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# **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)

2012

OMB No 1545-0047

Department of the Treasury							
		e Service	► The organization may have to use a copy of this return to satisfy state reporting			Inspection	
A F	or the	2012 calend	ar year, or tax year beginning , 2012, and en	ding		, 20	
B c	heck if a	pplicable	C Name of organization Associated Contractors of New Mexico		P	Employer identification no	
ע ע	ddress d	hange	Doing Business As		8	5-0020740	
∐ N	ame cha	nge	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number		
In	ıtıal retur	m	P O Box 25384			505) 344-2072	
□ ਾ	erminate	d	City, town or post office, state, and ZIP code		ļ	1,260,833	
∐ ∧	mended :	return	Albuquerque, NM 87125		G	Gross receipts \$	
∐ A	pplication	n pending	F Name and address of principal officer J Michael Beck	H(a) Is this a or	un return	ofor — —	
			Same as C above	H(a) Is this a gro affiliates?	op rotain	Yes 💹 No	
	ax-exemp		501(c)(3)	H(b) Are all affili	ates inclu	ided?	
		▶ N/A		H(c) Group exer	nption nu	mber >	
		_	Corporation ☐ Trust ☐ Association ☐ Other ▶ ☐ L Year of formation 19	925 M State	of legal d	lomicile NM	
,par	<del></del>	Summar					
		•	be the organization's mission or most significant activities The Organization				
9			with the opportunity to work collectively to develop in				
Activities & Governance >			to improve the overall work practices of the industry,	and provid	<u>le a</u>	forum for	
[ <u>§</u>			networking.			<del> </del>	
S	7		ox ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of	its net assets	ا م		
24	100		oting members of the governing body (Part VI, line 1a)	• • • • • • • •	3	10	
	w		dependent voting members of the governing body (Part VI, line 1b)		4	10	
<b>1</b>	107		r of individuals employed in calendar year 2012 (Part V, line 2a)		5	5	
Ac			r of volunteers (estimate if necessary)		6		
1.	~L		ed business revenue from Part VIII, column (C), line 12 · · · · · · · · · · · · · · · · · ·		7a	5,200	
1.	٦	ivet unrelated	d business taxable income from Form 990-T, line 34		7b	0	
	I/LA L	Contributions	Land grants (Part VIII June 1h)	Prior Year	100	Current Year	
16			and grants (Part VIII, line 1h)		,198	837,260	
ı .	9	-	vice revenue (Part VIII, line 2g)		,974	377,505	
	11 2		ncome (Part VIII, column (A), lines 3, 4, and 7d)		799	2,176	
7.	4 /		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,270)	11,916	
'뚬—			e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,212	, /01	1,228,857	
	14		to or for members (Part IX_column (A), line 4)		-		
(S)			242	,236	301,243		
· (5)			fundraising fees (Part IX) continue (AP) IME (Part IV)	,236	301,243		
E.S. S.			sing expenses (Part IX, Column (D), line 25) > 0			<u> </u>	
30	1		ses (Part IX, column (A) (in) s (1) (1) 11 12 19 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1	032	,694	757,545	
764	18	Total expens	es Add lines 13-17 (must equal Part IX, column (A), line 25)	1,175		1,058,788	
 	19		s expenses Subtract line 18 from-line 12		,771	170,069	
<u> </u>	1.0			Beginning of Current		End of Year	
ets c	20	Total assets	(Part X, line 16)	1,685		1,836,536	
Ass	21		s (Part X, line 26)		,842	824,511	
កូម៉ាល់ ឯទ្រព្ឋលេខ Net Assets or	1		r fund balances Subtract line 21 from line 20		, 956	1,012,025	
'ar			re Block	<u> </u>	,,,,,		
		of perjury, I decl	are that I have examined this return, including accompanying schedules and statements, and to the best of my kni	owledge and belief, it	IS		
	orrect, an	id complete Deci	anation of preparer (other than officer) is based on all information of which preparer has any knowledge		1		
ĭ		_	Amchan fr			8-1-13	
igr ero	1	Signatur	e of officer		Date		
:Čero	•	· -	J. MICHAEL BECK EXECUTIVE DIDO CTOR				
- <del></del>	i	Type or	print name and title				
-\$t.		Pnnt/Type pre	parer's name Preparer's signature A Date	Check	ıf PT	in .	
? aid	I	Richard		self-employe	- 1	P00015673	
₹rep	oarer		Richard D Neel CPA PA	Firm's EIN			
se	Only	Firm's addres		Phone no			
जो		<u> </u>	Albuquerque NM 87110	50	)5-8 <u>8</u>	9-4595	
∰ay t	he IRS	discuss this	return with the preparer shown above? (see instructions)			· · ☑ Yes ☐ No	
* 4			on Act Notice, see the separate instructions.			Form <b>990</b> (201 <del>2)</del>	
ijĒΑ						4	
เก๋า							

	m 990 (2012) Associated Contractors of New Mexico	. =.	85-0020740	Page 2								
Pa	rt III Statement of Program Service Accomplishments			_								
	Check if Schedule O contains a response to any question in this Part III	<u> </u>	· · · · · · · · · · ·	· · · · <u> </u>								
1	Briefly describe the organization's mission											
	The Organization's mission is to provide its members with the op											
	collectively to develop informational and educational programs to		e overall wo	<u>rk</u>								
	practices of the industry, and provide a forum for industry netwo	rking.										
2	Did the organization undertake any significant program services during the year which were not listed on	tho										
_	prior Form 990 or 990-EZ?		T ves F	Z No								
	If "Yes," describe these new services on Schedule O			7 140								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	services?		· · · · 🗋 Yes 🛭	No								
1	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											
<u>:</u>	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,											
-	the total expenses, and revenue, if any, for each program service reported											
4a	(Code) (Expenses \$ including grants of \$	) (Revenue	\$	)								
	N/A											
		_										
				<del></del>								
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	· · · · · · · · · · · · · · · · · · ·											
-												
-		· <u>· · · · · · · · · · · · · · · · · · </u>										
- 4b	(Code) (Expenses \$ including grants of \$	) (Revenue	\$	)								
			<del></del>									
			· · · · · · · · · · · · · · · · · · ·									
				<del></del> .								
			<del>_</del>									
		<del>-</del> , -										
4c	(Code) (Expenses \$ including grants of \$	) (Revenue	\$	)								
				<del></del>								
				<del> </del>								
		_		<del></del>								
			<del></del>	<del></del>								
4d	Other program services (Describe in Schedule O )	-		<del></del>								
	(Expenses \$ including grants of \$ ) (Revenue \$		)									
4e	Total program service expenses ▶		·									
EEA			Form	990 (2012)								

Part IV

Checklist of Required Schedules

No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? X 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Χ 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 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, Х 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 6 Χ Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Χ Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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 Χ 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 Χ 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a Χ 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 Χ c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c Χ 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 e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Χ 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 Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 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 and XII is optional 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 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 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Х 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 (see instructions) Χ 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Х 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Χ 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b

Part IV Checklist of Required Schedules (continued) 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 Χ 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 29 If "Yes," complete Schedule I, Parts I and III Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Χ 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 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I ?6 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Χ 26 ?7 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 Χ 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or 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 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 Χ 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 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 or IV, and Part V, line 1 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, 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 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, 37 Χ 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 Χ

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			$\cdot \square$
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			l
	reportable gaming (gambling) winnings to prize winners?	1c	Χ	L
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 5			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Χ	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	<u> </u>
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	_		١
	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		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	C-		37
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
U	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- 65		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			İ
_	and services provided to the payor?	7a	!	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7ө		1
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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			l
:1	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
120	against amounts due or received from them )	40-		
i2a h	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			İ
a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	42-		<del>                                     </del>
a	Note. See the instructions for additional information the organization must report on Schedule O	13a		<del> </del>
ь	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			
C	Enter the amount of reserves on hand			1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del></del>

Par	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	· · ·		<u>· 🛛</u>
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 10			
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent · · · · · · · · · 1b 10			
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		Х
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		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			<del></del> -
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	- T		<u> </u>
	the year by the following:			
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			$\vdash$
:	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ا و ا		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )			
	( The second of the second of	Ì	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	103	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			<u> </u>
	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		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		v
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
•	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	$\vdash$		V
13 14	Did the organization have a written document retention and destruction policy?	13		X
		14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by			
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	45-	v	
a	· •	15a	X_	<b>-</b>
b	Other officers or key employees of the organization	15b	Χ	<b>-</b>
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions )			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
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			
<u> </u>	organization's exempt status with respect to such arrangements?	16b		X
17	List the states with which a copy of this Form 990 is required to be filed			
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)			
•	available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public 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. The Organization (505)344-2072 P O Box 25384 Albuquerque, NM 87125			

Form 990 (201				Page
	Compensation of Officers, Directors, Trus Independent Contractors	tees, Key Employees,	Highest Compensated Employees	, and
	Check if Schedule O contains a response to any question	in this Part VII		. 🗆

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
- 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)	(B)			(0	<b>C)</b>			(D)	(E)	(F)	
Name and Title	Average	Position (do not check more than one box, unless person is both an						Reportable	Reportable	Estimated amount of other	
	hours per week (list any							compensation from	compensation from related		
	hours for							the	organizations	compensation	
	related	officer and a director/trustee)						organization	(W-2/1099-MISC)	from the	
	organizations below dotted line)	I t d nr i d u r i s e v t c i e t d e o u r a o I r	In r	1 f	Key employee	g mp r m e e o r t s e e t e e d		(W-2/1099-MISC)		organization and related organizations	
(1) Adam Triolo											
Board Tresurer	2.00	X		Х			L_	0	0	0	
(2) Alan Stott											
Past President	1.00	X		Х	_			0	0	0	
(3) David Krueger											
Member	1.00	X	ļ					0	0	0	
(4) David Otoski							ļ				
Board Vice President	2.00	X		X		ļ		0	0	0	
(5) Ed Widgeon		l									
Member	1.00	Х		_	-	-		0	0	0	
(6) Ernie Carlson		l		١							
Board President	3.00	X		X		-		0	0	0	
(7) Ken Wylie		3.7						_	_	_	
Member	1.00	X	<del> </del>	-			$\vdash$	0	0	0	
(8) Kevin Swaving		١,,						_			
Member	1.00	X	-	-		-	-	0	0		
(9) Mike Moehn	1	\ <sub>v</sub>						_		:	
Member	1.00	X	├	-		-		0	0_	0	
(10)Rod Billingsley	1 22	,						_		_	
Member (11) T. Michael Book	1.00	X	$\vdash$	-	$\vdash$			0	0	0	
(11)J Michael Beck	E0 00			X	X			100 000		01 100	
Executive Director (12)	50.00			^	^		-	103,969	00	21,128	
(13)					_		_				
(14)	_	+					_				

Form 99		ctors of	New	меж	cic	<u>。</u>				85-00207	40	P	Page 8
Part \	/II Section A. Officers, Directors, Trustees	, Key Employ	ees, a	nd F	ligh	est	Comp	ensa	ated Employees (	continued)	<b>.</b>		
	(A) Name and title	Average hours per week (list any hours for	box,	unles	Po: eck n s per	C) sition nore the son is ctor/tre	(E)  Reportable compensation from related organizations	con	(F) stimated mount of other opensate	f ion			
•		related organizations below dotted line)	ltd nri dur se vtc ide o u o l	n r s u t s i t t e u e	f f c e	K e y e m p l o y e e	H c e g mp g mp h e e o y t s e t e d	F o r m e r	organization (W-2/1099-MISC)	(W-2/1099-MISC)	on ar	from the ganization nd relate ganizatio	on ed
(15)				İ									
(16)													
(17)													
(18)											-		
(19)		-											
(20)													
(21)													
(22)													
(23)													
(24)													
25)				-	<del> </del>	<del>- </del>		<del> </del>					-
	Sub-total	tion A		• •	• •	•••	• • •	<b>•</b>					
d	Total (add lines 1b and 1c)							<u> </u>	103,969	0		21,1	128
	Total number of individuals (including but not limite reportable compensation from the organization		ed abo	ve)	wno	rece	eivea r	nore	tnan \$100,000 of	1		<del> </del>	Т
	Did the organization list any former officer, director		-	-	ee, d	or hig	ghest o	comp	pensated			Yes	No
	employee on line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is the sum of re				 and	· · othe	comp	· ·	ation from the		3	-	X
i	organization and related organizations greater tha individual	n \$150,000? lf	f "Yes,"	con	nple • •	te S	chedul	e J 1	for such		4		X
(	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes,"			-			_	nizat	ion or individual		5		X
	on B. Independent Contractors												
	Complete this table for your five highest compensation from the organization Report comp												
	year (A)								(B)			(C)	
	Name and business addres	ss				_			Description of	services	Com	pensatio	חנ
-				·									
2	Total number of independent contractors (including	-		ose	liste	d ab	ove) v	vho					
	received more than \$100,000 of compensation fro	m the organiza	ation										

85-0020740

Form 990 (2012)
Part VIII

		Check if Schedule O contains a response	to an	y question in this P				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इडि	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues	1b	837,260				
G E	С	Fundraising events	1c	7		ļ		
ar /	d	*	1d					
λΈ ΘΈ	е	Government grants (contributions)	1e					
e Si	f	All other contributions, gifts, grants,						
in in in in in in in in in in in in in i		and similar amounts not included above	1f				İ	
₩Ď	g	Noncash contributions included in lines 1a-1	If \$	•				
a Sol	h	Total. Add lines 1a-1f			837,260			
Ĭ	Ì			Business Code				
Program Service Revenue	2a	TTCP training		611600	194,485	194,485		
9.0	1	Traffic control trainin		611600	105,025	105,025		
8	1	Other training		611600	77,995	77,995		
Ę	d		_					
Ē	е							-
2 Bo	f	All other program service revenue · · · ·	<del></del> .					
4		Total. Add lines 2a-2f			377,505			
	3	Investment income (including dividends, interaction and other similar amounts)			2,176			2,176
	4	Income from investment of tax-exempt bond			, ,			
	5	Royalties						
L		(ı) Real		(II) Personal				
	6a		700	<u> </u>				
•	1		976					
			276			İ		
		Net rental income or (loss)			(8,276)	Ì	:	(8,276)
		Gross amount from sales of (i) Secunte		(II) Other	107=:01			(0,2,0)
	"	assets other than inventory		( ) =				
	ь	Less cost or other basis						
		and sales expenses · · · ·				i		
		Gain or (loss)						
a	1	Net gain or (loss)						
enne	8a	Gross income from fundraising						
	1	events (not including \$	_					
Other Re		of contributions reported on line 1c)						
the the	١.	See Part IV, line 18						
0	1	Less direct expenses						
	1	Net income or (loss) from fundraising events	•			<del></del>		
	9a	Gross income from garning activities						
	١.	See Part IV, line 19 · · · · · · · · · · · · · · · · · ·						
		Less direct expenses		L				
	c	Net income or (loss) from gaming activities	• •					
		Gross sales of inventory, less returns and allowances						
		Less cost of goods sold · · · · · · · ·						
	C	Net income or (loss) from sales of inventory		<b>&gt;</b>				
		Miscellaneous Revenue		Business Code				i
		Miscellaneous reimburse		900099	14,992	14,992		
	b	Directory advertising		511140	5,200		5,200	
	C							
		All other revenue			60.100			
					20,192	300 407	E 000	16 100
	112	Total revenue. See instructions	• • •		1,228,857	392,497	5,200	(6,100)

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) Check if Schedule O contains a response to any question in this Part IX (B) (D) Do not include amounts reported on lines 6b. 7b. (A) Total expenses (C) Fundraising Program service Management and 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 . Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Compensation of current officers, directors, 103,969 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 . . . . . . . . . . . . . . 135,276 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 37,538 10 24,460 11 Fees for services (non-employees) b Legal 55,377 Accounting C 6,336 d Lobbying 39,618 Professional fundraising services See Part IV, line 17 . е Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) ... 45 12 14,000 13 14,595 14 Information technology . . . . . 4,578 ٠5 16 42,634 17 13,079 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 18,329 20 21 Payments to affiliates . . . . . . 57,764 22 Depreciation, depletion, and amortization 34,416 23 Other expenses Itemize expenses not covered 24 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 O) а Automobile 22,000 b Bad debts 61,193 Dues, subscriptions 11,526 Entertainment, meals 5,189 All other expenses 356,866 25 Total functional expenses. Add lines 1 through 24e 0 0 1,058,788 0 Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► X if following SOP 98-2 (ASC 958-720)

Form 990 (2012) **Part X** B 2) Associated Contractors of New Mexico
Balance Sheet

		Check if Schedule O contains a response to any question in this Part X		· · · ·	<u> </u>
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	17,228	1	69,953
	2	Savings and temporary cash investments	189,551	2	417,341
	3	Pledges and grants receivable, net	•	3	
	4	Accounts receivable, net	246,644	4	149,092
	5	Loans and other receivables from current and former officers, directors			
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4985(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and		1 1	
:		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges	2,132	9	2,132
	10a	Land, buildings, and equipment cost or			2/202
		other basis Complete Part VI of Schedule D   10a   1,768,798		}	
	b	Less accumulated depreciation 10b 570 , 780	1,230,243	10c	1,198,018
	11	Investments - publicly traded securities	1,230,243	11	1,130,010
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,685,798	16	1,836,536
	17	Accounts payable and accrued expenses	41,619	17	12,362
	18	Grants payable	41,019	18	12,302
	19	Deferred revenue		19	48,801
	20	Tax-exempt bond liabilities		20	40,001
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors,		<del>  - '  </del>	
Liabilities		trustees, key employees, highest compensated employees, and			
lpil		disqualified persons Complete Part II of Schedule L		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties	000 000	23	762.240
	24	Unsecured notes and loans payable to unrelated third parties	802,223	24	763,348
	25	Other liabilities (including federal income tax, payables to related third		24	
	25	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	042.040	26	204 511
	20	Organizations that follow SFAS 117 (ASC 958), check here ► 🔀 and	843,842	26	824,511
ş		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets			
ala	27	Temporarily restricted net assets	841,956	27	1,012,025
d B	28	Permanently restricted net assets		<del></del>	·
Š	29	<b>_</b> _ <b>}</b>		29	
JF F		` "			
<b>S</b>	20	complete lines 30 through 34.		00	
sse	30	Capital stock or trust principal, or current funds		30	· · · · · · · · · · · · · · · · · · ·
Net Assets of Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund	<del> </del>	31	
Ne.	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	841,956	33	1,012,025
	34	Total liabilities and net assets/fund balances	1,685,798	34	1,836,536

_		990 (2012) Associated Contractors of New Mexico 85-00	<u> 20740</u>		Pa	age 12		
F	ar	t 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)		1,2	28,8	357		
	2	Total expenses (must equal Part IX, column (A), line 25)			58,7			
	3	Revenue less expenses. Subtract line 2 from line 1		170,069				
	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			41,9			
	5	Net unrealized gains (losses) on investments						
	6	Donated services and use of facilities						
	7	Investment expenses						
	8	Prior period adjustments						
	9	Other changes in net assets or fund balances (explain in Schedule O)				0		
1	0	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line						
		33, column (B))		1,0	12,0	25		
F	aı	t XII Financial Statements and Reporting						
_		Check if Schedule O contains a response to any question in this Part XII				. 🗌		
					Yes	No		
	1	Accounting method used to prepare the Form 990	Γ					
		If the organization changed its method of accounting from a prior year or checked "Other," explain in	j					
		Schedule O	ľ					
	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Χ			
		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	ſ					
		reviewed on separate basis, consolidated basis, or both				İ		
		Separate basis Consolidated basis Both consolidated and separate basis						
	b	Were the organization's financial statements audited by an independent accountant?		2b		X		
		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a						
		separate basis, consolidated basis, or both	1					
1		☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis						
÷	С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight						
		of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		Х		
		If the organization changed either its oversight process or selection process during the tax year, explain in						
		Schedule O						
	3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in						
		the Single Audit Act and OMB Circular A-133?	[	3a		Х		
	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		3ь				
EE	A			Form	990 (	2012)		

#### 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.

2012

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Department of the Treasury 'nternal 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

'f 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

_	Section 501(c)(4), (5), or (6) organizations	Complete Part III										
Nam	e of organization			Employe	r identification number							
	sociated Contractors of New			85-002								
Pa		ization is exempt under secti	<del></del>	s a section 527 org	anization.							
1	Provide a description of the organization's											
<u>.</u> 2	Political expenditures · · · · · · · · · · · · · · · · · · ·											
໌ 3	Volunteer hours	• • • • • • • • • • • • • • • • • • • •		· · · · · · · _								
- D-			F04/-\/0\									
		ization is exempt under secti	<u></u>									
, <b>1</b>	Enter the amount of any excise tax incurre											
2	Enter the amount of any excise tax incurre											
3	If the organization incurred a section 4955 Was a correction made?											
4a					· · 🗌 Yes 📗 No							
D <sub>2</sub>	If "Yes," describe in Part IV  rt I-C   Complete if the organ	ization is exempt under secti	on 501(c) exc	ent section 501(c)	(3)							
1	Enter the amount directly expended by the		<del></del>	epr section 50 I(c)	(3).							
•	activities			<b>b</b> c								
2	Enter the amount of the filing organization											
	527 exempt function activities											
: 3	Total exempt function expenditures Add I											
•	line 17b · · · · · · · · · · · · · · · · · · ·			<b>&gt; </b> ¢								
<b>: 4</b>	Did the filing organization file Form 1120-POL for this year?											
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing											
	organization made payments For each or	• •			_							
	the amount of political contributions receiv	• .										
	as a separate segregated fund or a politic		•	•								
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political							
	(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and							
				funds If none, enter -0-	promptly and directly							
					delivered to a separate political organization If							
					none, enter -0-							
/41												
(1)												
(2)												
(2)												
/3)												
:3)												
(4)												
·~ <i>,</i>												
(5)		<b> </b>										
				<u> </u>								
(6)												
, ~,					1							

_		Form 990 or 990-EZ) 2012 Associated C	ontractors of	f New Mexico		85-00207	
Pa	rt II-		on is exempt u	nder section 50	1(c)(3) and filed	l Form 5768 (elec	tion under
		section 501(h)).	<u> </u>		L - 651 - 4 - 4		
A	Check	if the filing organization belongs to	- ·		-	mbers	
_	<b>.</b>	name, address, EIN, expenses, at					
<u>-</u>	Check				у	(a) Eites	(h) Affiliated
•			bying Expenditure			(a) Filing organization's totals	(b) Affiliated group totals
40	Tak	(The term "expenditures" r				Organization o totalo	
1a b		al lobbying expenditures to influence public of		• •			
c		al lobbying expenditures to influence a legisla al lobbying expenditures (add lines 1a and 1b	•				·
d		• • •				-	
9		al exempt purpose expenditures (add lines 10					
f		bying nontaxable amount. Enter the amount	-				
		imns					
l		e amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is :		
		over \$500,000		mount on line 1e			
Į		er \$500,000 but not over \$1,000,000		s 15% of the excess of	over \$500,000		
	-	er \$1,000,000 but not over \$1,500,000		s 10% of the excess of	<del></del>		
		er \$1,500,000 but not over \$17,000,000		s 5% of the excess ov			
	Ove	er \$17,000,000	\$1,000,000				
g	Gra	ssroots nontaxable amount (enter 25% of line	e 1f)				
h	Sub	tract line 1g from line 1a If zero or less, ente	er-0- · · · · ·				
i	Sub	tract line 1f from line 1c If zero or less, enter	r-0- · · · · · ·				
j	If th	ere is an amount other than zero on either lir	ne 1h or line 1i, did t	he organization file Fo	orm 4720		
	rep	orting section 4911 tax for this year?		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · ·	Yes No
,		(Some organizations that columns belo	made a section 50 ow. See the instruc	tions for lines 2a th	have to complete a rough 2f on page 4.		
		Lobb	ying Expenditures	During 4-Year Aver	aging Period	<del></del>	
:	С	alendar year (or fiscal year beginning in)	(a) 2009	( <b>b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a	Lob	bying nontaxable amount					
ь		bying ceiling amount 0% of line 2a, column (e))					
	Tot	al lobbying expenditures					
d	l Gra	ssroots nontaxable amount					
e		ssroots ceiling amount 0% of line 2d, column (e))					
f	Gra	ssroots lobbying expenditures					
EEA						Schedule C (For	m 990 or 990-EZ) 2012

Part II-B

d

f

i

2

b

C

3

Part III-A

Part III-B

#### SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number Associated Contractors of New Mexico 85-0020740 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Aggregate contributions to (during year) . . . . . 2 Aggregate grants from (during year) . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year b Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax vear 4 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ..... Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **▶** \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	edule D (Form 990) 2012 Associated Contract			85-002		Page 2
P	art III Organizations Maintaining Collec	ctions of Art, His	storical Treasures, c	or Other Similar As	sets (conti	nued)
3	Using the organization's acquisition, accession, and oth	ner records, check an	y of the following that are a	significant use of its		
	collection items (check all that apply)					
a	a Public exhibition	d Loan or ex	change programs			
t	b Scholarly research	e 🗌 Other				
c	c Preservation for future generations					
4	Provide a description of the organization's collections a	ind explain how they f	further the organization's ex	empt purpose in Part		
	XIII	,	J			
5	During the year, did the organization solicit or receive d	lonations of art, histor	rical treasures, or other sim	ılar		
_	assets to be sold to raise funds rather than to be maint	ained as part of the o	rganization's collection?		Yes	П №
P	art IV Escrow and Custodial Arrangem	ents. Complete	if the organization ar	nswered "Yes" to For	m 990. Pa	rt IV.
_	line 9, or reported an amount on Fo	orm 990. Part X.	line 21.			,
12	a Is the organization an agent, trustee, custodian or othe	<del></del>		ot		
16					□ vas	П No
	b If "Yes," explain the arrangement in Part XIII and comp				· · L res	⊔ мо
	b ii res, explain the arrangement in Part Alli and comp	lete the following tabl	е			
	c Beginning balance			<del></del>	mount	
	· · · · · · · · · · · · · · · · · · ·					
	e Distributions during the year					
f						
<b>2</b> a		•				_
	b If "Yes," explain the arrangement in Part XIII Check he					<u>·⊔</u> _
P	art V Endowment Funds. Complete if the	e organization ai	nswered "Yes" to For	m 990, Part IV, line	10.	
1	<del></del>	Current year (b)	) Pnor year (c) Two year	s back (d) Three years back	(e) Four yea	ars back
1a						
t	b Contributions					
C	c Net investment earnings, gains, and					
	losses					
C	d Grants or scholarships					
•	Other expenditures for facilities and					
	programs					
f	f Administrative expenses					
ç	g End of year balance					
2	Provide the estimated percentage of the current year e	nd balance (line 1g. c	column (a)) held as		<del></del> !	
á	a Board designated or quasi-endowment	%	(-),			
r k	b Permanent endowment > %	<del></del>				
(	c Temporarily restricted endowment	%				
	The percentages in lines 2a, 2b, and 2c should equal 1					
3a			e held and administered fo	r the		
-	organization by	c organization that ar	e nela ana aaministerea to	i the	IV.	es No
	(i) unrelated organizations · · · · · · · · · · · · · · · · · · ·					55 140
	(ii) related organizations				- 3a(i)	+-
	• • • • • • • • • • • • • • • • • • • •	consistence of the control of			3a(ii)	
_	b If "Yes" to 3a(ii), are the related organizations listed as	•			· 3b	
4 D						
	art VI Land, Buildings, and Equipment.	See Form 990,	Part X, line 10.	<del></del>		
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book va	lue
		(investment)	(other)	depreciation		<u> </u>
1a	a Land · · · · · · · · · · · · · · · · · · ·		186,815		1	86,815
, k	<b>b</b> Buildings		1,288,565	302,334	9	86 <u>,231</u>
; (	c Leasehold improvements	<u> </u>				
C	d Equipment		271,460	259,959		11,501
_6	e Other		21,958	8,487		13,471
Tot	tal. Add lines 1a through 1e (Column (d) must equal Forr	n 990, Part X, columr			• • •	98,018

	ule D (Form 990) 2012  Associated Contractors of New Mexico  rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue pe	85-0020740 r Return	Page 4
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		-
а	Net unrealized gains on investments	1 1	
b	Donated services and use of facilities	7	
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)	7	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
. а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
. b	Other (Describe in Part XIII )	7	
c	Add lines 4a and 4b	dc	
- 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments	-	
c	Other losses · · · · · · · · · · · · · · · · · ·	-	
d	Other (Describe in Part XIII )	$\dashv$ $\mid$	
е	Add lines 2a through 2d	20	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII )	-	
c	Add lines 4a and 4b	- 4c	
į <b>5</b>	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	rt XIII   Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and	1 2h	
	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addi		
	mation	lional	
	THE COLUMN TO TH		
			<del></del>
		<del> </del>	
		<del>.</del>	
			<del>_</del>
i			
EEA		Schedule I	D (Form 990) 2012

### SCHEDULE O (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.

OMB No 1545-0047 **2012** 

2012

Department of the Treasury Internal Revenue Service
Name of the organization

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Associated Contractors of New Mexico	85-0020740
01. Form 990 governing body review (Part VI, line 1	1)
The 990 is reviewd by the Executive Director and designated board	members prior to
filing.	
02. CEO, executive director, top management comp (F	Part VI, line 15a)
The Board reviews and must approve any change in compensation to the	he Executive director or
any other key employee.	
	<del> </del>
03. Other officer or key employee compensation (Par	t VI, line 15b
The Board reviews and must approve any changes to compensation for	other employees.
04. Governing documents, etc, available to public (	Part VI, line 19)
Governing documents are made available to the public upon request	at the Organization's
offices.	-
05. List of other expenses (Part IX, line 24e)	
See attached schedule.	
	·

. 990`	Overflow Statement	<b>2012</b> Page 1
Name(s) as shown on return		FEIN
Associated Cont	ractors of New Mexico	85-0020740

# Member dues

Description		Amount		
Member assessments	\$	546,896		
Member dues	-	201,017		
Member events		89,347		
Total:	\$	837,260		

# Occupancy expenses

Description		Amount
Total building expenses		\$ 74,610
Allocated to rental income		(31,976)
	Total:	\$ 42,634

# Other expenses

Description		Amount
Equipment lease expense		\$ 10,486
Events costs		 95,895
Membership directory		 4,723
Taxes, fees, penalties		 2,532
Telecommunications		5,678
Training, lab certification		103,417
Training, other		 104,496
Transportation survey program		 5,000
Other expenses		 10,152
Industry contributions		14,487
	Total:	\$ 356,866

# Current year lobbying expenses

Description	7	Amount
Current year expenses for the Organization	\$	46,050
Pass through expenses in National Organization dues	<del></del>	4,950
Total:	\$	51,000
		<del></del>