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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.

2015 Open to Public Inspection

OMB No 1545-0047

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the 2015 o	alendar year, or tax year beginning , and ending			
В	Check if applicable	C Name of organization AMERICAN INSTITUTE OF ARCHITECTS,		D Employer	identification number
	Address change	IOWA CHAPTER			
	-	Qoing business as AIA IOWA		42-0	920934
ᆜ	Name change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone	
	Initial return	400 LOCUST ST, SUITE 100		515-	<u> 244-7502</u>
$\overline{\Box}$	Final return/	City or town, state or province, country, and ZIP or foreign postal code	_		
	terminated	DES MOINES IA 50309		G Gross rece	epts\$ 715,541
	Amended return	F Name and address of principal officer			
	Application pending	JESSICA REINERT	H(a) Is this a gro	up return for su	bordinates? Yes X No
			H(b) Are all sub-	ordinates inclu	rded? Yes No
			If "No,"	attach a list (	see instructions)
_	Tax-exempt status	501(c)(3) X 501(c) ( 6 ) ◀ (insert no ) 4947(a)(1) or 527			
<u> </u>					
<del>"</del>		XIAIOWA.ORG    X   Corporation   Trust   Association   Other ▶	H(c) Group exer L Year of formation 1		
****	Form of organization		L Year of formation 1	<del>904</del>	M State of legal domicile IA
	1	ımmary			<del></del>
		escribe the organization's mission or most significant activities			
320		ESSIONAL MEMBERSHIP ASSOCIATION FOR ARCHITECTS D	OING BUSINES	SS IN :	THE
		E OF IOWA.			
وَهُوْزُ		, mary			
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	2 Check th	is box $lacktriangle$ if the organization discontinued its operations or disposed of more tha	n 25% of its net ass	ets.	
	3 Number	of voting members of the governing body (Part VI, line 1a)		3	
	4 Number	of independent voting members of the governing body (Part VI, line 1b)		4	_13
<b>≱</b> <u>₹</u>	5 Total nui	nber of individuals employed in calendar year 2015 (Part V, line 2a)		5	5
St St	6 Total nui	nber of volunteers (estimate if necessary)		6	101
	7a Total uni	elated business revenue from Part VIII, column (C), line 12		7a	14,986
න් _	b Net unre	ated business taxable income from Form 990-T, line 34		7b	0
1			Prior Yea	ir	Current Year
SICT & SAY CHINNED IN NOT A Activities & Govern	8 Contribu	tions and grants (Part VIII, line 1h)		0	0
HE CANNICED	9 Program	service revenue (Part VIII, line 2g)	564	4,375	651,599
ુ*	10 Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		986	1,121
	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5	7,978	56,482
<b>2</b>	12 Total rev	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	623	3,339	709,202
2	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)		0	7,550
	14 Benefits	paid to or for members (Part IX, column (A), line 4)		0	0
_		other compensation, employee benefits (Part IX, column (A), lines 5-10)	24:	1,820	270,262
g & BNW Expenses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)		0	0
	b Total fun	draising expenses (Part IX, column (D), line 25)			
©X Ш	17 Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	32	5,336	363,516
91	18 Total exi	Add to 42 / ( ) A 17 / ( ) A 18 /		7,156	641,328
2010 Oliver Assets of 102	19 Revenue	less expenses Subtract line 18 from line 12/ 1/5 2016		6,183	67,874
<del>=</del>	80	201e 161	Beginning of Cur		End of Year
ets	20 Total as:	sets (Part X, line 16) pulities (Part X, line 26)	424	4,479	509,921
Ass	21 Total liat	pilities (Part X, line 26)	11:	5,004	132,572
<u>\$</u>	22 Net asse	ts or fund balances Subtract line 21 from line 20	309	9,475	377,349
	Part II Si	gnature Block	•		
$\overline{}$	•	perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the be	est of my kn	owledge and belief, it is
		omplete Declaration of preparer (other than officer) is based on all information of which prepare			
		ATTONIA POLICE F			8.1.16
Si	gn 📗 🏲 🕏	Signature of officer		Date	
	ere	· · · · · · · · · · · · · · · · · · ·	CUTIVE DIF	RCTOR	)
• • • •		Type or print name and title	COTTAN DEL	CDCIOI	<u> </u>
_		e preparer's name Preparer's signature	Date	Check	ıf PTIN
Pa	:4		7/27/		□"
	enarer Oom	A. SCHMIDT, CPA JOHN A. SCHMIDT, CPA  MCCOVEN HIDGE CLARK CONTEND D.C.		self-em	
	e Only		··   F	irm's EIN	42-1104473
US	· 1	1601 W LAKES PKWY STE 300			E1E 000 30E0
_	Firm's ac		F	Phone no	515-288-3279
_		ss this return with the preparer shown above? (see instructions)			X  Yes   No
Fo DA		uction Act Notice, see the separate instructions.			Form <b>990</b> (2015)

DAA

Form 990 (2015)

	1990 (2015) AMERICAN INSTITUTE OF ARCHITECTS, 42-0920934		<u>P</u>	age 3
Ŗ	art 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,"			37
_	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
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,	_	v	
_	Part III	5	X	<del>                                     </del>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			1
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			₹.
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		77
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			77
_	complete Schedule D, Part III	8		X
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			v
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		v
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			ĺ
_	VII, VIII, IX, or X as applicable.			ĺ
d	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	444		v
L	· ·	11a		X
D	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	446		x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	11b		├^
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		x
a		11c		├^
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е		11a		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
'	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del>- ' ''</del> -		
120	Schedule D, Parts XI and XII	12a		Х
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120		
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 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	7.5		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_x_
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		x
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	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

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease 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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
-	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
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	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34_		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a_		X
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	<del>                                     </del>	₩
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	<u> </u>
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	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38_	<u> </u>	L

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 Yes No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O X b 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 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? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a а 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O 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 13b Enter the amount of reserves on hand 13c С 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b DAA Form 990 (2015)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI  $|\mathbf{X}|$ Section A. Governing Body and Management Yes No 13 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 13 b Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct X 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 since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint Х 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, Х 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a  $\mathbf{X}$ 8b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done Х 13 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Х 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a X with a taxable entity during the year? 16a 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 Section C. Disclosure NONE 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) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X 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 19 financial statements available to the public during the tax year 20 State the name, address, and telephone number of the person who possesses the organization's books and records 400 LOCUST ST, STE 100 JESSICA REINERT DES MOINES IA 50309

Form 990 (2015)	AMERTCAN	TNSTTTITE	$\cap$ F	ARCHITECTS	

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	(do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the				
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-271033-MISC)	organization and related organizations
(1)JOE TURSI										
	4.00									
PRESIDENT	0.00	X		X				0	0	0
(2) MINDY AUST										
	2.00									
PRESIDENT-ELECT	0.00	X	_	Х	_	$\sqcup$		0	0	0
(3) MATT OSTANIK										
	2.00									
2ND VICE PRESIDENT	0.00	X	_	X	_	$\sqcup$		0	0	0
(4) DANIELLE HERMANI										
	2.00									
SECRETARY	0.00	X		X	_	$\sqcup$		0	0	0
(5) GARY VAN DYKE										
	2.00									
TREASURER	0.00	X	<u> </u>	X	_	$\sqcup$		0	0	0
(6) NATHAN KALAHER										
	2.00									
PAST PRESIDENT	0.00	X	<u> </u>	X		$\sqcup$		0	0	0
(7) DOUG FORESHOE										
	1.00	l								
DIRECTOR	0.00	X		<u> </u>		$\vdash$		0	0	
(8) TONIA HOUSEHOLDE										
	1.00									_
DIRECTOR	0.00	X			<u> </u>	$\vdash$		0	0	0
(9) TOI SULLIVAN	1 00									
DIDECTOR	1.00	۱,,								
DIRECTOR	0.00	X			$\vdash$	╁╼┼		0	0	0
(10) DAN DRENDEL	1 00									
DIDECHOR	1.00								_	
DIRECTOR	0.00	X	$\vdash$		$\vdash$	$\vdash$		0	0	0
(11) CHRIS WAND	1 00									
DIRECTOR	1.00	X		}					_	_
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Form **990** (2015)

Pa	rt VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)			
•	(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle	Pos check ess pe	rson ı	than o s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estimated amount of other compensation from the	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(		organization and related organizations	
(12		1.00			-								
(13	OCIATE DIRECTOR  DALE MULLIKIN	0.00	X						0	0	<u> </u>		0
	JED DIRECTOR	1.00 0.00	x						0	0			0
(14	) JESSICA REINE	RT											
		40.00							00 212			•	
EXE	CUTIVE DIRECTOR	0.00			X				89,313	0		9	<u>, 177</u>
			_										
							<u>                                      </u>						
	Sub-total					,			89,313			9	,177
С	Total from continuation she	ets to Part VII, S	Sect	ion /	4			<b>•</b>					
<u>d</u>	Total (add lines 1b and 1c)							<b>&gt;</b>	89,313			9	,177
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov	re) who received more than	\$100,000 of			
_	<u> </u>	<del></del>										Ye	s No
3	Did the organization list any for employee on line 1a? If "Yes,"								loyee, or highest compensa	ited	ı	3	x
4	For any individual listed on line organization and related organization and related organizational	e 1a, is the sum	of re	port	able	com	pens	satio				4	X
5	Did any person listed on line 1									ndıvıdual			1
<u></u>	for services rendered to the or		'es,"	com	plete	e Sc	hedu	le J	for such person			5	<u> </u>
1	ion B. Independent Contractor Complete this table for your five compensation from the organic	ve highest comp zation Report c							dar year ending with or with	in the organization's tax ye	ear		
	Name and	(A) business address							Descrip	(B) tion of services		(C) Comper	sation
				-				<u> </u>		<del></del>			
		<del></del>		·	·	<del></del>							
2	Total number of independent	contractors (incli	uding	g but	not	lımıt	ed to	tho	ose listed above) who				

Part VIII Statement of Revenue

•		Check if	Schedule (	o con	tains a	response d	r note to any line	in this Part VIII		
-		,					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated camp	aigns	1a						
Contributions, Gifts, Grants and Other Similar Amounts	b		-	1b						
Ω,Ē	_	Fundraising ever		1c						
ifts	d			1d						
oje Bje	u		i							
Sin	e	Government grants (co	·	1e						
uţį	T	All other contributions, g and similar amounts no								
턆				1f						
o d	9	Noncash contributions i		1f \$	•					
	h	Total. Add lines	1a-1f			<u> </u>				
nue						Busn Code				
eve	2a	ANNUAL CO	NVENTION			541900	317,576			317,576
e R	b	MEMBERSHI	P DUES			541900	277,563	277,563		
Program Service Revenue	C	MEETINGS				611600	53,291	53,291		
Sel	d	INDUSTRY	PUBLICATION	NS		541900	3,169	3,169		
am	е									
ogr	f	All other progran	n service reve	nue						
Ā	g	Total. Add lines	2a-2f			<b>&gt;</b>	651,599			
	3	Investment incor	me (including o	dividen	ds, intere	est,				
		and other similar	r amounts)			▶	1,121			1,121
	4	Income from inve	estment of tax	-exem	ot bond p	roceeds ►				
	5	Royalties				▶ [	41,039			41,039
			(ı) Real		(II) F	Personal	,			
	6a	Gross rents			, ,					
	b	Less rental exps								
	c	Rental inc or (loss)								
	d	Net rental incom	e or (loss)	L						
		Gross amount from	(i) Secunties		(11)	Other				
		sales of assets	(i) decunites		(")	Other				
		other than inventory								
	D	Less cost or other								
		basis & sales exps								
		Gain or (loss)	<del></del>		l <u></u>					
	d	Net gain or (loss		. [		<u>-</u>				
ne	8a	Gross income from	tundraising eve	nts						
en		(not including \$								
Zev		of contributions rep								
Other Revenu		See Part IV, line 18		a						
Ť		Less. direct expe		b					•	
٠	С	Net income or (lo	oss) from fund	raising	events	<b>•</b>				
	9a	Gross income from	-	s					-	
		See Part IV, line 19	)	a						
	b	Less direct expe	enses	b∣						
	С	Net income or (le	oss) from gam	ing act	tivities	<b>&gt;</b>				
	10a	Gross sales of in	nventory, less		_					
		returns and allow	vances	a		14,375				
	b	Less cost of goo	ods sold	ь		6,339				
		Net income or (le		s of inv	/entorv	•	8,036		8,036	
			laneous Revenue			Busn Code	-,		-,	<del></del>
	11a	ADVERTISING		С МЕТ	OTA	541800	6,950	[	6,950	
	b	MISCELLANE		اندن پ	- 4.1	900099	457	457	2,230	
	C	MISCELLIANE	003				457	407		
		All other revenue	9							<del></del>
	d						7 407			<del></del>
	e	Total. Add lines				<b>?</b>	7,407	224 400	14 000	350 535
	12	Total revenue.	see instruction	ıS		▶	709,202	334,480	14,986	359,736

#### **Statement of Functional Expenses**

<u> </u>	Check if Schedule O contains a resp			mpiete column (A)	
Do n	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	7		government	0.000
	and domestic governments See Part IV, line 21	7,550			
2	Grants and other assistance to domestic	1			<del></del>
	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	98,490			_
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	144,588			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,112			
9	Other employee benefits	4,318			
10	Payroll taxes	18,754		7	
11	Fees for services (non-employees)				
а	Management				
b	Legal	5,928	<del></del>		<del>** '</del>
С	Accounting	2,140			<del></del>
d	Lobbying	15,000			<u></u>
e	Professional fundraising services See Part IV, line 17				
T	Investment management fees		<del></del>		<del></del>
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O )	20 716			<del></del>
12 13	Advertising and promotion	20,716 27,539			
14	Office expenses Information technology	12,879			·- ·-
15	Royalties	12,619			
16	Occupancy	41,996			
17	Travel	23,782			
18	Payments of travel or entertainment expenses	23,702			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	166,821			
20	Interest	100/021		·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		·	***	
23	Insurance	3,733			· ·
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	COMMITTEE EXPENSE	31,241			
b	TELEPHONE	5,553			
С	PRINTING & PUBLICATIONS	4,496			
d	POSTAGE & SHIPPING	1,692			
e	All other expenses		· · ·		
25	Total functional expenses. Add lines 1 through 24e	641,328	0	0	0
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				
DAA	following SOP 98-2 (ASC 958-720)	<u></u>			- 000
5.5					Form <b>990</b> (2015)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 152,450 236,770 Cash-non-interest bearing 2 Savings and temporary cash investments 272,029 2 273,151 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 Notes and loans receivable, net 7 Inventones for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment; cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 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 15 424,479 509,921 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 125 Accounts payable and accrued expenses 17 18 Grants payable 18 19 114,879 132,553 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 26 115,004 132,572 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 309,475 377,349 32 32

> 509,921 Form **990** (2015)

377,<u>349</u>

309,475

424,479

33

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

	990 (2015) AMERICAN INSTITUTE OF ARCHITECTS, 42-0920934			Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	09,	202
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	41,	<u> 328</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		67,	874
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3	09,	475
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
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, column (B))	10	3	77,	349
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual X Other MODIFIED C	CASH			
	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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
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		

#### 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

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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 its instructions is at www.irs.gov/form990.

- 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," on 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.

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

• 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," on 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

• 3	section 50 r(c)(4), (5), or (6) organizations: Complete Part	III								
Name	e of organization AMERICAN INSTITUTE	OF ARCHITECTS,		Employer ident	ification number					
	IOWA CHAPTER			42-09209	34					
Par	t I-A Complete if the organization is exe	mpt under section 501(c	) or is a sectio	n 527 organizatio	on.					
1	Provide a description of the organization's direct and indi	rect political campaign activities	ın Part IV							
2	Political expenditures			▶ \$						
3	Volunteer hours									
			_							
Par	t I-B Complete if the organization is exe	mpt under section 501(c	)(3).							
1	Enter the amount of any excise tax incurred by the organ	nization under section 4955		▶ \$						
2	Enter the amount of any excise tax incurred by organizat	tion managers under section 495	5	▶ \$						
3	If the organization incurred a section 4955 tax, did it file if	Form 4720 for this year?			Yes No					
4a	Was a correction made?				Yes No					
b	If "Yes," describe in Part IV									
Pa	rt I-C Complete if the organization is exe	mpt under section 501(c	), except secti	on 501(c)(3).						
1	Enter the amount directly expended by the filing organization	ation for section 527 exempt fund	ction							
	activities			▶ \$						
2	Enter the amount of the filing organization's funds contrib	buted to other organizations for s	ection							
	527 exempt function activities ▶\$									
3	3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL,									
	line 17b			▶ \$						
4	Did the filing organization file Form 1120-POL for this ye		Yes No							
5	Enter the names, addresses and employer identification									
	organization made payments For each organization liste	ed, enter the amount paid from th	ne filing organizatio	n's funds Also enter						
	the amount of political contributions received that were p	romptly and directly delivered to	a separate politica	l organization, such						
	as a separate segregated fund or a political action comm	nittee (PAC). If additional space	s needed, provide	information in Part IV						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political					
				filing organization's	contributions received and promptly and directly					
			ľ	funds If none, enter -0-	delivered to a separate					
					political organization If					
					none, enter -0-					
(1)										
(2)										
(3)										
(4)										
(5)										
			ļ							
(6)										
			1	ŀ	l					

Schedule C (Form 990 or 990-EZ) 2015 AMER I	CAN INSTI	TUTE OF ARC	HITECTS	, 42-	0920934	Page <b>2</b>
Part II-A Complete if the organiz						
section 501(h)).  A Check  (if the filing organization)	n belongs to ar	affiliated group (a	nd list in Do	rt IV/ ooob o	offiliated area	un momborlo
name, address, EIN,					illillated grot	up members
B Check ► ☐ if the filing organization						
	bying Expend		tioi provisio	<del></del>	<del></del>	# 1 A Z D
(The term "expenditures" i				(a) Fi organizatio	-	(b) Affiliated group totals
1a Total lobbying expenditures to influence pu	-				-	•
b Total lobbying expenditures to influence a		• •				<del></del>
c Total lobbying expenditures (add lines 1a a	• • •	, 0,			-	
d Other exempt purpose expenditures	•					
e Total exempt purpose expenditures (add li	nes 1c and 1d)					
f Lobbying nontaxable amount Enter the an		wing table in both				
columns		J				
If the amount on line 1e, column (a) or (b) is	The lobbying no	ontaxable amount is:				·
Not over \$500,000	20% of the amou	int on line 1e				
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15	5% of the excess over \$50	0,000			
Over \$1,000,000 but not over \$1,500,000	000,000					
Over \$1,500,000 but not over \$17,000,000	00,000					
Over \$17,000,000						
g Grassroots nontaxable amount (enter 25%	of line 1f)					
h Subtract line 1g from line 1a. If zero or less	s, enter -0-					
i Subtract line 1f from line 1c. If zero or less	, enter -0-					-
j If there is an amount other than zero on eit	her line 1h or line 1	i, did the organization f	ile Form 4720			· ·
reporting section 4911 tax for this year?		-				Yes No
	4-Year Averag	ing Period Under s	ection 501(h	<u>,,,</u>		
(Some organizations that made	-		•	,	ae five colum	ine helow
		instructions for line	-		ie nve colum	ilis below.
	h.h.da				<del></del>	
L0	bbying Expendi	tures During 4-Year	Averaging <del>I</del>	eriod	<del></del>	
Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 201	4	(d) 2015	(e) Total
2a Lobbying nontaxable amount		****				
b Lobbying ceiling amount (150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						

Schedule C (Form 990 or 990-EZ) 2015

Grassroots ceiling amount
 (150% of line 2d, column (e))

f Grassroots lobbying expenditures

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

b If "Yes," enter the amount of any tax incurred under section 4912

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No **Amount** 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: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? d Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?

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(c)(5), or section

1	Were substantially all (90% or more) dues received nondeductible by members?	1		X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		X	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		X	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	277,563
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).		
а	Current year	2a	15,000
b	Carryover from last year	2b	
С	Total	2с	15,000
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	16,654
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	ŀ	
	and political expenditure next year?	4	
_5	Taxable amount of lobbying and political expenditures (see instructions)	5	-1,654

Part IV Supplemental Information

i Other activities?

j Total Add lines 1c through 1i

501(c)(6).

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

Part IV Supplemental Information (continued)

### 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.

2015

OMB No 1545-0047

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.

Open to Public Inspection

Name of the organization AMERICAN INSTITUTE OF ARCHITECTS,

IOWA CHAPTER

Employer identification number 42-0920934

FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS THE ORGANIZATION ADDED A RUN-OFF PROVISION TO ITS BYLAWS THAT STATES: IN THE EVENT THAT NO SINGLE CANDIDATE RECEIVED A MAJORITY OF VOTES CAST IN AN ELECTION, A RUN-OFF ELECTION SHALL BE HELD BETWEEN THE TWO CANDIDATES THAT RECEIVED THE MOST VOTES IN THE INITIAL ELECTION.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS THE ORGANIZATION HAS SEVERAL CATEGORIES OF MEMBERSHIP. REGULAR MEMBERS ARE LICENSED ARCHITECTS DOING BUSINESS IN IOWA. ASSOCIATE MEMBERS ARE THOSE WITHOUT AN ARCHITECTURAL LICENSE BUT ARE ELIGIBLE BY EDUCATION OR WORK EXPERIENCE. STUDENT AFFILIATE MEMBERS CONSIST OF THOSE WHO ARE IN EDUCATIONAL PROGRAMS WORKING TOWARDS A DEGREE IN ARCHITECTURE. PROFESSIONAL AFFILIATE MEMBERS ARE NON-ARCHITECTS WORKING IN COMPANION PROFESSIONS SUCH AS ENGINEERS, PLANNERS AND ARTISTS. ALLIED MEMBERS ARE NON-ARCHITECTS THAT PROVIDE PRODUCTS AND/OR SERVICES TO THE ARCHITECTURAL PROFESSION.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS NOMINATIONS TO THE BOARD OF DIRECTORS TO FILL OPEN POSITIONS ARE MADE BY COMMITTEE AND APPROVED BY THE BOARD. THE SLATE OF NOMINEES IS PRESENTED TO THE MEMBERSHIP AT THE ANNUAL MEETING. OPEN POSITIONS ON THE BOARD ARE FILLED BY THOSE NOMINEES RECEIVING A MAJORITY OF VOTES.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS THE ANNUAL BUDGET FOR THE ORGANIZATION, INCLUDING THE DUES STRUCTURE, IS

Employer identification number

42-0920934

PREPARED BY THE GOVERNING BODY AND PRESENTED TO THE MEMBERSHIP FOR APPROVAL BY MAJORITY VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE RETURN PREPARER PROVIDES AN INITIAL DRAFT OF THE COMPLETED FORM 990 TO
MANAGEMENT FOR REVIEW AND EDITING. UPON COMPLETION OF MANAGEMENT'S REVIEW,
A FINAL DRAFT OF FORM 990 IS PROVIDED TO THE EXECUTIVE COMMITTEE OF THE
BOARD. UPON RESOLUTION OF COMMENTS BY THE EXECUTIVE COMMITTEE, IF ANY, THE
FINAL FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD FOR APPROVAL AND THEN
FILED WITH THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ALL AFFECTED INDIVIDUALS MUST REVIEW AND SIGN THE CONFLICT OF INTEREST

POLICY FOR THE ORGANIZATION. THE AFFECTED INDIVIDUALS MUST UPDATE AND

RESUBMIT A POLICY ACKNOWLEDGEMENT ANNUALLY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THE PROCESS FOR SETTING COMPENSATION OF THE ORGANIZATION'S EXECUTIVE

DIRECTOR INCLUDES FORMAL REVIEW AND APPROVAL BY THE OFFICERS, USE OF

COMPARABLE COMPENSATION DATA FROM SURVEYS OF SIMILARLY QUALIFIED PERSONS IN

COMPARABLE POSITIONS, AND CONTEMPORANEOUS DOCUMENTATION OF DELIBERATIONS

AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. ALL OTHER OFFICERS

OF THE ORGANIZATION SERVE IN A VOLUNTEER CAPACITY WITHOUT COMPENSATION.

THE ORGANIZATION HAS NO KEY EMPLOYEES AS DEFINED BY THE IRS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND

Employer identification number

42-0920934

ITS FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC.

SUCH DOCUMENTS ARE, HOWEVER, MADE AVAILABLE FOR REVIEW AT THE

ADMINISTRATIVE OFFICE OF THE ORGANIZATION TO MEMBERS IN GOOD STANDING WHO

SO REQUEST.

FORM 990, PART XII - ADDITIONAL INFORMATION

LINE 1, ACCOUNTING METHOD:

THE ORGANIZATION USES THE CASH METHOD OF ACCOUNTING, EXCEPT THAT IT IS MODIFIED TO RECOGNIZE DUES REVENUE IN THE YEAR TO WHICH IT RELATES.

ACCORDINGLY, A LIABILITY FOR DEFERRED DUES REVENUE IS REPORTED ON THE BALANCE SHEET AT THE END OF EACH FISCAL YEAR.