
	CAGO, 1	L	60	61	1			ADMINISTRATI	ON	3	,224	1.6	33.
INSULATION INDUSTRY							$\neg$	SAFETY AND H					
8480 N. HWY. 87, ORANGE,	TX 7763	32					ŀ	RESEARCH			33!	5,8	08.
WASHINGTON UNIVERSITY							$\overline{}$	SAFETY AND H	EALTH				
ONE BROOKINGS DR., ST. LO	ONE BROOKINGS DR., ST. LOUIS, MO 63130 RESEARCH 317,652.												
REGENTS OF THE UNIVERSITY							Ţ	SAFETY AND H	EALTH				
	111 FRANKLIN ST., OAKLAND, CA 94607 RESEARCH 301,571.									<u>71.</u>			
STONETURN CONSULTANTS									l				
2610 SW 151ST PLACE, SEAT	610 SW 151ST PLACE, SEATTLE, WA 98166 TECHNICAL CONSULTANT 252,893.												

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

\$100,000 of compensation from the organization

Part VIII **Statement of Revenue** (D) Revenue (C) (B) (A) Unrelated Total revenue Related or excluded from business tax under sections 512, 513, or 514 exempt function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 14,211,031 f All other contributions, gifts, grants, and similar amounts not included above Q Noncash contributions included in lines 1a-1f.\$ h Total. Add lines 1a-1f 14,211,031 **Business Code** 929,619 2 a PROJECT REVENUE 900099 929,619. Program Service Revenue f All other program service revenue 929,619. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 9,233 other similar amounts) 9,233. 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 assets other than inventory 1,399,823 b Less: cost or other basis and sales expenses 1,399,823 c Gain or (loss) 0 d Net gain or (loss) 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 а **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 900099 9,492 9,492. 11 a MISCELLANEOUS d All other revenue 9,492. e Total. Add lines 11a-11d 18,725. 929,619 Total revenue. See instructions. Form 990 (2011)

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do	Check if Schedule O contains a response to the contains a respective to the contains a response to the contains a respective to the con	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in	<del></del> -			
	the United States See Part IV, line 22			j	
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	480,400.	432,360.	48,040.	
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	2,070,800.	2,057,106.	13,694.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	685,845.	680,175.	5,670.	
9	Other employee benefits	1,342,764.	1,325,516.	17,248.	
10	Payroll taxes	220,503.	216,427.	4,076.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	7,268.		7,268.	
С	Accounting	57,460.		57,460.	
d	Lobbying	48,000.			48,000
е	Professional fundraising services. See Part IV, line 17		,		
f	Investment management fees .				
g	Other _	1,891,252.	1,840,416.	50,836.	
12	Advertising and promotion				
13	Office expenses	592,288.	559,323.	32,965.	
14	Information technology				
15	Royalties				
16	Occupancy _	418,112.	376,301.	41,811.	
17	Travel	385,699.	372,900.	7,129.	5,670
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	9,610.	9,432.	178.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	70,190.	68,893.	1,297.	
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	CONTRACTUAL SERVICES	6,437,231.	6,437,231.		
b	TRAINERS	95,230.	95,230.		
С	TRAINING CLASS SUPPLIES	66,385.	66,385.		
d	TEMPORARY HELP	42,967.	38,670.	4,297.	·
е	All other expenses	43,535.	42,223.	674.	638
25	Total functional expenses. Add lines 1 through 24e	14,965,539.	14,618,588.	292,643.	54,308
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)				

	rt X	Balance Sheet	THING		<u> </u>	II/Z4J4 Page II
	•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		649.	1	650.
	2	Savings and temporary cash investments	2,531,038.	2	3,058,019.	
	3	Pledges and grants receivable, net	1,800,430.	3	3,016,649.	
	4	Accounts receivable, net		264,228.	4	228,327.
	5	Receivables from current and former officers, director	,			
		employees, and highest compensated employees C				
	Ì	of Schedule L			5	
	6	Receivables from other disqualified persons (as defin	ned under section			
		4958(f)(1)), persons described in section 4958(c)(3)(E	,			
		employers and sponsoring organizations of section 5				
'n		employees' beneficiary organizations (see instruction	ns) .		6	
Assets	7	Notes and loans receivable, net			7	
Ass	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		145,649.	9	135,675.
	10a	Land, buildings, and equipment cost or other				
		basis. Complete Part VI of Schedule D 10	a			-
	ь	Less accumulated depreciation 10	b		10c	
	11	Investments - publicly traded securities	••	1,399,823.	11	
	12	Investments - other securities See Part IV, line 11			12	
	13	Investments - program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		28,701.	15	28,701.
	16	Total assets. Add lines 1 through 15 (must equal line	e 34)	6,170,518.	16	6,468,021.
	17	Accounts payable and accrued expenses	2,898,081.	17	3,004,106.	
	18	Grants payable			18	
	19	Deferred revenue	•		19	
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability. Complete Part			21	
≣	22	Payables to current and former officers, directors, tru				,
Liabilities		highest compensated employees, and disqualified p of Schedule L	ersons Complete Part II		20	
	22	Secured mortgages and notes payable to unrelated	third parties	· · · · · · · · · · · · · · · · · · ·	22	
	23 24	Unsecured notes and loans payable to unrelated thin			24	
	25	Other liabilities (including federal income tax, payable	•		24	
	23	parties, and other liabilities not included on lines 17-2				
		Schedule D	14). Complete Falt X of	59,178.	25	56,820.
	26	Total liabilities. Add lines 17 through 25		2,957,259.	26	3,060,926.
		Organizations that follow SFAS 117, check here	► X and complete	2733712331		3700073200
S		lines 27 through 29, and lines 33 and 34.	and complete			
Net Assets or Fund Balances	27	Unrestricted net assets		3,213,259.	27	3,407,095.
ala I	28	Temporarily restricted net assets	•	<b>4</b> / <b>4</b> /- <b>4</b> /-	28	0, 20., 7000
Ö B	29	Permanently restricted net assets		29		
Š		Organizations that do not follow SFAS 117, check	here  and			
P.		complete lines 30 through 34.				
ţ	30	Capital stock or trust principal, or current funds		•	30	•
SSE	31	Paid-in or capital surplus, or land, building, or equipm	nent fund		31	
ž Ž	32	Retained earnings, endowment, accumulated income			32	
ž	33	Total net assets or fund balances		3,213,259.	33	3,407,095.
	34	Total liabilities and net assets/fund balances		6,170,518.	34	6,468,021.

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

	CPWR: THE CENTER FOR CONSTRUCTION				
Form	990 (2011) RESEARCH AND TRAINING	<u> 52-</u>	<u> 1172454</u>	<u>Pa</u>	ge 12
Pa	rt XI Reconciliation of Net Assets				
	· Check if Schedule O contains a response to any question in this Part XI				
	•				_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u> 15,15</u>	9,3	75.
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,96	5,5	<u> 39.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	19	3,8	36.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,21	3,2	<u> 59.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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	3,40	7,0	<u> 95.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			<b>,</b>	Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		<del></del>	1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
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 th	e audıt,			
	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 Sche	edule O.		1 -	
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			3	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Aud	ıt		
	Act and OMB Circular A-133?		3a	X	<u> </u>

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Public Charity Status and Public Support** 

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

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

2011
Open to Public Inspection

Name of the organization

CPWR: THE CENTER FOR CONSTRUCTION

Employer identification number

				CH AND TRAINI						<u>5</u> .	<u> 2-11/2454                                   </u>
Part		Reason	for Public Cha	rity Status (All organiz	zations mu	st comple	te this par	t ) See ins	tructions		
The org	janiz	ation is not a	a private foundation	because it is: (For lines	1 through 1	11, check	only one b	oox)			
1	] .	A church, co	nvention of churche	es, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)	).		
2	] .	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🗌	] .	A hospital or	a cooperative hosp	oital service organization	described	ın sectior	170(b)(1)	(A)(iii).			
4	] .	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ection 170	(b)(1)(A)(ii	ii). Enter t	he hospital's name,
		city, and stat									
5	] .	An organizati	on operated for the	benefit of a college or u	niversity ov	wned or o	perated by	a governi	mental uni	t describ	ed in
		section 170	(b)(1)(A)(iv). (Comp	lete Part II)	•			-			
6	1.	A federal, sta	te. or local governn	nent or governmental uni	t described	d in sectio	on 170(b)(	1)(A)(v).			
7 🖸		An organizati	on that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general	public described in
			b)(1)(A)(vi). (Compl								
8	$\neg$	-		section 170(b)(1)(A)(vi).	(Complete	Part II)					
9	_	•		ceives (1) more than 33	•	-	from contr	ibutions, n	nembershi	p fees, ar	nd gross receipts from
		activities rela	ted to its exempt fu	inctions - subject to certa	ain exception	ons, and (	2) no more	e than 33	1/3% of its	support	from gross investment
		income and u	unrelated business	taxable income (less sec	tion 511 ta	x) from bu	 Isinesses :	acquired b	y the orga	anization i	after June 30, 1975
			<b>509(a)(2).</b> (Complet			•		•	, ,		,
10 🗀	_			perated exclusively to te	st for publ	c safety	See <b>secti</b> o	on 509(a)(4	4).		
11 🗆	] .	An organizati	on organized and o	perated exclusively for the	he benefit o	of, to perf	orm the fu	nctions of,	or to carr	y out the	purposes of one or
		more publicly	supported organiz	ations described in secti	on 509(a)(1	1) or secti	on 509(a)(2	2). See <b>se</b> e	ction 509(	a)(3). Che	eck the box that
		describes the	e type of supporting	g organization and compl	ete lines 1	1e throug	h 11h.				
		a 🔲 Type I	ь 🗆	Type II	с 🔲 Тур	e III - Fund	ctionally in	tegrated		d 🗀	Type III - Other
e 🗌		By checking	this box, I certify th	at the organization is not	controlled	directly o	r indirectly	y by one o	r more dıs	qualified	persons other than
		foundation m	anagers and other	than one or more publicly	y supporte	d organiz	ations des	cribed in s	ection 50	9(a)(1) or	section 509(a)(2).
f		If the organiz	ation received a wr	tten determination from	the IRS tha	atıtıs a Ty	pe I, Type	II, or Type	e III		
		supporting o	rganization, check t	his box							
g		Since August	t 17, 2006, has the	organization accepted ai	ny gift or co	ontributioi	n from any	of the foll	owing per	sons?	
		(i) A perso	n who directly or inc	directly controls, either al	lone or tog	ether with	persons o	described	ın (ıı) and (	(III) below,	Yes No
		the gove	erning body of the s	supported organization?	_						11g(i)
	1	(ii) A famıly	member of a perso	on described in (i) above?	•						11g(ii)
		(iii) A 35% d	controlled entity of a	a person described in (i) o	or (11) above	∍? .		_			11g(iii)
h		Provide the fo	ollowing information	n about the supported or	ganızatıon	(s)					
(i) Na	me c	f supported	(ii) EIN	(iii) Type of			(v) Did yo		(vi) ls organizati	s the	(vii) Amount of
		nization		organization (described on lines 1-9	in col. (i) listed in your organization in col.			(i) organiz	zed in the [	support	
				above or IRC section	governing	aocument?	(I) or you	r support?	`` U.S	5.?	
				(see instructions))	Yes	No	Yes	No	Yes	No	
						İ					
						<u> </u>		ļ <u>-</u>			
									-		
							-		-		
				-						-	
otal											

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12

Schedule A (Form 990 or 990-EZ) 2011 RESEARCH AND TRAINING 52-1172454 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

_	*		
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization	ation failed to qualify under	Part III If the organization
	fails to qualify under the tests listed below, please complete Part III)		

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and					_ • • • • • • • • • • • • • • • • • • •	
	membership fees received. (Do not						
	include any "unusual grants ")	14,757,097	13,660,939,	13,260,135.	13,773,140.	14,211,031,	69,662,342.
2	Tax revenues levied for the organ-			, ,			
	ization's benefit and either paid to		•				
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	]					
4	Total. Add lines 1 through 3	14,757,097,	13,660,939,	13,260,135,	13,773,140.	14,211,031,	69,662,342.
5	The portion of total contributions		, t ,	a,	,	, , , , , , , , , , , , , , , , , , , ,	
	by each person (other than a	,					
	governmental unit or publicly		,			, "	
	supported organization) included	* ;	, **,	٠ ،	,		
	on line 1 that exceeds 2% of the		. 5	v	1.1		
	amount shown on line 11,		·, «				
	column (f)	*.,	\$ 18		24.	\```, \\	
6	Public support. Subtract line 5 from line 4	- >>	.Syrk	, 53		۶۰ } ه	69 662 342.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	14,757,097.	13,660,939.	13,260,135.	13,773,140.	14,211,031.	69,662,342,
8	Gross income from interest,						•
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	104,459.	44,890.	19,852.	15,948.	9,233.	194,382.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	3,307.	556.	956.	15,242.	9,492.	<u> 29,553.</u>
	<b>Total support.</b> Add lines 7 through 10	*,	32 \$	\$0.0 W	3, ,		69,886,277.
	Gross receipts from related activities,			-			,390,504.
13	First five years. If the Form 990 is for		first, second, thire	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
<u> </u>	organization, check this box and stor	here	<u> </u>	<u>-</u>	<u>.</u>		<u> </u>
	tion C. Computation of Publ				····		
	Public support percentage for 2011 (I			olumn (f))		14	99.68 %
	Public support percentage from 2010	•	,		<u>.</u>	15	99.56 %
16a	33 1/3% support test - 2011. If the c				14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		_				_ <b>►</b> [X]
D	33 1/3% support test - 2010. If the c				line 15 is 33 1/3%	or more, check th	is box
47-	and stop here. The organization qual			•	40.40	:: . <b></b> .	. ▶∟
1/a	10% -facts-and-circumstances test						
	and if the organization meets the "fac					τ IV how the organ	ization
ı.	meets the "facts-and-circumstances"				_		. ▶∟
b	10% -facts-and-circumstances test						
	more, and if the organization meets the				•		, r
40	organization meets the "facts-and-circ					-	<b>P</b>
18	Private foundation. If the organizatio	n ala not check a t	oox on line 13, 16a	a, 16b, 1/a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2011

# Schedule A (Form 990 or 990 EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not					<u>}</u>	
include any "unusual grants.")						1
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that			••••			
are not an unrelated trade or bus-	1					
iness under section 513						
4 Tax revenues levied for the organ-	,					
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
						1
6 Total. Add lines 1 through 5					<del>                                     </del>	-
7a Amounts included on lines 1, 2, and					1	
3 received from disqualified persons				<del>                                     </del>		<del> </del>
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)	* ar (			<u> </u>	444.	<u> </u>
Section B. Total Support					·	
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6			·			
10a Gross income from interest, dividends, payments received on						1
securities loans, rents, royalties						
and income from similar sources						
<b>b</b> Unrelated business taxable income					[	
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,					ł	
whether or not the business is regularly carried on						
12 Other income. Do not include gain		· · · · · · · · · · · · · · · · · · ·				
or loss from the sale of capital						
assets (Explain in Part IV.)  13 Total support (Add lines 9, 10c, 11, and 12)		· · ·				
	the ergonization's	first second this	d fourth or fifth t		L	
14 First five years. If the Form 990 is for check this box and stop here	tile Organization S	msi, secona, mir	a, iourni, or min t	an year as a sectio	ar soricija) organ	
Section C. Computation of Publi	ic Support Per	rcentage			-	
15 Public support percentage for 2011 (I			column (f)		15	0/
16 Public support percentage from 2010		-	ouni (ij)		15	% %
Section D. Computation of Inves					16	90
		<u>~</u>	10 calar (n)		47	^-
17 Investment income percentage for 20			ie 13, column (f))		17	%
18 Investment income percentage from 2		•			18	%
19a 33 1/3% support tests - 2011. If the	-					17 is not
more than 33 1/3%, check this box ai	nd stop here. The	organization quali	fies as a publicly	supported organiz	ation .	. ▶□
b 33 1/3% support tests - 2010. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	ınızatıon qualifies	as a publicly supp	orted organizatıoı	ր ▶∐
20 Private foundation. If the organization	n did not check a l	box on line 1 <u>4, 19</u>	a, or 19b, check ti	nis box and see ins	structions	▶∟_

### **SCHEDULE C**

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

-		or o	y 14x), or 1 orin 550-1	zz, rait v, inic ooc (rroxy	ux, tien
Name of or	0.501(c)(4), (5), or (6) organiza		MODDIOMION	Emn	loyer identification number
INAMINE OF OF	o CIMIC.	THE CENTER FOR CO	DNSTRUCTION	Line	•
Part I-A	Complete if the or	CH AND TRAINING ganization is exempt und	dor coction 501/a	or is a section 527 (	52-1172454
r al t I-A	Complete if the or	gamzation is exempt und	der Section Sorie	or is a section 327 c	n gamzation.
4 Drovus	to a decoration of the argon	ration's direct and indirect notiti	aal aamnayan aatuutya	o in Doct IV	
	•	ization's direct and indirect politic	cai campaign activities		8
	al expenditures	•			P
3 Voluni	teer hours	• • •		•	
Part I-B	Complete if the or	ganization is exempt und	der section 501(c	:)(3).	
1 Enter	the amount of any excise tax	k incurred by the organization un	der section 4955	▶ 5	S
2 Enter	the amount of any excise tax	k incurred by organization manag	jers under section 495	55 <b>▶</b> 9	\$
3 If the	organization incurred a secti	on 4955 tax, did it file Form 4720	) for this year?		Yes No
4a Was a	correction made?				Yes No
	s," describe in Part IV.				•
Part I-C	Complete if the or	ganization is exempt und	der section 501(c	), except section 501	(c)(3).
1 Enter	the amount directly expende	ed by the filing organization for se	ection 527 exempt fun	ction activities > 5	3
2 Enter	the amount of the filing orga	nization's funds contributed to o	ther organizations for	section 527	
exemp	ot function activities	_		<b>▶</b> :	B
3 Total	exempt function expenditure	es Add lines 1 and 2. Enter here	and on Form 1120-PO	oL,	
line 17	'b			<b>&gt;</b>	
4 Did th	e filing organization file <b>Forn</b>	1120-POL for this year?			Yes No
		employer identification number (E	IN) of all section 527 r	political organizations to whi	
		ation listed, enter the amount pa	•		
contri	butions received that were p	romptly and directly delivered to	a separate political or	rganization, such as a separ	ate segregated fund or a
politic	al action committee (PAC)	f additional space is needed, pro	vide information in Pa	rt IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(-)	(2)	(-,	filing organization's	contributions received and
		,		funds. If none, enter -0-	
					delivered to a separate political organization.
					If none, enter -0-
	<del></del>				
	<del></del>				
					•
		j.	1		1

132041 01-27-12

LHA

Schedule C (Form 990 or 990-EZ) 2011

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

CPWR. THE CENTER FOR CONSTRUCTION

Schedule C (Form 990 or 990-EZ) 2011 I	RESEARCH A	ND TRAINING		52-1	172454 Page 2
(election under sec		inprunder sectio		ieu i oi iii oi oo	
A Check ► If the filing organizate expenses, and share	ion belongs to an af			d group member's nam	e, address, EIN,
Limit	s on Lobbying Exp	and "limited control" pro enditures eunts paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
<ul> <li>1a Total lobbying expenditures to influ</li> <li>b Total lobbying expenditures to influ</li> <li>c Total lobbying expenditures (add lir</li> <li>d Other exempt purpose expenditure</li> </ul>	ence a legislative bones 1a and 1b) s	ody (direct lobbying)	•		
e Total exempt purpose expenditures	•	•	· • ·		· - ·
f Lobbying nontaxable amount. Ente				<u> </u>	<del></del>
If the amount on line 1e, column (a) on Not over \$500,000  Over \$500,000 but not over \$1,000  Over \$1,000,000 but not over \$1,500  Over \$1,500,000 but not over \$17,000  Over \$17,000,000	20% o ,000 \$100,0 00,000 \$175,0	bbying nontaxable am f the amount on line 1e. 100 plus 15% of the exc 100 plus 10% of the exc 100 plus 5% of the exce	ess over \$500,000. ess over \$1,000,000.		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
g Grassroots nontaxable amount (entitle in the subtract line 1g from line 1a. If zero is Subtract line 1f from line 1c. If zero is fithere is an amount other than zero reporting section 4911 tax for this year.	or less, enter -0- or less, enter -0- o on either line 1h o year?	r line 1i, did the organiza		. [	Yes No
•		section 501(h) election		<u>-</u> '	
COI	· · · · · · · · · · · · · · · · · · ·	he instructions for line	<del></del> -	age 4.)	<del></del>
	Lobbying Expe	enditures During 4-Yea	r Averaging Period	T	
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	. <del> </del>	NX X - 48			
b Lobbying ceiling amount (150% of line 2a, column(e))	, S				
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	, , , , , , , , , , , , , , , , , , ,				
Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

52-1172454 Page 3

Schedule C (Form 990 or 990 EZ) 2011 RESEARCH AND TRAINING 52-117245

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)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?	No X	Amo	unt
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?			unc
or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?			
d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?	X		
e Publications, or published or broadcast statements?	X		
The state of the s	X		
	X		
f Grants to other organizations for lobbying purposes?	X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		48	3, <u>000</u>
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		
i Other activities?	X		
j Total Add lines 1c through 1i		48	3,000
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	X		
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	c)(5), or se	ection	
501(c)(6).			
	<del></del>	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(	3_	<u> </u>	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (answered "Yes."			
1 Dues, assessments and similar amounts from members	1	1	
<ul> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political</li> </ul>	1_		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	1_		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	7		
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> </ul>	2a	,	
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> </ul>	2a 2b	,	
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ul>	2a 2b 2c		
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> </ul>	2a 2b	,	
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess</li> </ul>	. 2a 2b . 2c 3		
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political</li> </ul>	. 2a 2b . 2c . 3		
<ul> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> <li>Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues</li> <li>If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess</li> </ul>	. 2a 2b . 2c 3		

# **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 Open to Public Inspection

Name of the organization

CPWR: THE CENTER FOR CONSTRUCTION

DECENDOU AND TOATHING

Employer identification number 52-1172454

Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Fu	nds or A	ccounts. Complete if the
<u> </u>	organization answered "Yes" to Form 990, Part IV, line 6	145 01 7	iooodiitoi oompiete ii tiio
	(a) Donor advised funds	1 1	b) Funds and other accounts
4		+ '	b) i and and other accounts
1	Total number at end of year  Aggregate contributions to (during year)		
2			
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor a	avisea tun	
_	are the organization's property, subject to the organization's exclusive legal control?	<b>.</b>	YesNo
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds car		•
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purposes the project benefit?	ose conter	• – –
Pa	impermissible private benefit?  In I Conservation Easements. Complete if the organization answered "Yes" to Form 99	O Port IV	Yes No
L		U, Fait IV,	mie /.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	historial	humanartant land area
			ly important land area
	<del></del>	cermea m	stone structure
•	Preservation of open space	6	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo	orm or a cc	onservation easement on the last
	day of the tax year		Hold at the End of the Toy Voor
а	Total number of conservation easements		Held at the End of the Tax Year
b			2b
0	Number of conservation easements on a certified historic structure included in (a)		2c 2c
ن	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure included in (a)		26
u	listed in the National Register	ucture	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by	the organ	2d
•	year	r ti le Orgai	iization during the tax
4	Number of states where property subject to conservation easement is located		
5	Does the organization have a written policy regarding the penodic monitoring, inspection, handling	of.	
	violations, and enforcement of the conservation easements it holds?	O.	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easemen	 Is during t	. • ——
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements du	•	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section		
•	and section 170(h)(4)(B)(ii)?	0()()(-	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expe	Inse stater	• •
	include, if applicable, the text of the footnote to the organization's financial statements that describ		
	conservation easements	300 1110 015	ga meanor o accounting to
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or	r Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue sta	atement ar	nd balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furth	erance of	public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.		,
ь		nent and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of		•
-	relating to these items.		.,
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical treasures, or other similar assets for final	ncial dain.	provide
_	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	,	•
а	B		▶ \$
	Assets included in Form 990, Part X		<b>&gt;</b> \$

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

Schedule D (Form 990) 2011

CPWR: THE CENTER FOR CONSTRUCTION

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continue 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection ite	
3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection ite	
(check all that apply)	ns
a Public exhibition d Loan or exchange programs	
b Scholarly research e Other	
c Preservation for future generations	
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.	
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	_
to be sold to raise funds rather than to be maintained as part of the organization's collection?	No_
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included	
on Form 990, Part X?	□ No
b If "Yes," explain the arrangement in Part XIV and complete the following table	
Amount	
c Beginning balance	
d Additions during the year	
e Distributions during the year	-
f Ending balance	
2a Did the organization include an amount on Form 990, Part X, line 21?	No
<b>b</b> If "Yes," explain the arrangement in Part XIV	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10	
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four year	s back
1a Beginning of year balance	
b Contributions	
c Net investment earnings, gains, and losses	
d Grants or scholarships	
e Other expenditures for facilities	1
and programs	
f Administrative expenses	
g End of year balance	
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:	
a Board designated or quasi-endowment ▶ %	
b Permanent endowment ▶ %	
c Temporarily restricted endowment ▶ %	
The percentages in lines 2a, 2b, and 2c should equal 100%.	
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	
by:	No
(i) unrelated organizations 3a(i)	
(ii) related organizations	
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIV the intended uses of the organization's endowment funds.	
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.	
Description of property  (a) Cost or other basis (investment)  (b) Cost or other basis (other)  (c) Accumulated (d) Book value (d) Book value (d) Book value (d) Book value (e) Accumulated	16
1a Land	
b Buildings	
c Leasehold improvements	
d Equipment	
e Other	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	0.

Schedule D (Form 990) 2011

(10)Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 56,820.

FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under

FIN 48 (ASC 740 FIN 48 (ASC 740

(9)

CPWR: THE CENTER FOR CONSTRUCTION

	dule D (Form 990) 2011 RESEARCH AND TRAINING			<u>52-1</u>	<u> 172454</u>	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	ncial Stat	ement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		15,159	375.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		14,965	,539.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			,836.
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	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10		193	,836.
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Rev		Return		<del>, 030.</del>
1	Total revenue, gains, and other support per audited financial statements			1	15,159	375.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				13,133	, 3 , 3 .
a	Net unrealized gains on investments	2a				
h	Donated services and use of facilities		· · · · · · · · · · · · · · · · · · ·	<b>∃</b>		
D	Recoveries of prior year grants	2b		-		
C		2c		-		
đ	Other (Describe in Part XIV)	2d		<b>-</b>   · -		_
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	15,159	<u>,375.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1.1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b			4c		0.
_ 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	15,159	,375.
Par	t XIII Reconciliation of Expenses per Audited Financial Statement	ents With Exp	enses pe	r Retur	ฑ	
1	Total expenses and losses per audited financial statements		- •	1	14,965	,539.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a		1 1		
b	Prior year adjustments	2b				
С	Other losses	2c		1 1		
d	Other (Describe in Part XIV)	2d		1		
e	Add lines 2a through 2d	20		ا ۾ ا		0.
3	Subtract line 2e from line 1		•	2e	14,965	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		-	3	14,305	, 333.
	, , , , , , , , , , , , , , , , , , , ,	Lal				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-  ´,		
b	Other (Describe in Part XIV)	4b				_
_	Add lines 4a and 4b			4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	·		5	<u>14,965</u> ,	<u>,539.</u>
-	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III					4; Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also compl					
PAR	RT X, LINE 2: IN JUNE 2006, THE FINANCIAL A	ACCOUNTIN	G STANI	DARDS	BOARD	
(FA	SB) RELEASED FASB ASC 740-10, INCOME TAXES	ס העודה כ	BUMTUE.	s GIIT	DANCE F	7∩P
		,	TO V I DIL	<u>,                                    </u>	DANCE	OIC
REF	ORTING UNCERTAINTY IN INCOME TAXES. FOR TH	HE YEAR E	NDED JU	JNE 3	0, 2012	2,
CDW	R HAS DOCUMENTED ITS CONSIDERATION OF FASE	2 3 CC 7 4 O	10 ANT	० ठका	IPDMTNIPT	`
CI	K MAD DOCOMENTED 115 CONSIDERATION OF PASE	ASC 740	-IO MINI	ואַע כ	EKMINEL	
THA	T NO MATERIAL UNCERTAIN TAX POSITIONS QUAL	JIFY FOR	EITHER	RECC	GNITION	OR
DIS	CLOSURE IN THE FINANCIAL STATEMENTS. THE F	EDERAL F	ORM 990	), RE	TURN OF	7
ORG	ANIZATION EXEMPT FROM INCOME TAX, IS SUBJE	CT TO EX	AMINAT	ION B	Y THE	
INT	ERNAL REVENUE SERVICE, GENERALLY FOR THREE	YEARS A	FTER IT	rıs	FILED.	

Schedule D (Form 990) 2011

# 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.

2011
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

CPWR: THE CENTER FOR CONSTRUCTION

RESEARCH AND TRAINING

Employer identification number 52-1172454

**Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items 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) b 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 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. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations X Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment? 4a X Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 3. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a X Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. 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 The organization? 6a X 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 X 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 Х 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2011

# RESEARCH AND TRAINING

Schedule J (Form 990) 2011

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) Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Do not list any individuals that are not listed on Form 990, Part VII.

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	ε	192,789.	3,773.	14,063.	50,217.	30,318.	291,160.	0
1 ERICH J. STAFFORD	⊞	L				- 1	- 1	0
	3	117,837.	2,306.	2,239.	31,47	25,523.	179,376.	0
2 MARY TARBRAKE	(ii)	0	0	0		0	0.	0
	3	140,645.	2,927.	0	35,88	28,699.	208,160.	0
3 LAURA WELCH	Ξ		0	0	- 1		- 1	0
	€	135,187.	2,646.	2,567.	35,742.	25,715.	201,857.	0.
4 JANIE GITTLEMAN	Ξ	0	0	0	0		0	0
	Ξ	135,977.	2,661.	0	36,406.	29,688.	204,732.	0.
5 JAMES PLATNER	(iii	ı	- 1	0	0		ı	0.
•	Ξ	113,326.	2,21	2,153.	31,465.	28,297.	177,459.	0
6 XIUWEN DONG	<u> </u> (II)	0.		0.	0.	0.	0.	0
	Θ	106,012.	2,067.	0	29,564.	28,219.	165,862.	0.
7 EILEEN BETIT	<u> </u>	0.	0	0.	0.	0	0	0
•	Ξ							
8	<u> </u>							
	ε							
6	▣							
	Ξ							
10	▣							
	Ξ							
11	▣							
	Ξ							
12	⊞							
	Ξ							
13	⊞							
	Ξ							
14	Œ							
	ε							
15	▣							
	Ξ							
16	<u> </u>							

Schedule J (Form 990) 2011

### **SCHEDULE 0**

(Form 990 or 990-EZ)

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. Department of the Treasury ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

CPWR: THE CENTER FOR CONSTRUCTION RESEARCH AND TRAINING

Employer identification number 52-1172454

RESEARCH AND INAINING 52 1172434
FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
THE ORGANIZATION BEGAN THE DUKE UNIVERSITY COPD PROGRAM - TO PROVIDE
HEALTH SCREENINGS FOR CHRONIC OBSTRUCTIVE LUNG DISORDERS (COPD) IN
CONSTRUCTION WORKERS.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
THE ORGANIZATION CEASED CONDUCTING THE ARRA HIEHS HAZARDOUS WASTE
PROGRAM DUE TO LIMITED FUNDING RELATED TO CONGRESSIONAL STIMULUS
PACKAGE.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
DUKE UNIVERSITY COPD SUBGRANT
EXPENSES \$ 64,315. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
DOL WORKER EXPOSURE
EXPENSES \$ 385,884. INCLUDING GRANTS OF \$ 0. REVENUE \$ 446,804.
SMOHIT SHEET METAL SCREENING
EXPENSES \$ 39,289. INCLUDING GRANTS OF \$ 0. REVENUE \$ 81,500.
NATIONAL RESOURCE CENTER
EXPENSES \$ 248,961. INCLUDING GRANTS OF \$ 0. REVENUE \$ 336,149.
UNITED AGAINST DIABETES
EXPENSES \$ 52,474. INCLUDING GRANTS OF \$ 0. REVENUE \$ 65,166.

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

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

Name of the organization CPWR: THE CENTER FOR CONSTRUCTION RESEARCH AND TRAINING	Employer identification number 52-1172454
FORM 990, PART VI, SECTION B, LINE 11: THE 990 WAS PREPA	RED BY THE OUTSIDE
ACCOUNTANTS AND THOROUGHLY REVIEWED INTERNALLY BY MANAGE	MENT. CPWR MAKES A
COPY OF THE RETURN AVAILABLE TO THE BOARD MEMBERS PRIOR	TO SUBMISSION OF
THE RETURN TO THE IRS.	
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD AND KE	Y EMPLOYEES SIGN A
CONFLICT OF INTEREST FORM ANNUALLY. IN THE RARE INSTANC	E THAT A CONFLICT
DOES ARISE, THE MATTER IS REVIEWED BY THE BOARD OF DIRECTORS AND THE	
EXECUTIVE DIRECTOR FOR ANY ACTION NECESSARY.	
FORM 990, PART VI, SECTION B, LINE 15A: THE SALARY OF TH	E EXECUTIVE
DIRECTOR IS DETERMINED USING COMPARABLE DATA, PRIMARILY	FROM THE MEMBER
ORGANIZATIONS WITHIN THE BUILDING AND CONSTRUCTION TRADE	S DEPARTMENT. IT IS
APPROVED BY THE BOARD OF DIRECTORS AND THE DECISION OF T	HE BOARD IS
DOCUMENTED. THIS PROCESS WAS LAST COMPLETED IN MARCH OF	2008 WITH SCHEDULED
COST OF LIVING ADJUSTMENT INCREASES EACH OF THE FOLLOWIN	IG YEARS.
FORM 990, PART VI, SECTION C, LINE 19: UPON WRITTEN REQU	WEST, CPWR WILL
PROVIDE PDF COPIES OF GOVERNING DOCUMENTS, CONFLICT OF I	NTEREST POLICY OR
FINANCIAL STATEMENTS.	