

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



Department of the Treasury Internal Revenue Service

## m 990 Return of Organization Everynt 5

**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 www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Α	For the 2	014 calen	dar year	, or tax y	year be	ginning				2014, an	d ending	1			,	
В	Check if appl	icable	C Name	of organiza	ation T	exas I	anh	andle I	Builde	rs Ass	sociat	lon	D Emplo	yer iden	lification nu	mber
	Address	change	Doing	business a	ıs				·				75-	0949	942	
	Name o	hange	Numb	er and stree	et (or P O	box if mail is	s not de	livered to stree	t address)		Room/si	ııte	E Teleph	one num	ber	
	Initial re	tum	5601	Enter	pris	e Circ	:le						(80	6) 3	53-35	65
	Final retu	m/terminated						or foreign pos	tal code				100	<u> </u>	33 33	
	Amendo	ed return	Amarı	110						TX 7	9106		G Gross	receints	\$ 333	650
	H	tion pending		and addres	ss of princ	cipal officer				111 /		H(a) Is this	a group retur			Yes X No
	<b>—</b> "		Lew Bi	radshav	v 5601 i	Enternris	e Circ	le Amar:	i 1 1 0	TY 7	9106	H(b) Are all	subordinates attach a list.	ınduded	1?	Yes No
ī	Tax-exen	not status	501(0		501(c)			insert no )	4947(a		527	If 'No,'	attach a list.	(see instr	uctions)	
J	Websit	<u> </u>	w.tpb		- 100.(0)	\ 0	, .		1	7.70.		H(c) Group	exemption no	ımber 🕨	-	
ĸ		ganization	X Corpo		Trust	Assoc	ıatıon	Other ►		1 Vear	of formation	<del></del>			egal domicile	e TX
		Summar		, adon	11031	1 73300	iation	Other		Liteal	OI IOIIIIauOi	1 134	/	State of I	egai domicile	; 1A
1 0		_		anizatio	n's miss	sion or mo	nst sig	nıficant act	ıvıtıes	Dromo	tion an	d oducat	ion in t	ho ar	os of ho	ome building.
	. 5,,,	,,, dooo	.0 410 01	garn.ca.io		0,011 01 1110	oc olg	milount dot	141405	FLORIO	CION AN	u_euucat	1011 111 (	ile_ar	ea oi no	me_bullaring.
Activities & Governance																
ma																
Sve	2 Che	ck this bo	x	if the oi	rganizat	tion disco	– – – ntinue	d its opera	tions or dis	posed o	f more th	an 25% c	of its net a	ssets.		
Ğ	3 Nur	nber of vo	ting men	bers of t	he gove	erning boo	dy (Pa	rt VI, line 1	а)					3	1	37
95	4 Nur	nber of inc	lepender	nt voting	membe	ers of the o	govern	ning body (I	Part VI, lın	e 1b)				4		37
itie								r 2014 (Par						5		3
çį				-										6		700
ď								nn (C), line						7a		62,155.
	D Net	unrelated	busines	s taxable	income	e from Fo	rm 990	0-T, line 34	• • • • •		• • • •	_		7b		-26,287.
				-t- (Dt)	\/	- 46)						P	Prior Year		Cur	rent Year
ne			-	•		•							212	411		221 560
/en	1											<del></del>	312,			331,560.
Revenue								nd 7d)  .  . lc, 10c, and					109,			1,040.
								Part VIII, co					423,0	176.		1,050.
_								lines 1-3)					423,	770.		333,650.
	l															
			to or for members (Part IX, column (A), line 4)								<b></b>	7.40	C 1 7		145 110	
es	l								II (A), IIIIe:				140,	01/.		145,118.
Expenses		fessional f							/FD:						-	
χ̈́								5GEI		<del>, ,  </del>						
_								1f-24e)		<u>SS</u>			250,			293,391.
	<b>18</b> Tot	al expense	es. Add li	nes 13-1	7 (must	t equa <b>(</b> €	art IX	င္လာပြဲမက္ခြဲက (A)	ໃຫ້ <b>ຢ່າ</b> 25)				390,	346.		438,509.
		enue less	expense	es. Subtra	act line	18 from l	ne 12	• • • • •		盛			32,	252.		-104,859.
2 8						, -	01	TOTAL	119	' i		Beginni	ng of Curre	nt Year	En	d of Year
alar alar	<b>20</b> Tot	al assets (	-	,					1.6.8.	electric de			423,	285.		329,926.
Net Assets of Fund Balance	<b>21</b> Tot	al liabilities	s (Part X	, line 26)						• • • •			48,	<u>078.</u>		56,709.
		assets or	fund bal	ances. S	ubtract	line 21 fro	om line	e 20 · · ·					375,	207.		273,217.
Pa	rt'll 🚽 🥄	Signatui	e Bloc	:k									_			
Unde	er penalties o	f perjury, I dec	lare that It	ave examin	ed this rel	turn, includin	g accon	npanying schei nich preparer h	dules and stat	ements, an	d to the bes	t of my know	dedge and be	elief, it is	true, correct	, and
	piete Deciara	1 prepar	BI (0010 UII	/ Onicery	Spased on	all loomat	9.9 w	non preparer n	as any knowi	euge ———					_	
			fe of officer		<u></u>	13h	سبد							4/	5	
Sig	gn												ate			
He	re		Brad									Exec	utive	Offi	cer	
		<u> </u>	print name			<del>13/</del>		A	<del> </del>				<del></del>		l aru	
		Print/Type p	reparers n	ame		<b>J</b> eps	rer's si		Mi o.V	' NA	ate		Check	ıf	PTIN	
Pa		Ronald				Wr	<u>/ W</u>	<u> </u>	_ <b>XX</b> (\^\	1 NO	4/18/	15	self-employ	red	P0008	2589
	eparer	Firm's name		ONALD		MEYER,		L.L.C.	$\overline{}$				1			
US	e Only	Firm's addre	_	01 W		ST ST	E 8	50			_		Firm's EIN	<u>20</u>	-5246	709
		<u></u>		USTIN						78701-	-1670		Phone no	(51	2) 47	6-4511
_								e (see instri	<u> </u>							es No
BA	A For Pa	perwork F	Reductio	n Act No	otice, s	ee the se	parate	e instruction	ons.		TEE	A0101 05/2	28/14		Fo	orm <b>990</b> (2014)

	990 (2014) Texas Panhandle Builders Association	75-0949942	Page 2
Par	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	Promotion and education in the area of home building.		
		<del></del>	<del>-</del>
		<b></b>	
		<b></b>	<b>-</b>
2	Did the organization undertake any significant program services during the year which were not listed on the	е рпог	<del></del>
	Form 990 or 990-EZ?		s X No
	If 'Yes,' describe these new services on Schedule O.		A III
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es? \ \ Y	es 🗴 No
-	If 'Yes,' describe these changes on Schedule O.		N
4	Describe the organization's program service accomplishments for each of its three largest program services	e se maseurad by avna	neee
·	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to and revenue, if any, for each program service reported.	o others, the total expen	ses,
4 a	(Code) (Expenses \$ including grants of \$)		)
	Directory - Compilation of members and services offered by		
	and the state of t	<b></b>	
		<b> </b>	
			<b></b>
		<b></b>	
		<b></b>	
		<b></b>	
4 h	(Code ) (Expenses \$ including grants of \$ )	(Revenue \$	<u> </u>
	Newsletter - Distributed monthly to members and associates.		
	Promotes news and advertising concerning the area's building		
	environment.		- <del></del>
	environment.		
			- <del></del>
			<del></del>
			<del>-</del>
			- <b>-</b>
4 c	(Code:) (Expenses \$ including grants of \$)	) (Revenue \$	)
	Parade - Annual showcase of newly constructed homes to		
	educate and inform the public on the newest innovations used		<b></b>
	by the construction industry.		<b>-</b>
			- <del></del>
			<del>-</del> -
			<del>-</del>
			<b>-</b>
		<b></b>	<b>-</b>
		<del></del>	- <b></b>
	Other program services (Describe in Schedule O.)		<del></del>
40	Other program services. (Describe in Schedule O.)  (Expenses \$ including grants of \$ ) (Revenue	¢	
	7(11)	<u> </u>	/
46	Total program service expenses		

	1111   One of the duried contenties			
,			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
	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	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	Х	
	e Did the organization report an amount for other liabilities in Part X, line 25° If 'Yes,' complete Schedule D, Part X	11 e		Х
	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	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	<b>b</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		х
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		х
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? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	complete Schedule G, Part III	19		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	h If 'Ves' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 6	I	

Form 990 (2014) Texas Panhandle Builders Association 75-0949942 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 . . . . . X 21 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 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Yes, complete Х 23 Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . . . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year? . . . . . . . . . . . . . . . . 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 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 25b 26 Х 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 27 Х 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 . . . . . . . . . . . . . . . 28a Χ b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . . . . . . . . . Х 29 Χ 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . . . . . . . X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 Χ 33 Χ Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, 34 X 35a 

BAA

Form 990 (2014)

Х

Х

35b

36

37

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 

# Form 990 (2014) Texas Panhandle Builders Association [Part V] Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V . . . . .

Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<del></del>	163	140
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 )		ĺ
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garning	1		l
(gambling) winnings to prize winners?	1 c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	Х	
<ul> <li>4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</li> <li>b If 'Yes,' enter the name of the foreign country</li> </ul>	4 a		х
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	1		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c if 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		<u> </u>
•	30		<u> </u>
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		- <u>x</u>
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
Form 8282?	7 c		X
d if 'Yes,' indicate the number of Forms 8282 filed during the year	J .		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		<u> </u>
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			ļ
organization have excess business holdings at any time during the year?	8		<u> </u>
9 Sponsoring organizations maintaining donor advised funds.	-		
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		ļ
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		<u> </u>
10 Section 501(c)(7) organizations. Enter			1
a Initiation fees and capital contributions included on Part VIII, line 12	-		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b	- 1		
11 Section 501(c)(12) organizations. Enter	1		
a Gross income from members or shareholders.	-		1
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			ļ
12a 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   12b	12a		-
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a is the organization licensed to issue qualified health plans in more than one state?	13 a		
Note. See the instructions for additional information the organization must report on Schedule O.			
·			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	]		
c Enter the amount of reserves on hand	1		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14 a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
BAA TEEA0105 05/28/14	Form	990 (	2014)

Form 990 (2014) Texas Panhandle Builders Association 75-0949942 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year . . . . . 37 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 . . . . . 37 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . . . . . . . . . . . . . . . . 3 Х Did the organization make any significant changes to its governing documents 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х 8 b Х 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 . . . . . . . . . . . . Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes Nο 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? . . . . . . . . . 11 a Х b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in 12 c 13 14 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? 15 a Х 15 b 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 16 a Х 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Upon request Other (explain in Schedule O) Another's website 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 State the name, address, and telephone number of the person who possesses the organization's books and records

Lew Bradshaw

Amarillo

5601 Enterprise Circle

79106

Form 990 (2014)	Texas	Panhandle	Builders	Association	75-0949942	Page

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors	1
•	Check if Schedule O contains a response or note to any line in this Bort VIII	

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

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

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

				(C)						
(A) Name and Title		than	one i both dire	oox, t an of ector/	inless flicer a truste	e)	n	(D)  Reportable compensation from	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
	per week (list any nours for related prganiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Lew Bradshaw	40.00									
Executive Officer				X	_		L	74,436.	0.	0.
(2) Paul Davis	2.00									
President		Х		Х			<u> </u>	0.	0.	0.
_(3)_Trey_Porter	2.00	١,,		.,						
1st Vice President		Х		X				0.	0.	0.
_(4)_Brandon_Dumas	2.00	,,								
2nd Vice President		Х		X				0.	0.	0.
_(5)_Debbie_Bigelow	2.00	,,		.,						
Treasurer		Х		X				0.	0.	0.
_(6)_Mandy_Cartrite	2.00	x		Х					_	
Past President				Λ		ļ	_	0.	0.	0.
_(7)_Waylon_Adams	1.00	X								_
Director	1 00	^				<u> </u>		0.	0.	0.
_(8) Winston Allen	1.00	x						_		
Director	1.00	<u> </u>			_		-	0.	0.	0.
(9) Patricia Baca		X					ŀ			
Director	1.00	<u> </u>				<b> </b>	$\vdash$	0.	0.	0.
(10) Brennen Bell		Х								
Director	1 00	<u> </u>			-			0.	0.	0
(11) Jeff Bryant	1.00	X								
Director (12) J.C. Calcote	1.00	<del>  ^`</del>	$\vdash$		-	├		0.	0.	0.
Director		X				1			_	
(40) 5 1 0 1	1.00	+	$\vdash$	_	$\vdash$	$\vdash$	-	0.	0.	<u> </u>
Director	1.00	X						0.	0.	_
	1.00	<del>  ^`</del>	$\vdash$	_	$\vdash$	$\vdash$	$\vdash$	ļ <sup>0</sup> .	0.	0.
(14) Kenny Click Director		x						0.	0.	_
Director		٠,,			<u> </u>	<u> </u>	1	<u> </u>	0.	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(B) (C)											
(A) Name and title	Average hours per	box	, unle	ss pe	rson i	than o s both or/trust	an	(D)  Reportable compensation from	(E)  Reportable compensation from		(F) timated
	week	or director	_	_		Highest compensated employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	comp fro orga and	nensation om the anization of related anizations
(15) Ron Connally	1.00										
Director	<u> </u>	Х						0.	0.		0.
(16) Mel Darnell Director	1.00	X							0		0
	1 00	-				-		0.	0.		0.
(17) Holly Griffin Director	1.00	x						_	0		0
	1 00						<u> </u>	0.	0.		<u> </u>
(18) Matt Griffith	1.00	x									•
Director	1 00		_				-	0.	0.		0.
(19) Steve Harms	1.00	x							•		
Director	1 00	<b>├</b>	$\vdash$	-				0.	0.		0.
(20) Boyd Johnston	1.00	x		•				_	_		0
Director (21) Brent King	1.00	-	<u> </u>				$\vdash$	0.	0.		0.
	1	x						0.	_		0
Director (22) Brad Lamden	1.00					-	-	0.	0.		0.
	100	x						_		İ	0
Director (23) Pedro Limas	1.00			<del>                                     </del>			_	0.	0.	<u> </u>	0.
Director	1 <del></del>	X						0.	0.		0.
(24) Muff London	1.00	_				<del>                                     </del>		<u> </u>	0.		····
Director	1	X						0.	0.		0.
(25) Chris Lyons	1.00	<b>├</b>	$\vdash$					· · · · · · · · · · · · · · · · · · ·	<del></del>		<u> </u>
Director	1	x						0.	0.		0.
1 b Sub-total			٠	٠.	<u> </u>	<del>'                                    </del>	<b>&gt;</b>	74,436.	0.		0.
c Total from continuation sheets to Part VII, Section	1 A						<b></b>	0.	0.		0.
d Total (add lines 1b and 1c)							<b></b>	74,436.	0.		0.
2 Total number of individuals (including but not limited							eive			npensal	
from the organization				ĺ					•		
											Yes No
3 Did the organization list any former officer, director, of	or trustee	. kev	em/	vola	ee.	or hic	hes	st compensated en	nplovee		
on line 1a? If 'Yes,' complete Schedule J for such ind										. 3	X
4 For any individual listed on line 1a, is the sum of repo	rtable co	mpe	nsat	tion	and	othei	r coi	mpensation from			
the organization and related organizations greater that	an \$150,	00Ö?	If 'Y	'es' (	com	plete	Scf	nedule J for			
such individual										. 4	X
5 Did any person listed on line 1a receive or accrue confor services rendered to the organization? If 'Yes,' co.	mpensati <i>mplete S</i>	ion fr chea	om : lule :	any I <i>J for</i>	unre Suc	lated h ne	l org	janization or individ	dual	. 5	X
Section B. Independent Contractors	mpioto c	0,,,,,			-	po.	00/			., .	L 1
1 Complete this table for your five highest compensate	d indepe	nden	t co	ntrac	ctors	that	rec	eived more than \$	100,000 of	-	
compensation from the organization. Report compen-	sation for	r the	cale	nda	r yea	ar en	ding		<del></del>		
(A) Name and business address  (B) Description of services											C) ensation
	_		_								
2 Total number of independent contractors (including b	ut not lin	nited	to th	ose	liste	ed ab	ove	) who received mo	re than		
\$100,000 of compensation from the organization				_					<u></u>		
BAA		TEEA	J108	05/2	8/14					Form	990 (2014)

<del>`</del>		Check if Schedule O contains a res	p. 1.1.00 or 1.000 to drift int	(A) Total revenue	(B)	(C)	(D)
				rotal revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
nts nts	1 a	Federated campaigns	1 a				
ara our		' · · · · · · · · · · · · · · · · · · ·	1 b				
IS, C		_	1 c				
Gif			1 d				
ars,	е	Government grants (contributions)	1 e				
Contributions, Gifts, Grants and Other Similar Amounts		<u> </u>	1 f				
ontr od C		Noncash contributions included in lines 1a-1f	· <del></del>				
<u>5</u>	h	Total. Add lines 1a-1f	···				
ž	2 2		Business Code				
Program Service Revenue		Membership Dues		53,630.	53,630.	0.	0.
ce		Parade of Homes		136,272.	113,247.	23,025.	0.
ervi		Advertising Home Show	· - <del></del>	27,465. 57,316.	55,316.	27,465. 2,000.	0.
SE		Golf Tournament		24,226.	24,226.	2,000.	0.
gra		All other program service revenue .		32,651.	22,986.	9,665.	0.
Pro		Total. Add lines 2a-2f		331,560.	22,300.	<u> </u>	<u> </u>
	3	Investment income (including dividend other similar amounts)	ds, interest and	1,040.	0.	0.	1,040.
	4	Income from investment of tax-exemp		170.10			270.0
	5	Royalties	. <sub>.</sub>				
		(ı) Real	(II) Personal				
		Gross rents					
		Less: rental expenses					
		Rental income or (loss)					
	d	Net rental income or (loss)					<u> </u>
	7 a	Gross amount from sales of assets other than inventory	s (II) Other				
	b	Less cost or other basis and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)	<u></u> . ►				
Other Revenue	8 a	Gross income from fundraising events (not including \$	5				
e Ve		of contributions reported on line 1c)					
ě		See Part IV, line 18					
<u> </u>	ı	Less: direct expenses			-		
ర	c	Net income or (loss) from fundraising	events				
	9 a	Gross income from gaming activities See Part IV, line 19	. а				
	b	Less: direct expenses	. b				
	c	Net income or (loss) from gaming act	ivities				
	10 a	Gross sales of inventory, less returns and allowances	. <b>a</b> 1,050.				
	b	Less. cost of goods sold					
	_ c	Net income or (loss) from sales of inv	entory	1,050.	1,050.	_ 0.	0
		Miscellaneous Revenue	Business Code				
	11 a						
	b	)					<u> </u>
	°	; . <del> </del>					<del></del>
	1	All other revenue	•				<del></del>
	_	Total. Add lines 11a-11d		222 (50	270 455		
	117	TOTAL PROPERTY SEE INCIPITATIONS		1 222 CEA 1	170 / [	CO 1 F F	1 1 1 1

### Part IX Statement of Functional Expenses

Section 501(c)(3)	) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)
•	Check if Schedule O contains a response or note to any line in this Part IX

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		×		
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	76,245.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	76,243.			
7	Other salanes and wages	53,685.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	5,123.			
10	Payroll taxes	10,065.			
11	Fees for services (non-employees)		<del>-</del>		
	Management				
	Legal				
	Accounting	14,283.			
	Lobbying				
	Professional fundraising services See Part IV, line 17				
-	Investment management fees				· · · · · · · · · · · · · · · · · · ·
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,610.			
12	Advertising and promotion	17,040.			
13	Office expenses	19,341.		-	
14	Information technology	3,747.			
15	Royalties				
16	Occupancy	11,641.			
17	Travel	49,799.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	162,518.			
20	Interest				
21	Payments to affiliates	<u> </u>			
22	Depreciation, depletion, and amortization	611.			
23 24	Other expenses Itemize expenses not	2,275.		<del> </del>	
	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.)				
a	Charitable donations	6,671.			
	Community involvement	2,300.			
	Bad debt	555.			
c			- <del>-</del>		
€	All other expenses			<u></u>	
25	Total functional expenses Add lines 1 through 24e	438,509.		<del> </del>	
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

		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	18,075.	1	346.
	2	Savings and temporary cash investments	254,237.	2	137,188.
ĺ	3	Pledges and grants receivable, net	•	3	· · · · · · · · · · · · · · · · · · ·
١	4	Accounts receivable, net	32,682.	4	26,773.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	<u> </u>
ا تخ	9	Prepaid expenses and deferred charges	12,853.	9	4,677.
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	2,371.	10 c	3,734.
ŀ	11	Investments – publicly traded securities	103,067.	11	109,456.
	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	0.	15	47,752.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	423,285.	16	329,926.
	17	Accounts payable and accrued expenses	17,368.	17	14,135.
İ	18	Grants payable		18	
	19	Deferred revenue	30,710.	19	31,895.
ĺ	20	Tax-exempt bond liabilities		20	
e.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
7	23	Secured mortgages and notes payable to unrelated third parties		23	10,679.
	24	Unsecured notes and loans payable to unrelated third parties		24	10,015
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	<del></del>
	26	Total liabilities. Add lines 17 through 25	48,078.	26	56,709.
S S		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
ũ	27	Unrestricted net assets	272,140.	27	163,761.
ä	28	Temporarily restricted net assets		28	
핗	29	Permanently restricted net assets	103,067.	29	109,456.
Net Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
S	30	Capital stock or trust principal, or current funds		30	
ş	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Asi	32	Retained earnings, endowment, accumulated income, or other funds		32	
et A	33	Total net assets or fund balances	375,207.	33	273,217.
Ź	34	Total liabilities and net assets/fund balances	423,285.	34	329,926.
			423,285.	<b>7</b> -4	<u> </u>

BAA

Form 990 (2014)

Form	n 990 (2014) Texas Panhandle Builders Association 7	5-0949	9942		Pa	ige 12
Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	· · · · ·			$\cdot \square$
Ì1	Total revenue (must equal Part VIII, column (A), line 12)			33	33,6	550.
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		43	88,5	509.
3	Revenue less expenses Subtract line 2 from line 1			1(	14,8	359.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		37	75,2	207.
5	Net unrealized gains (losses) on investments					369.
6	Donated services and use of facilities	. 6				
7	Investment expenses	1 -				
8	Prior period adjustments	. 8				
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
<u> </u>	column (B))	· 10		2.	73 <b>,</b> 2	217.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					$\cdot \sqcap$
	<u> </u>				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. [	2a		l x ~
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed or separate basis, consolidated basis, or both	n a				,
	Separate basis Consolidated basis Both consolidated and separate basis		j-			
ŧ	Were the organization's financial statements audited by an independent accountant?			2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				-	
	basis, consolidated basis, or both:					
	X   Separate basis		-			
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a review, or compilation of its financial statements and selection of an independent accountant?	udıt,	[	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?	ıle • • • • •	[	3 a		Х
ŀ	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	i audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>		3 b		
BAA			1	orm	990 (	2014)

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

### **Political Campaign and Lobbying Activities**

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

2014

Open to Public

Department of the Treasury Internal Revenue Service ► 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 it instructions is at www.irs.gov/form990.

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 instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see instructions), then

• 5	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
Name	of organization			Employer identifica	ition number
Tex	as Panhandle Build	ers Association		75-094994	
Par	t I-A Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.
1	Provide a description of the or	ganization's direct and indirect political campa	aign activities in Part I\	/	
2	Political expenditures			<b>≻</b> \$	
3	Volunteer hours	<u></u>	<u> </u>		
Par	t I-B Complete if the or	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any excise	e tax incurred by the organization under secti	on 4955	. <b> </b>	
2	Enter the amount of any excise	e tax incurred by organization managers unde	er section 4955	▶\$	
3	•	section 4955 tax, did it file Form 4720 for this	•		
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV.				
Par		rganization is exempt under section			
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function activ	vities ► \$	
2		organization's funds contributed to other orga			
3	Total exempt function expendi	tures Add lines 1 and 2. Enter here and on F	Form 1120-POL,		
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made payments.	and employer identification number (EIN) of al For each organization listed, enter the amount is received that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing o	organization's funds. Also	enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and prompity and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 201	<sup>4</sup> Texas Panha	<u>indle Builders Ass</u>	ociation	75-0949	9942 Page <b>2</b>
	he organizatio	n is exempt under sec		l filed Form 5768 (e	lection under
A Check ► If the filing	organization belon	gs to an affiliated group (and	list in Part IV each affili	ated group member's nam	ne,
<b></b> _		share of excess lobbying exp			
B Check ► I if the filing	organization check	ced box A and 'limited control	provisions apply		
(The term '	Limits on Lobby expenditures' mea	ing Expenditures ans amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	es to influence publ	c opinion (grass roots lobbyir	ng)		
<b>b</b> Total lobbying expenditure	es to influence a leg	uslative body (direct lobbying)	)		
c Total lobbying expenditure	es (add lines 1a and	i 1b)			
d Other exempt purpose ex	penditures				
e Total exempt purpose exp	enditures (add line	s 1c and 1d)			
f Lobbying nontaxable amo both columns	unt. Enter the amou	unt from the following table in			
If the amount on line 1e, colu	mn (a) or (b) is	The lobbying nontaxable a	mount is:		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1,	000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$1	17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000		
Over \$17,000,000		\$1,000,000			
•	•	Ine 1f)			
h Subtract line 1g from line	1a. If zero or less, e	enter -0	• • • • • • • • • • •		<del> </del>
i Subtract line 1f from line 1	Ic If zero or less, e	nter -0	• • • • • • • • • • • •		
		r line 1h or line 1i, did the org			· · · Yes No
(Some	organizations tha	4-Year Averaging Period Unat made a section 501(h) elens below. See the instruction	ction do not have to d		
		oying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) Total
2 a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	n 990 or 990-EZ) 2014

Part II-B   Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).			rm 570	68	Pag	,,,,,
	(a	1)		(b)		
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No		Amour	nt	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
a Volunteers?			1			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1			
c Media advertisements?						
d Mailings to members, legislators, or the public?					-	
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?		_				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	_					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
I Other activities?			-		•••	
J Total. Add lines 1c through 11						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912						
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 section 501(c)(6).	(c)(5)	, or				
				Y	es	No
1 Were substantially all (90% or more) dues received nondeductible by members?			[	1		Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	х	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		Х
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) answered 'Yes.'	Part	, or s III-A,	sectio	n 501 3, is	(c)	
1 Dues, assessments and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).						
a Current year		2 a	ł			
<b>b</b> Carryover from last year		2 Ь				
c Total		2 c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4				_

Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

# SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Texas Panhandle Builders Ass				75-0949942
ar	Organizations Maintaining Donor Complete if the organization answer	<b>Advised Funds or Oth</b> ed 'Yes' to Form 990, P	ner Similar Funds Part IV, line 6.	or Acc	counts.
		(a) Donor advised t	funds	(b) F	unds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)			_	
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				<del>-</del> ·
5	Did the organization inform all donors and donor ad are the organization's property, subject to the organization	lvisors in writing that the assenization's exclusive legal cont	ets held in donor advis		· · · · · Yes No
6	Did the organization inform all grantees, donors, an for charitable purposes and not for the benefit of the impermissible private benefit?	e donor or donor advisor, or f	or any other purpose of	conferrina	
ar	Conservation Easements. Complete if the organization answere	ed 'Yes' to Form 990, P	art IV, line 7.		
<u></u>	Purpose(s) of conservation easements held by the				
	Preservation of land for public use (e g , recrea			nstorically	ımportant land area
	Protection of natural habitat		Preservation of a d	ertified hi	stone structure
	Preservation of open space		_		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation co	ontribution in the form	of a conse	ervation easement on the
	last day of the tax year				
_	Total number of concentation concents				leld at the End of the Tax Ye
	Total number of conservation easements			2 a	
	•			2 b	
	Number of conservation easements on a certified h	•	<i>'</i>	2 c	<del></del>
C	Number of conservation easements included in (c) structure listed in the National Register	acquired after 8/17/06, and n	ot on a historic	2 d	
3	Number of conservation easements modified, trans tax year ►		L.		tion during the
4	Number of states where property subject to conserv	vation easement is located >			
5	Does the organization have a written policy regarding and enforcement of the conservation easements it I				
6	Staff and volunteer hours devoted to monitoring, ins	specting, and enforcing conse	ervation easements du	ırıng the y	rear
7	Amount of expenses incurred in monitoring, inspect	ting, and enforcing conservat	ion easements during	the year	
8	Does each conservation easement reported on line and section $170(h)(4)(B)(u)$ ?	2(d) above satisfy the requir	ements of section 170	(h)(4)(B)(	<sup>1)</sup> ☐ Yes ☐ No
9	In Part XIII, describe how the organization reports of include, if applicable, the text of the footnote to the conservation easements.	conservation easements in its organization's financial stater	revenue and expense ments that describes to	e stateme ne organiz	nt, and balance sheet, and zation's accounting for
ar	Complete if the organization answer	ions of Art, Historical ed 'Yes' to Form 990, P	Treasures, or Of	her Sin	nilar Assets.
_ 1 a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets held in Part XIII, the text of the footnote to its financial st	for public exhibition, education	on, or research in furth	nent and nerance o	balance sheet works of f public service, provide,
t	If the organization elected, as permitted under SFA historical treasures, or other similar assets held for following amounts relating to these items	S 116 (ASC 958), to report in public exhibition, education, of	i its revenue statemen or research in furthera	t and bala	ince sheet works of art, blic service, provide the
	(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, his amounts required to be reported under SFAS 116 (	torical treasures, or other sim ASC 958) relating to these ite	nilar assets for financia ems:	ıl gain, pro	ovide the following
8	Revenue included in Form 990, Part VIII, line 1				▶\$
Ł	Assets included in Form 990, Part X				► S

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c) . . .

25,429

5,406

328

773

3,101

3,734

Schedule D (Form 990) 2014

633

d Equipment . . . . .

BAA

Part VII	Investments – Other Securities.	Vacita Form 000 F	Port IV line 11h See Form 000 De	and V. line 12
• (a) Desc	Complete if the organization answered cription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-	
	ial derivatives		(C) Welliod of Valuation Cost of end-of-	year market value
• •	/-held equity interests			
(3) Other		-		
(A)				
(B)				
(C)				
(D)	<del></del>			<del></del>
(E)	<u></u>			
(F)				
(G)				
<u>(H)</u>				
<u>(I)</u>				
	nn (b) must equal Form 990, Part X, column (B) line 12) >		<u> </u>	
Part VIII	Investments — Program Related. Complete if the organization answered	Voc' to Form 000 F	Part IV June 11a See Form 000 Pa	ort V line 12
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-o	
(1)	(a) Description of investment type	(b) book value	(c) Method of Valuation Cost of end-o	i-year market value
(2)	<del></del>			
(3)			<u> </u>	· · · · · · · · · · · · · · · · · · ·
(4)				-
(5)				
(6)				
(7)	· · · · · · · · · · · · · · · · · · ·	<del> </del>		
(8)		† · · · · · · · · · · · · · · · · · · ·		
(9)				
(10)				
Total. (Colur	nn (b) must equal Form 990, Part X, column (B) line 13) •			
Part IX	Other Assets.	Waa'ta Farra 000 F	2 and 11/1 lines 44 d. Co.s. Forms 000 D.	and Volume 45
	Complete if the organization answered	res to Form 990, rescription	Part IV, line 11d. See Form 990, Pa	(b) Book value
(1) Con	struction in Process			47,752.
(2)				,
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
	olumn (b) must equal Form 990, Part X, column (B),	line 15 )		47,752.
Part X	Other Liabilities.			1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
i di cir	Complete if the organization answered 'Yes' to f	orm 990, Part IV, line 1	1e or 11f See Form 990, Part X, line 25	
	(a) Description of liability	(b) Book value		
	eral income taxes			
(2)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	mn (b) must equal Form 990, Part X, column (B) line 25)			··
	or uncertain tax positions. In Part XIII, provide the text of the foo			
tax positions	under FIN 48 (ASC 740) Check here if the text of the footnote	has been provided in Part XI	<u>  </u>	<u>.</u> <u>L</u>

Part XIII | Supplemental Information.

5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

Schedule **D** (Form 990) 2014

438,509.

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

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Inspection

Open to Public

Department of the Treasury Internal Revenue Service ► 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.

Employer Identification

Name of the organization Employer identification number 75-0949942 Texas Panhandle Builders Association Membership consists of those in the home building industry in Amarillo, Pt VI, Line 6 Texas and its surrounding counties. At the annual meeting of members, approval of board nominees is Pt VI, Line 7a ratified. The Finance Committee has the responsibility of reviewing Form 990 Pt VI, Line 11b before it is filed with IRS. Senior Officers perform an evaluation of the Executive Officer and Pt VI, Line 15a determine his compensation. Pt VI, Line 19 These items are available upon request.

TEEA4901 08/18/14

•

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

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

Code:	Description	Various - Monthly meetings featuring speakers and seminars
Expenses		on subjects such as OSHA updates and leadership conferences.
Grants Of		
Revenue.		
	_	

# Form 990-T, Page 1, Part II, Line 28 Other Deductions Statement

Audit and Bookkeeping	3,571.
Bank Service Charges	25.
Computer Support and Maintenance	20.
Copies	122.
Dues and Subscriptions	402.
Insurance	569.
Internet	350.
Mileage	1,693.
Mobile Phone Usage	487.
Office Expense	623.
Payroll Processing Fees	229.
Postage and Delivery	399.
Rent	2,550.
Storage	360.
Telephone	471.
Travel	10,757.
Total	22,628.

# Form 990-T, Page 4, Schedule J, Part II, Income from Periodicals **Schedule J, Part II Statement**

			If a gain compute columns 5 through 7.			but not more than column 4).
Ad partners Website Directory	22,055. 3,010. 9,665.	0. 2,269. 8,944.	22,055. 741. 721.	0.	0. 0. 0.	

Total 34,730. 11,213. 23,517. 0. 0

#### Form 990

### **Continuation Sheet for Form 990**

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

75-0949942

Texas Panhandle Builders Association

Part VII | Continuation: Officers, Directors, Trustees, Key Employees, and

Highest Compo	sated l	Empl	lovees
---------------	---------	------	--------

	nployee	<del>-</del>						<del></del>		
(A)	(B) (C) Position (check all that apply)					at annie		(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
26 Paul Lyons	1.00									
Director	ļ	X	<u> </u>					0.	0.	0.
_27_Leslie_Massey	1.00	ļ							1	
Director		Х			<u> </u>			0.	0.	0.
28 Joe Norman	1.00_							_	_	_
Director		X		_	_			0.	0.	0.
29 Brenda Riggs	1.00_									_
Director		X		ļ	ļ			0.	0.	0.
_30_Garland_Sell	1.00_							_	_	_
Director		X	_			<u> </u>		0.	0.	0.
31 April St. Clair	1.00_					ŀ		_		_
Director	1 00	X	-			<u> </u>		0.	0.	0.
32 Barrett Saikowskı	1.00_	ł								
Director	1 00	X	-	<u> </u>	_		<b> </b>	0.	0.	0.
33 Chip Staniswalis	1.00_	١.,								
Director	1 00	X			$\vdash$		<u> </u>	0.	0.	0.
34 Deb Strother	1.00_									
Director	1.00	X	-	-			-	0.	0.	0.
_35_Tracy_Welland Director	1=.00-	X						0.	_	0
36 Gary Wells	1.00		┢╌		-		-	0.	0.	0.
Director	1=:-00-	×						0.	0.	0.
37 Eric White	1.00	<del>  ^</del>	$\vdash$		-	<u> </u>	<u> </u>	0.		
Director	<del> </del>	x						0.	0.	0.
38_Noah_Williams	1.00	<u> </u>	$\vdash$			-		0.		
Director	1=	x						0.	0.	0.
								0.	•	
							_			
	<u> </u>									
					_					
			ļ				-			
	<del> </del>									Form <b>990</b> Cont 2014