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DLN: 93493294000225

Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2014	4 calendar year, or tax year beginning 01-01-2014 , and ending 12-31-2014			
<b>B</b> Che	ck if applica	able C Name of organization NORTHERN VIRGINIA BUILDING INDUSTRY	D	Employer id	entification number
☐ Add	ress change		!	54-06041	53
☐ Nar	ne change	Doing business as			
Init	al return		E	Геlephone nu	mber
	ırn/termınat			(703)817	
_	ended returr lication pen	CHANTILLY, VA 20151	G	Gross receipt	s \$ 1,701,595
		F Name and address of principal officer	<b>H(a)</b> Is this a	aroup retui	rn for
		TRUETT YOUNG 3684 CENTERVIEW DRIVE NO 110-B	subordina		⊤Yes <b>▽</b> No
		CHANTILLY VA 20151	<b>H(b)</b> Are all su	ibordinates	s
			ıncluded	)	, ,
<b>I</b> Tax	r-exempt st	tatus 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or 527	If "No," a	ittach a lis	t (see instructions)
J W	ebsite: 🟲	WWW NVBIA COM	H(c) Group ex	cemption n	umber 🟲
<b>K</b> Forn	n of organiza	ration Corporation Trust Association Other	<b>L</b> Year of format	on 1953	<b>M</b> State of legal domicile VA
Pa	rt IS	Gummary			
Governance	NET	NORTHERN VIRGINIA BUILDING INDUSTRY ASSOCIATION SERVES THE WORKING OPPORTUNITIES, EDUCATION AND EFFECTIVE REPRESENTA	ATIONS AT AL	L LEVELS	OF GOVERNMENT
	2 0110	ex time box Fy III the organization discontinued its operations of disposed of	11010 (11411 25 70		
Activities &		nber of voting members of the governing body (Part VI, line 1a)		3	87
Œ.		nber of independent voting members of the governing body (Part VI, line 1b)		4	
Ę.		al number of individuals employed in calendar year 2014 (Part V, line 2a).  al number of volunteers (estimate if necessary)		. 5	235
4		al unrelated business revenue from Part VIII, column (C), line 12		.   0 .   7a	
		unrelated business taxable income from Form 990-T, line 34			
			Prior Ye	ar	Current Year
<b>a</b> .	<b>8</b> Co	ontributions and grants (Part VIII, line 1h)		0	15,400
Rayenue		rogram service revenue (Part VIII, line 2g)	1,	497,006	1,651,211
Ŗŝ		expression (Part VIII, column (A), lines 3, 4, and 7d)		117	-167
		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		69,232	34,498
	12	2)	1,	.566,355	1,700,942
		rants and similar amounts paid (Part IX, column (A), lines 1-3)		80,558	102,132
		enefits paid to or for members (Part IX, column (A), line 4)		0	0
82		-10)		168,423	165,659
Expenses	<b>16a</b> Pr	rofessional fundraising fees (Part IX, column (A), line 11e)		0	0
ੜੌ	<b>b</b> To	otal fundraising expenses (Part IX, column (D), line 25) 🗠			
_	<b>17</b> Ot	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,	123,613	1,319,385
		otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		372,594	1,587,176
. 02	<b>19</b> Re	evenue less expenses Subtract line 18 from line 12		193,761	113,766
65 20			Beginning of Year	Current	End of Year
25.e4 8.e4	<b>20</b> To	otal assets (Part X, line 16)		233,908	422,852
Net Assets or Fund Balances	<b>21</b> To	otal liabilities (Part X, line 26)		114,110	189,288
		et assets or fund balances Subtract line 21 from line 20		119,798	233,564
Unde my kr prepa	r penalties nowledge a rer has ar	Signature Block  s of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other than ny knowledge  ****** Signature of officer		ed on all in	
Here		TRUETT YOUNG PRESIDENT Type or print name and title			
	<u>                                      </u>	Print/Type preparer's name Preparer's signature Date	2	- <sub>.f</sub>   PTIN	
Paid	ł	R ERICA ROQUE R ERICA ROQUE 201	5-10-08 self-emp	loyed P017	01497
	parer	Firm's name ► HALT BUZAS & POWELL LTD	Firm's EI	N <b>►</b> 26-0004	1395
	Only	Firm's address ► 1199 N FAIRFAX ST 10TH FLOOR	Phone no	(703) 836-	1350

ALEXANDRIA, VA 22314

✓ Yes ☐ No

Form **990** (2014)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 2	8		No
9	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.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{\bullet}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	_	No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV			1
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	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		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Vest   No   No   No   No   No   No   No   N	Pell				_
13   Ence the number reported in Box 3 of Form 1098 Enter -0 - in fort applicable   10   10   10   10   10   10   10   1		Check if Schedule O contains a response or note to any line in this Part V	• •	 Vac	.l
be Enter the number of Forms W-2G included in line 1s Enter-0 - finor applicable	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		res	NO
but the organization comply with backup withholding rules for reportable payments to vendors and reportable garing (parming (parming (parming ) without so turns without 2 parming (parming ) without 5 parts without 2 parming (parming ) without 5 parms with 1 parms with 1 parms 1					
gamming (sambling) winnings to prize winners?  2 Enter the number of employees reported on from W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered 2 by this resum.  3 In the statements, filed for the calendar year ending with or within the year covered 2 by this resum.  4 It is a statements, filed for the calendar year ending with or within the year covered 2 by this resum.  5 It is least one is reported on line 2.0, did the organization file all required decent amployment tax returns?  5 It is most office a form 930 To the law year? "I've To line 3 per 100 or more during the year?  5 It is with did not game and the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (calendar) as bearfs account, securities account, or other financial accounts are foreign country (calendar).  5 It is with organization a party to a prohibited tax shelfer transaction at any time during the tax year?  5 Was the organizations for filing requirements for fincEth Form 114, Report of Foreign Baek and Financial Accounts (Fig.AR).  5 Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year?  5 It is been the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have an excellent and the same of the s					
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by this return   2a   3b   78  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Ind the organization have unrelated business gross income of \$1,000 or more during the year?  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 accounts of reference noutry (such as a bank account, securities account, or other financial accounts in a foreign country with a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (right)  5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization have annual gross receipts that are normally greater than \$1,00,000, and did the organization abuse annual gross receipts that are normally greater than \$1,00,000, and did the organization abuse annual gross receipts that are normally greater than \$1,00,000, and did the organization account of the organization and party to did the organization and excess of \$75 make party as a contribution or offits were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the arganization have grown and the section of \$75 make party as a contribution and party for goods and services provided?  9 If If yes, did the organization have accove a grown and party of growth and the organization has party and the services provided?  9 If yes, did the organization has party to the probability of the property for which it was required to fire firm \$2,000.  9 If yes, did the organization has party to the pro	2a				
b if steast one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  3a Did the organization have similar and 2a is greater than 250, you may be required to e-file (see instructions)  3b Did the organization have similar and 2a is greater than 250, you may be required to e-file (see instructions)  3b Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3c Did the organization have similar and 250, you may be required to e-file (see instructions)  3d Did the organization have similar and 250, you may be required to e-file (see instructions)  3d Did the organization have similar and 250, you may be required to e-file (see instructions)  3d Did the organization have similar and 250, you may be required to e-file (see instructions)  3d Did the organization have seed or similar and 250, you may be required to e-file (see instructions)  3d Did the organization have an antipation of the shall be counted to the payer.  3d Did the organization have annual gress required that the shall be organization and partly for goods and services provided to the payer.  3d Did the organization necesses a payment in excess of 475 made partly as a contribution and partly for goods and services provided to the payer?  3d Did the organization necesses and pay the denor of the value of the goods or services provided?  3d Did the organization processes and payment in excess of 475					
Note: If the sum of lines Ia and 2 a is greater than 2519, 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?  4b 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 freeign country (such as a bank account, securities account, or other financial accounts in ferring in country to the same and the programments for Fine ERI Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5b Uses the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5c If Yes," to line 5a or 5b, did the organization file Form 886-17.  5c So Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that was or is a party to a prohibited tax shelter transaction?  5c If Yes," to line 5a or 5b, did the organization file Form 886-17.  5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization include with every sociletation an express statement that such contributions or gifts were also decicrible.  5c Does the organization that may receive deductible contributions under section \$170(c).  7 Organization that may receive deductible contributions under section \$170(c).  8 Did the organization necesive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?  7 Did the organization is defined to the payor social to the goods or services provided?  7 Did the organization and the year payment in excess of \$75 made party to a provide year to his form \$282?  8 Did the organization is defined to the payor payor payor	ь	2) (110) (110)	_		
b. If "Yes," has it field a Form 990-1 for this year <i>If Notice 100</i> , provide an explanation in Schedule 0.  4a. A carry time during the calendar year, did the organization have an interest in, or a signature or other subnoring very financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR)  5b. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did the organization have a must gross receipts that are normally greater than \$10,000, and did the organization solic tany contributions that the was or is a party to a prohibited tax shelter transaction?  5c. Diff "Yes," to line 5a or 5b, did the organization linelide with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c. Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on the payor?  6c. Did the organization medive a payment in excess of \$75 made party as a contribution and partly for goods and a services provided to the payor?  6c. Did the organization medive a payment in excess of \$75 made party as a contribution and partly for goods and a services provided to the payor?  6c. Did the organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  6c. Did the organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  6c. Did the organization receive any funds, directly or indirectly, to pay premium so an a personal benefit contract?  6c. Did the organization receive any funds, directl			2b	Yes	
b. If "Yes," has it field a Form 990-1 for this year <i>If Notice 100</i> , provide an explanation in Schedule 0.  4a. A carry time during the calendar year, did the organization have an interest in, or a signature or other subnoring very financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR)  5b. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did any taxable party norify the organization that it was or is a party to a prohibited tax shelter transaction?  5c. Did the organization have a must gross receipts that are normally greater than \$10,000, and did the organization solic tany contributions that the was or is a party to a prohibited tax shelter transaction?  5c. Diff "Yes," to line 5a or 5b, did the organization linelide with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c. Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible on the payor?  6c. Did the organization medive a payment in excess of \$75 made party as a contribution and partly for goods and a services provided to the payor?  6c. Did the organization medive a payment in excess of \$75 made party as a contribution and partly for goods and a services provided to the payor?  6c. Did the organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  6c. Did the organization necesses any funds, directly or indirectly, to pay premiums on a personal benefit contract?  6c. Did the organization receive any funds, directly or indirectly, to pay premium so an a personal benefit contract?  6c. Did the organization receive any funds, directl	За	Did the organization have unrelated husiness gross income of \$1,000 or more during the year?	3a		Nο
49. 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, secunities account)?  11'Yea," enter the name of the foreign country    See instructions for filing requirements for Finic N Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  58. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  59. No  11'Yea," to line 5e or 55b, did the organization file Form 8886-T7  50. Obes the organization above annual gross receipts that are normally greater than \$100,000, and did the organization include with very solicitation in eapyress statement that such contributions or girls were not tax deductible?  10'Yea," did the organization include with very solicitation in eapyress statement that such contributions or girls were not tax deductible?  10'Yea," did the organization include with very solicitation in eapyress statement that such contributions or girls were not tax deductible?  10'Yea," did the organization include with very solicitation in eapyress statement that such contributions or girls were not tax deductible contributions under section 170(c).  10 If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services growted to the payer.  10 If the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services growted to the payer.  11 If Yes," indicate the number of Forms 8.222 filed during the year.  22 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  37 The payment of the organization received a contribution of qualified intellectual property, dith er organization file any entire the number of Forms 8.222 filed during the year.  10 Did the sponsoring organization make any taxable distribution to a donor, donor divisor, or related person?  11 Did donor advised					-110
over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts (FBAR)  If "es," enter the name of the foreign country   See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)  See Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  50 Was the organization a party to a prohibited tax shelter transaction?  51 Did any taxable party notify the organization file Form 8886-T2  52 See See the organization have annual gross receipts that are normally greater than \$1.00,00, and did the organization based with every solicitation an express statement that such contributions or gifts were not tax deductible as chartable contributions?  53 No  No  11 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  74 Organizations that may receive deductible contributions under section 170(c).  25 Did the organization receives a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the donor of the value of the goods or services provided?  75 Did the organization receives a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the goods or services provided?  76 Did the organization receives a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payment of the goods or services provided?  77 Did the organization in function of the value of the goods or services provided?  78 Did the organization function of the value of the goods or services provided?  79 Did the organization function of the goods of the goods or services provided?  79 Did the organization of the goods of the goods of services pr					
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2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ь	Gross income from other sources (Do not net amounts due or paid to other sources			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		against amounts due or received from them)			
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		when the organization is needed to issue qualified nearth plans.			
4a Did the organization receive any payments for indoor tanning services during the tax year? 14a No	С	Enter the amount of reserves on hand		ļ	
	.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo

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

Check if Schedule O	contains a resi	nonce or note t	o any li	ing in this D	art VI						V
Check ii Schedule O	Contains a resi	י שנווטע שבווטע	o ally II	1116 III (1115 F	aitvi						., .

Se	ction 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							
	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							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νo				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo				
6	Did the organization have members or stockholders?	6	Yes					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)				
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes					
b	<b>b</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?							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13		No				
14	Did the organization have a written document retention and destruction policy?	14		Νo				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	Other officers or key employees of the organization	15b		Νo				
	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?							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b						
Se	ection C. Disclosure							
17	List the States with which a copy of this Form 990 is required to be filed▶							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)							

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply ☐ Own website. ☐ Another's website. ☐ Upon request. ☐ Other (explain in Schedule O)

- 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  $\frac{1}{2}$
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►THE ORGANIZATION

Form 990 (2014	)
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)	а	a	e	7
,	а	а	e	

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or director	,		related organizations

Form 990 (2014)

art VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				unless officer	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	<b> -</b>			
С	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	•	0	0	0

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

			162	140
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No.
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section	R Ind	anandant	Contractors

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

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation

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 ►0

Contributions, Gifts, Grants and Other Similar Amounts	1a b d e f
Program Serwce Revenue	228 b c c d e f g 3 4 5 68
evenue	3 4 5 6 6 6 6 d d 6 8 8 8 8
Other R	b c 9a
	10a
	b c
	11a b c d

Form 99			_					Page <b>9</b>
Part V	<u> </u>	Statement o Check if Schedu	<b>f Revenue</b> ule O contains a respon:	se or note to any lu	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
oΣ	1a	Federated camp	paigns 1a					
Grants mounts	ь	Membership du	es <b>1b</b>					
وَ قُ	С	Fundraising eve	ents <b>1c</b>					
Giffs, iilar A	d	Related organiz	ations <b>1d</b>					
s, G	e	Government grants	s (contributions) <b>1e</b>					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	15,400				
直	g	Noncash contribution 1a-1f \$	ons included in lines	15,400				
Cor	h	Total. Add lines	s 1a-1f	· · · •	15,400			
<u> </u>				Business Code				
ren	2a	EVENTS AND SPON	SORSHIP	900099	863,876	479,658		384,218
æ	Ь	MEMBERSHIP DUES		900099	678,189	678,189		
MCe	C	MANAGEMENT FEE		900099	84,344	84,344		
Š	d	PUBLICATION		900099	24,802	24,802		
ra La	e f	All other progra	ım service revenue					
Program Serwoe Revenue	'	_						
	g 3		s 2a-2f		1,651,211			
		and other simila	aramounts)	🟲	86			86
	4		tment of tax-exempt bond p	roceeds 🕨				
	5	Royalties	(1) Pool	(II) Personal				
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental incor	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other		400				
	ь	than inventory Less cost or		(52				
		other basis and sales expenses		653				
	С	Gain or (loss)		-253	252			252
άı	d 8a	Net gain or (los Gross income fi events (not incl			-253			-253
Other Revenue		\$	reported on line 1c)					
<u>.</u>			a					
Ě			penses b	vents				
•	c 9a		loss) from fundraising e rom gaming activities	vents 🛌				
		See Part IV, lin						
			a   .  -					
			penses <b>b</b> [loss) from gaming activ	ities				
		Gross sales of i	inventory, less					
			<b>a</b>					
	Ь		oods sold . . <b>b</b> [ loss) from sales of inve	ntory -				
	<del>-</del>	Miscellaneous		Business Code				
	11a	OTHER INCOM		900099	34,498			34,498
	ь							
	С							
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d	🕨	34,498			
	12	Total revenue.	See Instructions	· · · •	1,700,942	1,266,993	0	418,549

Form	990 (2014)				Page <b>10</b>
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All		·		
	Check if Schedule O contains a response or note to any line in this		 (B)		<del>.</del> /
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	102,132			
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	136,486			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	2,234			
9	Other employee benefits	15,194			
10	Payroll taxes	11,745			
11	Fees for services (non-employees)				
а	Management				
b	Legal	105			
С	Accounting	4,058			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	236,970			
12	Advertising and promotion	60,817			
13	Office expenses	21,293			
14	Information technology	21,879			
15	Royalties				
16	Occupancy	74,489			
17	Travel	426			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	702,019			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,025			
23	Insurance	7,565			
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 O)				
а	MEMBERSHIP	179,264			
b	MISCELLANEOUS	6,851			
c	REAL ESTATE AND OTHER T	624			
d					
е	All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e	1,587,176			
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)				

Part X Balance Sheet

Par	tΧ	Check if Schedule O contains a response or note to any line in this	Part X			
		· · · · · · · · · · · · · · · · · · ·		(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		95,013	1	165,645
	2	Savings and temporary cash investments		71,006	2	200,017
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		2,568	4	
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	II of	у	5	
ts	6	Loans and other receivables from other disqualified persons (as d $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and corand sponsoring organizations of section $501(c)(9)$ voluntary emporganizations (see instructions) Complete Part II of Schedule L	rs	6		
Assets	7	Notes and loans receivable, net			7	
4	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		47,058		47,480
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 42,5			11,100
	ь	Less accumulated depreciation	<b>10b</b> 38,8	B55 6,263	10c	3,710
	11	Investments—publicly traded securities		·	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		12,000	15	6,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)		233,908		422,852
	17	Accounts payable and accrued expenses		24,100	17	30,381
	18	Grants payable		·	18	
	19	Deferred revenue		85,750	19	146,867
	20	Tax-exempt bond liabilities		<u>'</u>	20	,
	21	Escrow or custodial account liability Complete Part IV of Schedu			21	
Liabilities	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	, trustees,			
ᅙ		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part 2	X of Schedule			
		D		4,260		12,040
	26	Total liabilities. Add lines 17 through 25		114,110	26	189,288
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ lines 27 through 29, and lines 33 and 34.	and complete			
<u>a</u>	27	Unrestricted net assets		119,798	27	233,564
8	28	Temporarily restricted net assets			28	
Ξ	29	Permanently restricted net assets			29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34.	e► ┌─and			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
	32	Retained earnings, endowment, accumulated income, or other fun	ds		32	
Net	33	Total net assets or fund balances		119,798	33	233,564
_	34	Total liabilities and net assets/fund balances		233,908	34	422,852
	•			•		orm 000 (2014)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,7	700,942		
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,5	587,176		
3	Revenue less expenses Subtract line 2 from line 1	3		1	13,766		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			19,798		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments						
9	9 Other changes in net assets or fund balances (explain in Schedule O)						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2	233,564		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				. 区		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed o	n				
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both	arate					
	▼ Separate basis						
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne <b>2c</b>	Yes			
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın					
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	За		No		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				

# Software ID: Software Version:

**EIN:** 54-0604153

Name: NORTHERN VIRGINIA BUILDING INDUSTRY

ASSOCIATION INC

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

Compensated Employees, and Inde	1	ntracto						I	1	I
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1333 11233	2,2000 112007	related organizations
(1) TRUETT YOUNG	1 00	х		х				0	0	0
PRESIDENT (1) JERRY BERMAN	1 00									
FIRST VICE PRESIDENT		Х		Х				0	0	0
(2) MIKE KITCHEN	1 00	×		х				0	0	0
TREASURER (3) JOHN REEVES	1 00							_	_	_
SECRETARY		Х		Х				0	0	0
(4) MARK TROSTLE	1 00	x						0	0	0
IMMEDIATE PAST PRESIDENT (5) GARY SMERK	1 00									
VP ASSOCIATES		X						0	0	0
(6) GENE FROGALE  VP MEMBERSHIP	1 00	х						0	0	0
(7) DAVID BOMGARDNER	1 00							0	0	0
VP GOV AFFAIRS/LEGISTRATIVE COMMITTEE	1.00	×						0	0	0
(8) ALICIA SKOUG PRESIDENTIAL APPOINTMENT	1 00	x						0	0	0
(9) MICHAEL CAPRETTI	1 00	x						0	0	0
AT LARGE MEMBER	1.00	_ ^			_			0	0	0
(10) JASON DALLEY  AT LARGE MEMBER	1 00	х						0	0	0
(11) RICK ENTSMINGER	1 00	x						0	0	0
AT LARGE MEMBER (12) DAVID GILL	1 00									
AT LARGE MEMBER		х						0	0	0
(13) PETE RIGBY	1 00	х						0	0	0
AT LARGE MEMBER (14) MARK STAHL	1 00				-					
CUSTOM BUILDERS COUNCIL		Х						0	0	0
(15) RICH RUDNICKI	1 00	х						0	0	0
SALES&MARKETING COUNCIL (16) JIM BATEMAN	1 00									
REMODELERS COUNCIL		Х						0	0	0
(17) SALVATORE MIGLIORE	1 00	x						0	0	0
HOMEAID PRESIDENT (18) GEORGE RHODES	1 00							_		_
ENVIRONMENTAL COMMITTEE		X						0	0	0
(19) JODI HAWN GREEN BUILDING COMMITTEE	1 00	х						0	0	0
(20) ANDREW MOORE	1 00									
GREEN BUILDING COMMITTEE (21) VAN ANDERSON	1 00	×				1		0	0	0
REAL ESTATE FINANCE COMMITTEE		х						0	0	0
(22) DOUG SMITH	1 00	X						0	0	0
UNDER40-FUTURE LEADERS COMMITTEE (23) HELMAN CASTRO	1 00									
FAIRFAX-ARLINGTON-ALEX CH PRESIDENT		x						0	0	0
(24) JOHN LEVTOV	1 00	x						0	0	0
FAIRFAX-ARLINGTON-ALEX CH -VP								<u> </u>		<u> </u>

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

(A) (B) (C) (D)

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (d nan o n is b	ne both a	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	-,,		related organizations	
(26) JOSH MARSHALL	1 00	<b>.</b> ,									
FAIRFAX-ARLINGTON-ALEX CH -VP		X						0	0	0	
(1) CHRIS SPAHR	1 00	×						0	0	0	
FAIRFAX-ARLINGTON-ALEX CH -VP (2) ANTHONY PALLADINO	1 00										
FAUQUIER CH -PRESIDENT		X						0	0	0	
(3) ANTON TINNESZ	1 00	x						0	0	0	
FAUQUIER CHAPTER-VP								, and the second	, and the second		
(4) WILLIAM FISSEL	1 00	х						0	0	0	
LOUDOUN CHAPTER-PRESIDENT (5) ANDREW PAINTER	1 00										
LOUDOUN CHAPTER-VP		X						0	0	0	
(6) MIKE SANDKUHLER	1 00	x						0	0	0	
PRINCE WILLIAM CHAPTER-PRESIDENT (7) HEATHER HAYNES-LONG	1 00										
PRINCE WILLIAM CHAPTER-VP		x						0	0	0	
(8) KRIS ALVAREZ	1 00										
LIFE DIRECTORS		Х						0	0	0	
(9) JOEL BARKMAN	1 00	х						0	0	0	
LIFE DIRECTORS (10) JAMES BUTZ	1 00										
LIFE DIRECTORS		х						0	0	0	
(11) JEFF CARPENTER	1 00										
LIFE DIRECTORS		Х						0	0	0	
(12) TARA CRAVEN	1 00	x						0	0	0	
LIFE DIRECTORS (13) JOHN DEZINNO	1 00									_	
LIFE DIRECTORS		х						0	0	0	
(14) RICK GENUARIO	1 00	x						0	0	0	
LIFE DIRECTORS								0	Ů		
(15) BRUCE GOULD	1 00	x						0	0	0	
LIFE DIRECTORS (16) DENNIS M GRIFFITH	1 00										
LIFE DIRECTORS		X						0	0	0	
(17) JOHN S GROUPE IV	1 00	х						0	0	0	
LIFE DIRECTORS (18) CHIP HELME	1 00										
		x						0	0	0	
LIFE DIRECTORS (19) ROBERT LAWRENCE	1 00										
LIFE DIRECTORS		X						0	0	0	
(20) J RANDALL MINCHEW	1 00	х						0	0	0	
LIFE DIRECTORS (21) ROBIN NEWHOUSE	1 00							_	_		
LIFE DIRECTORS		x						0	0	0	
(22) SHERMAN PATRICK	1 00								_		
LIFE DIRECTORS		Х						0	0	0	
(23) TERE RICHARDS	1 00	X						0	0	0	
LIFE DIRECTORS (24) JOHN RINALDI	1 00										
LIFE DIRECTORS		×						0	0	0	
	1										

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

Compensated Employees, and Independent Contractors											
(A) Name and Tıtle	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion ( nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations	
(51) JOHN SLIDELL	1 00	x						0	0	0	
LIFE DIRECTORS (1) ALAN WALKER	1.00										
	1 00	x						0	0	0	
LIFE DIRECTORS (2) NAN E WALSH	1 00										
LIFE DIRECTORS		X						0	0	0	
(3) KEVIN WASHINGTON	1 00	х						0	0	0	
LIFE DIRECTORS								, and the second			
(4) WILLIAM ZINK	1 00	х						0	0	0	
LIFE DIRECTORS (5) STEVEN B ALLOY	1 00										
SENIOR LIFE DIRECTORS		Х						0	0	0	
(6) ROY BECKNER	1 00	x						0	0	0	
SENIOR LIFE DIRECTORS		_ ^						0	0	0	
(7) CHRISTOPHER BROWN	1 00	x						0	0	0	
SENIOR LIFE DIRECTORS  (8) VINCE BUTLER	1 00										
SENIOR LIFE DIRECTORS		х						0	0	0	
(9) LOUIS CANONICO	1 00							_		_	
SENIOR LIFE DIRECTORS		Х						0	0	0	
(10) DIANE COX BASHEER	1 00	х						0	0	0	
SENIOR LIFE DIRECTORS (11) THOMAS E DONALDSON	1 00										
		х						0	0	0	
SENIOR LIFE DIRECTORS (12) DIANE DUBOIS	1 00										
SENIOR LIFE DIRECTORS		X						0	0	0	
(13) DOUGLAS FAHL	1 00	x						0	0	0	
SENIOR LIFE DIRECTORS								,			
(14) GARY GARCZYNSKI	1 00	х						0	0	О	
SENIOR LIFE DIRECTORS (15) LOUIS GENUARIO JR	1 00										
SENIOR LIFE DIRECTORS		X						0	0	0	
(16) MICHAEL J GORMAN	1 00	х						0	0	0	
SENIOR LIFE DIRECTORS								_	-		
(17) MARK GRANVILLE-SMITH	1 00	х						0	0	0	
SENIOR LIFE DIRECTORS (18) KAREN HAMMOND	1 00										
SENIOR LIFE DIRECTORS		X						0	0	0	
(19) CRAIG HAVENNER	1 00	х						0	0	0	
SENIOR LIFE DIRECTORS								Ŭ.			
(20) LESLIE HAZEL	1 00	x						0	0	0	
SENIOR LIFE DIRECTORS (21) JOE JACOBS	1 00										
SENIOR LIFE DIRECTORS		Х						0	0	0	
(22) PAUL B JOHNSON	1 00	V						0	0	0	
SENIOR LIFE DIRECTORS		X							U		
(23) MICHAEL JORDAN	1 00	x						0	0	0	
SENIOR LIFE DIRECTORS (24) WILLIAM H LAUER	1 00										
SENIOR LIFE DIRECTORS		х						0	0	0	
	1		<u>.                                    </u>		1	1		1			

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

Compensated Employees, and Inde	1	acto							1	I I
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	Posit more th persoi and a	ion (d nan o n is b	ne bo	ox, u an of	nless ficer	1	(D) Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(76) CLARK MASSIE	1 00	×						0	0	0
SENIOR LIFE DIRECTORS										
(1) SCOTT MCGEARY SENIOR LIFE DIRECTORS	1 00	x						0	0	0
(2) LEON MCGLOTHLIN	1 00									_
SENIOR LIFE DIRECTORS		Х						0	0	0
(3) JOSEPH PACIULLI	1 00							0	0	0
SENIOR LIFE DIRECTORS		X						0	0	
(4) SCOTT C PLEIN SENIOR LIFE DIRECTORS	1 00	х						0	0	0
(5) PATRICK RHODES JR	1 00							_		
SENIOR LIFE DIRECTORS		Х						0	0	0
(6) JAMES L ROBINSON	1 00	l x						0	0	0
SENIOR LIFE DIRECTORS		_ ^						0	0	
(7) RUSSELL ROSENBURG SENIOR LIFE DIRECTORS	1 00	х						0	0	0
(8) DEBORAH L ROSENSTEIN	1 00							_	_	_
SENIOR LIFE DIRECTORS		Х						0	0	0
(9) JOHN D STOKELY	1 00	l <sub>x</sub>						0	0	0
SENIOR LIFE DIRECTORS		_ ^						0	0	
(10) MARK A SUCHER SENIOR LIFE DIRECTORS	1 00	х						0	0	0
(11) ROBERT WILCOX	1 00									
SENIOR LIFE DIRECTORS		Х						0	0	0

DLN: 93493294000225

OMB No 1545-0047

**SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

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

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

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

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

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

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** NORTHERN VIRGINIA BUILDING INDUSTRY ASSOCIATION INC Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ┌ No Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter directly delivered to a 0 separate political organization If none, enter -0-(1) NOVA BUILD PAC 3684 CENTERVIEW DRIVE 110-54-1120666 55,960 CHANTILLY, VA 20151

5 c	hedule C (Form 990 or 990-EZ) 2014					Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	( <b>d)</b> 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

(b) Amount	No
Amount	No
-	
-	
or section	)(5), o
Yes	
1	
2	
3	
or section	
Part III-	R (b)
[-A, lines 1 a	Part II
I	Part I

Part IV Supplemental Info	Part IV Supplemental Information (continued)					
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493294000225

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

### **Supplemental Financial Statements**

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

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** NORTHERN VIRGINIA BUILDING INDUSTRY ASSOCIATION INC. 54-0604153 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of 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) 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 Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 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 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 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) Revenue 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 Revenue included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	<u> Histor</u>	ical T	reasur	es, or Oth	<u>er Sim</u>	<u>ilar Asse</u>	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, check	any of	f the follo	wing that are	a sıgnıfı	cant use of	fits	
а	Public exhibition		d $ egthankspace    egthankspa$	Loar	n or exch	ange program	S			
b	Scholarly research		е Г	Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explair	how the	y furth	ner the or	ganızatıon's e	exempt p	ourpose in		
5	During the year, did the organization solicit						mılar	_		
Dar	assets to be sold to raise funds rather than  t IV Escrow and Custodial Arrang	·					Vac" to		Yes	No
	Part IV, line 9, or reported an ar					answered	103 10	101111 550	<i>-</i> ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	dian or other intermed	lary for	contrib	outions oi	other assets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the fo	ollowing	table						
							+	Amo	unt	
c	Beginning balance					1c	+			
d	Additions during the year					1d	+			
e	Distributions during the year					1e	+			
f	Ending balance					1f				
2a	Did the organization include an amount on F								Yes	□ No
b	If "Yes," explain the arrangement in Part XI									<u>'                                     </u>
Pai	<b>Endowment Funds.</b> Complete	(a)Current year	answer (b)Prior			orm 990, Pa o years back (c			••••••••••••••••••••••••••••••••••••••	ears back
1a	Beginning of year balance	(a)carrein year	(5)	, ca.	1 (6)	o years back (c	. <b>,</b> ,,,,,,	sais sack (c	. <b>,</b> , ou. , c	Sars Back
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g	ı, colu	mn (a)) h	eld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organizat	on that	are he	ld and ad	lmınıstered fo	r the			
	organization by							25(i)	Yes	No
	(i) unrelated organizations			•			• •	. 3a(i) . 3a(ii)		
ь	If "Yes" to 3a(II), are the related organization					· · · · ·	• • • •	. 3b		
4	Describe in Part XIII the intended uses of the	he organization's end	owment	funds						
Par	t VI Land, Buildings, and Equipme		e orga	nızatıd	on answ	ered 'Yes' to	Form	990, Part	IV, lır	ne
	11a. See Form 990, Part X, line Description of property	10.		(a) Cost	t or other	(b)Cost or oth	er (c) /	Accumulated	I(d) B	ook value
	b escription or property				vestment)	basis (other)		epreciation	(-, -	
1a	_and									
	Buildings									
			<b>—</b>			+				
c i	_easehold improvements		.							
	Leasehold improvements		:			30,29	98	26,588	3	3,710
d   e (						12,26	-	26,588 12,26	_	3,710

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		+
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.	1 (1) 5	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		·
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organiza	tion answered 'Ves' to Form 000	Dort IV line 11d See Form 000 Dort V line 15
	scription	(b) Book value
	·	
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the oil Form 990, Part X, line 25.	rganization answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
DUE TO AFFILIATES	12,040	
	·	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 12,040	
, , , , , , , , , , , , , , , , , , , ,		

Part	XI		<b>Revenue per Audited Financial Statements With Revenue p</b> swered 'Yes' to Form 990, Part IV, line 12a.	er R	<b>eturn</b> Complete if
1	Tota		her support per audited financial statements	1	1,716,886
2	A mo	unts included on line 1	but not on Form 990, Part VIII, line 12		1
а	Net	ınrealızed gaıns (losses	s) on investments   2a		
b	Dona	ited services and use o	f facilities		
C	Reco	veries of prior year grai	nts 2c		
d	Othe	r (Describe in Part XIII	i) 2d		
e	Add	lines <b>2a</b> through <b>2d</b>		2e	15,944
3	Subt	ract line <b>2e</b> from line <b>1</b>		3	1,700,942
4	A mo	unts included on Form 9	990, Part VIII, line 12, but not on line <b>1</b>		
а	Inve	stment expenses not in	cluded on Form 990, Part VIII, line 7b . 4a		
b	Othe	r (Describe in Part XIII	( )		
C	Add	lines <b>4a</b> and <b>4b</b>	<del></del>	4c	0
5	Tota	5	1,700,942		
Part	XII		Expenses per Audited Financial Statements With Expenses answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total		per audited financial statements	1	1,603,120
2	A mo	unts included on line 1 l	but not on Form 990, Part IX, line 25		
а	Dona	ted services and use of	facilities	ı	
b	Prior	year adjustments .		ı	
C	Othe	rlosses	2c	ı	
d	Othe	r (Describe in Part XIII	)	ı	
e	Addl	ines <b>2a</b> through <b>2d .</b>		2e	15,944
3	Subti	act line <b>2e</b> from line <b>1</b>		3	1,587,176
4	A mo	unts included on Form 9	90, Part IX, line 25, but not on line 1:	ı	
а	Inve	stment expenses not in	cluded on Form 990, Part VIII, line 7b 4a	ı	
b	Othe	r (Describe in Part XIII	)	Į.	
C	Addl	ines <b>4a</b> and <b>4b</b>		<b>4</b> c	0
5		·	and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	1,587,176
Part	XIII	Supplemental I	nformation		
Part '	V , line mation	4, Part X, line 2, Part >	or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b (I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
		eturn Reference	Explanation		
PART	A, LIN	E 2	THE ASSOCIATION IS EXEMPT FROM FEDERAL AND LOCAL INCOMI 501(C)(6) OF THE INTERNAL REVENUE CODE ON INCOME DERIVED RELATED TO ITS EXEMPT PURPOSE THE ASSOCIATION IS SUBJEC TAXABLE INCOME FROM UNRELATED BUSINESS ACTIVITIES FOR TO DECEMBER 31, 2014, THE ASSOCIATION DID NOT RECOGNIZE INCOME ACCOMPANYING FINANCIAL STATEMENTS AS THERE WAS NOT TAXABLE INCOME THE ASSOCIATION IS NOT AWARE OF ANY ACT JEOPARDIZE THEIR TAX-EXEMPT STATUS THAT WOULD REQUIRE RACCOMPANYING FINANCIAL STATEMENTS GENERALLY, TAX RETU EXAMINATION BY TAXING AUTHORITIES FOR UP TO THREE YEARS COMPLETED RETURN IS FILED IF MATERIAL OMISSIONS OF INCOMMAY BE SUBJECT TO EXAMINATION FOR UP TO SIX YEARS IT IS THE POLICY TO RECOGNIZE INTEREST AND/OR PENALTIES RELATED TO POSITIONS, IF ANY, IN THE ACCOMPANYING FINANCIAL STATEME 31, 2014, THE ASSOCIATION HAD NO UNCERTAIN TAX POSITIONS RECOGNIZED AS A LIABILITY	FROIT TO THE YOUR OME IVIT! COME RNS / FROIM FROIT HE AS OUNTS	M ACTIVITIES INCOME TAXES ON CEAR ENDED TAX EXPENSE IN ELATED BUSINESS IES THAT WOULD GNITION IN THE ARE SUBJECT TO M THE DATE A XIST, TAX RETURNS SSOCIATION'S CERTAIN TAX AS OF DECEMBER

Senedale D (Fermi 550) 2010						
Part XIII Supplemental Information (continued)						
Return Reference	Explanation					
l						
-						

Schedule D (Form 990) 2014

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

DLN: 93493294000225 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Open to Public **Inspection** 

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** NORTHERN VIRGINIA BUILDING INDUSTRY 54-0604153 ASSOCIATION INC Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non-(f) Method of (h) Purpose of grant organization if applicable arant cash valuation non-cash assistance or assistance

or government		паррисави	9,1	assistance	(book, FMV, appraisal, other)	non cash assistance	or assistance
(1) HOUSING TRUST FUND OF NORTHERN VIRGINIA INC (DBA HOMEAID NORTHERN VA) 3684 CENTERVIEW DRIVE SUITE 110-B CHANTILLY, VA 20151	30-0089379	501(C)(3)	46,172				GENERAL
(2) NOVA BUILD PAC 3684 CENTERVIEW DRIVE SUITE 110-B CHANTILLY,VA 20151	54-1120666	527	55,960				GENERAL

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

Schedule I	(Form 990) 2014
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

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

Part IV Supplemental In	<b>iformation.</b> Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
PART I, LINE 2	GRANT RECEIPENTS ARE REQUIRED TO REPORT BACK TO THE ASSOCIATION REGARDING THE USE OF FUNDS SPENT

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DLN: 93493294000225

OMB No 1545-0047

2014

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

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
NORTHERN VIRGINIA BUILDING INDUSTRY
ASSOCIATION INC

Employer identification number
54-0604153

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	SEE ARTICLE 4 OF THE BY LAWS
FORM 990, PART VI, SECTION A, LINE 7A	SEE ARTICLE 13 OF BY LAWS
FORM 990, PART VI, SECTION A, LINE 7B	BOARD IS APPROVED BY MEMBERS AT ANNUAL MEETING
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 WILL BE REVIEWED BY PRESIDENT, TREASURER AND IMMEDIATE PAST PRESIDENT
FORM 990, PART VI, SECTION B, LINE 12C	NVBIA'S HANDBOOK HAS A CONFLICT OF INTEREST DISCLOSURE STATEMENT THAT ASKS VOLUNTEERS/EMPL OYEES TO LIST POTENTIAL CONFLICTS AND TO AFFIRM WHETHER OR NOT THEY HAVE PROFESSIONAL, BUS INESS OR OTHER VOLUNTEER POSITIONS THAT MAY CONSTITUTE A CONFLICT IF/WHEN THESE ARISE, NV BIA REVIEWS/HANDLES THEM ON A CASE-BY-CASE BASIS
FORM 990, PART VI, SECTION B, LINE 15A	THE EXECUTIVE VICE PRESIDENT'S COMPENSATION IS REVIEWED/APPROVED BY THE COMPENSATION COMMI  TITE; WHICH IS MADE UP OF THE CURRENT PRESIDENT, CURRENT VICE PRESIDENT AND IMMEDIATE PAST  PRESIDENT OF THE BOARD THE COMPENSATION PACKAGE IS BASED ON INFORMATION GATHERED FROM TH  E NATIONAL ASSOCIATION OF HOMEBUILDERS-TO PROVIDE A COMPARISON WITH OTHER HOMEBUILDING ASS  OCIATIONS COMPENSATION PACKAGES, ALONG WITH SALARY INFORMATION GATHERED BY THE AMERICAN SO  CIETY OF ASSOCIATION EXECUTIVES TO PROVIDE A COMPARISON OF EXECUTIVE COMPENSATION IN OTHER  ASSOCIATIONS ACROSS THE SPECTRUM-NOT JUST THOSE INVOLVED IN HOMEBUILDING THE BOARD OF DI  RECTORS ALSO APPROVES THE OVERALL BUDGET FOR THE YEAR, WHICH INCLUDES THE ASSOCIATION'S EM PLOYEE COMPENSATION RATES
FORM 990, PART VI, SECTION C, LINE 19	AVAILABLE UPON REQUEST
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES 235,258 PAYROLL PROCESSING 1,712
FORM 990, PART XII, LINE 2C	NVBIA HAD A FINANCIAL STATEMENTS AUDIT FOR THE YEAR 2014, BUT DID NOT HAVE AN AUDIT FOR THE YEAR 2013

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DLN: 93493294000225

OMB No 1545-0047

Open to Public Inspection

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization NORTHERN VIRGINIA BUILDING INDUSTRY ASSOCIATION INC

**SCHEDULE R** 

(Form 990)

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

54-0604153

Part I Identi	fication of Disregarded Entities	Complete if the organization answered	"Yes" on Form 990, Part IV, line 33.
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,,,,,,,,,,,,,,,,,,												
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity							
(1) NORTHERN VIRGINIA BUILDERS LLC 3684 CENTERVIEW DRIVE SUITE 110-B CHANTILLY, VA 20151 26-0354562	ACQUISITION, OWNERSHIP, MANAGEMENT AND INVESTMENT IN CERTAIN REAL ESTATE	VA	0		NORTHERN VIRGINIA BUILDING INDUSTRY ASSOCIATION INC							

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

( <b>a)</b> Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity	Section (13) cor enti	512(b) introlled
						Yes	No
(1) HOUSING TRUST FUND OF NORTHERN VIRGINIA INC 3684 CENTERVIEW DRIVE 110-B	TO BUILD AND RENOVATE SHELTERS FOR AMERICA'S TEMPORARY HOMELESS	VA	501(C)(3)	PUBLIC CHARITY			No
CHANTILLY, VA 20151 _30-0089379							
(2) NOVA BUILD PAC 3684 CENTERVIEW DRIVE 110-B	TO RAISE FUNDS FOR THE ELECTION OF CANDIDATES WHO SUPPORT THE	VA	527				No
CHANTILLY, VA 20151 54-1120666	BUILDING INDUS						

Yes No

Yes

No

Part III	because it had one or more related organizations treated as a partnership during the tax year.												
	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	,	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	I	<b>(k)</b> Percentage ownership		
					,								

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

No

No

No

No

No

No

No No

1m

10

1q Yes

che	dule R (Form 990) 2014		P	age 🤅
Pa	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	N
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		N
b	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
С	Gift, grant, or capital contribution from related organization(s)	1c		N
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		N
f	Dividends from related organization(s)	1f		N
g	Sale of assets to related organization(s)	<b>1</b> g		N
h	Purchase of assets from related organization(s)	1h		N
i	Exchange of assets with related organization(s)	1i		N
j	Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		N

k	Lease of facilities.	, equipment, o	r other assets	from related	organization(s)

- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)

2	If the answer to any of the above is "Yes."	see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
_	If the distret to diff of the above is fes,	see the mistractions for miorination on who mast complete this line, merading covered relationships and transaction thresholds

(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NOVA BUILD PAC	В	55,960	FMV

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

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

1 <u> </u>													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ	(e) all partners section 01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionat allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No	
								<u>,                                    </u>	$\Box$	1			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**