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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www IRS gov/form990*

OMB No 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 01-01-2016 , and ending 12-31-2016

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
440 FIRST ST NW STE 200 NO 200

City or town, state or province, country, and ZIP or foreign postal code
WASHINGTON, DC 20001

D Employer identification number
52-0579380

E Telephone number
(202) 595-1505

G Gross receipts $ 25,399,315

F Name and address of principal officer
MICHAEL BELLAMAN
440 FIRST ST NW STE 200 NO 200
WASHINGTON, DC 20001

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW ABC ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1950

M State of legal domicile MD

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO FOSTER AND PERPETUATE THE PRINCIPLES OF THE "MERIT SHOP" IN THE CONSTRUCTION INDUSTRY

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	186
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	186
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	**5**	97
6	Total number of volunteers (estimate if necessary)	**6**	186
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	486,955
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	144,400

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,393,653	2,023,847
9	Program service revenue (Part VIII, line 2g)	14,977,447	16,064,067
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	504,904	875,677
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,072,063	867,365
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,948,067	19,830,956
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	841,226	947,870
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,864,988	8,188,705
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	8,917,390	10,400,132
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	17,623,604	19,536,707
19	Revenue less expenses Subtract line 18 from line 12	324,463	294,249

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	16,831,920	16,634,186
21	Total liabilities (Part X, line 26)	11,417,197	11,306,255
22	Net assets or fund balances Subtract line 21 from line 20	5,414,723	5,327,931

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2017-11-13
Signature of officer Date

TEA GENNARO CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
YONG ZHANG CPA	YONG ZHANG CPA			P01249785

Firm's name ▶ RSM US LLP | Firm's EIN ▶ 42-0714325
Firm's address ▶ 1861 INTERNATIONAL DRIVE SUITE 400 MCLEAN, VA 22102 | Phone no (703) 336-6400

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission

ABC WILL CONTINUALLY STRIVE TO BE THE LEADING VOICE PROMOTING FREE ENTERPRISE WITHIN THE CONSTRUCTION INDUSTRY ABC WILL PROMOTE AND DEFEND THE MERIT SHOP PHILOSOPHY THIS PHILOSOPHY ENCOURAGES OPEN COMPETITION AND A FREE-ENTERPRISE APPROACH TO CONSTRUCTION BASED SOLELY ON MERIT, REGARDLESS OF LABOR AFFILIATION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ including grants of $) (Revenue $)
See Additional Data

4b (Code) (Expenses $ including grants of $) (Revenue $)
See Additional Data

4c (Code) (Expenses $ including grants of $) (Revenue $)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
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		No
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	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	**20a**		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	**20b**		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
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**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**	Yes	
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**	Yes	
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**		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

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
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	76		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	**1c**		Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	97		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	**2b**		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	**3a**		Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .	**3b**		Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .	**4a**			No
b	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 (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	**5a**			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	**5b**			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	**5c**			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	**6a**		Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**		Yes	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	**7a**			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	**7b**			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	**7c**			
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	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**			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	**7g**			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	**7h**			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**			
9a	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				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**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.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	**13a**			
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	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	**14a**			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	**14b**			

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

Check if Schedule O contains a response or note to any line in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	186		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	186		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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

17 List the States with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶TEUTA GENNARO 440 FIRST ST NW STE 200 NO 200 WASHINGTON, DC 20001 (202) 595-1505

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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

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

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								2,896,493	0	469,491

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 20

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
WASHINGTON NATIONALS BASEBALL CLUB LLC 1500 S CAPITOL ST SE WASHINGTON, DC 20003	BRANDING & IMAGING CAMPAIGN	537,781
MARY SCHROER 6251 COZY GLEN COURT ALEXANDRIA, VA 22312	CONSULTING SERVICES	228,875
ULMAN PUBLIC POLICY 11313 STONES THROW DRIVE RESTON, VA 20194	CONSULTING SERVICES	108,290

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 3

Part VIII Statement of Revenue

Check if Schedule O contains a response or 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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . .	1a			
	b Membership dues . .	1b			
	c Fundraising events . .	1c			
	d Related organizations	1d	568,000		
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,455,847		
	g Noncash contributions included in lines 1a-1f $ 393,500				
	h **Total.** Add lines 1a-1f . . . . . ▶		2,023,847		
Program Service Revenue		Business Code				
	2a MEMBERSHIP DUES	900099	11,165,651	11,165,651		
	b BUSINESS PARTNER/AFFIN	900099	1,879,707	1,879,707		
	c CORPORATE ALLIANCES/SP	900099	1,304,407			1,304,407
	d MEETINGS	900099	1,248,700	1,248,700		
	e SERVICE REIM FEES FROM	900099	271,512	271,512		
	f All other program service revenue		194,090	194,090		
	g **Total.** Add lines 2a–2f . . . . ▶		16,064,067			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		214,099			214,099
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties . . . . . ▶		32,048			32,048
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . . ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	6,229,937				
	b Less cost or other basis and sales expenses	5,568,359				
	c Gain or (loss)	661,578				
	d Net gain or (loss) . . . . . ▶		661,578			661,578
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from fundraising events . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from gaming activities . . ▶					
	10a Gross sales of inventory, less returns and allowances . . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
	11a MARKETING SERVICES	900004	422,733		422,733	
	b OTHER REVENUE	900099	348,362			348,362
	c NEWSLINE ONLINE PERIOD	541800	64,222		64,222	
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . . ▶		835,317			
	12 Total revenue. See Instructions . . . . . ▶		19,830,956	14,759,660	486,955	2,560,494

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 . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	947,870			
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,603,185			
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	4,640,227			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	172,438			
9 Other employee benefits	338,525			
10 Payroll taxes	434,330			
11 Fees for services (non-employees)				
a Management				
b Legal	224,502			
c Accounting	53,853			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	24,780			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,742,376			
12 Advertising and promotion	1,951,761			
13 Office expenses	946,510			
14 Information technology	404,886			
15 Royalties . .				
16 Occupancy	974,220			
17 Travel	1,157,000			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	2,011,496			
20 Interest	17,230			
21 Payments to affiliates	95,082			
22 Depreciation, depletion, and amortization . .	720,923			
23 Insurance . . .	43,213			
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)				
a UBIT TAXES	32,300			
b				
c				
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	19,536,707			
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 IX . . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	250	1	250
	2	Savings and temporary cash investments	2,622,163	2	2,466,167
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,088,565	4	1,159,355
	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	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	445,765	9	516,392
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 5,766,344			
	b	Less accumulated depreciation — 10b: 2,688,929	3,830,855	10c	3,077,415
	11	Investments—publicly traded securities	7,908,675	11	8,072,394
	12	Investments—other securities See Part IV, line 11	356,408	12	393,245
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	579,239	15	948,968
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	16,831,920	16	16,634,186
Liabilities	17	Accounts payable and accrued expenses	1,671,458	17	1,461,641
	18	Grants payable		18	
	19	Deferred revenue	4,650,256	19	5,032,561
	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	
	23	Secured mortgages and notes payable to unrelated third parties	1,253,863	23	1,259,685
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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	3,841,620	25	3,552,368
	26	**Total liabilities.** Add lines 17 through 25	11,417,197	26	11,306,255
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	4,665,329	27	4,991,467
	28	Temporarily restricted net assets	749,394	28	336,464
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	5,414,723	33	5,327,931
	34	Total liabilities and net assets/fund balances	16,831,920	34	16,634,186

Part XI Reconcilliation 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	19,830,956
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,536,707
3	Revenue less expenses Subtract line 2 from line 1	3	294,249
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,414,723
5	Net unrealized gains (losses) on investments	5	-381,041
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	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	5,327,931

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or 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	Yes	
	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			
c	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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	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		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 52-0579380

Name: ASSOCIATED BUILDERS AND CONTRACTORS INC

Form 990 (2016)

Form 990, Part III, Line 4a:

THE FREE ENTERPRISE ALLIANCE - EDUCATES THE PUBLIC ON ISSUES THAT AFFECT THE CONSTRUCTION INDUSTRY IN 2015, EDUCATIONAL EFFORTS INCLUDED INFORMING THE PUBLIC ABOUT THE NATIONAL LABOR RELATIONS BOARD, HEALTH CARE, ENERGY, AND TAXES, IN ADDITION TO EDUCATION REGARDING THE IMPORTANCE OF VOTING THROUGH VOTER REGISTRATION AND GET-OUT-THE VOTE DRIVES THESE OUTREACH EFFORTS WERE ACCOMPLISHED THROUGH THE USE OF NEW MEDIA SUCH AS WEB VIDEO, SEVERAL BLOGS AND OTHER TOOLS, AS WELL AS ON THE GROUND EDUCATION OF ABC MEMBERS THROUGHOUT THE COUNTRY

Form 990, Part III, Line 4b:

CHAPTER DEVELOPMENT- THE ASSOCIATION IS WORKING DIRECTLY WITH ITS 70 CHAPTERS TO IMPROVE STAFF MANAGEMENT SKILLS, ASSIST IN RECRUITMENT AND RETENTION EFFORTS, RECOGNIZE OUTSTANDING ACHIEVEMENTS AT THE CHAPTER LEVEL, AND INCREASE VOLUNTEER INVOLVEMENT AND COMMITMENT TO ABC

Form 990, Part III, Line 4c:

GOVERNMENT AFFAIRS- THE ASSOCIATION WORKS WITH LEGISLATORS AND REGULATORS ON THE FEDERAL AND STATE LEVEL TO FURTHER THE INTERESTS OF MERIT SHOP CONSTRUCTION AND TO PROTECT MERIT SHOP CONTRACTORS FROM LAWS AND REGULATIONS WHICH INHIBIT FREE ENTERPRISE

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID CHAPIN CHAIRMAN	5 00	X		X				0	0	0
CHUCK GOODRICH CHAIR-ELECT	3 00 3 00	X		X				0	0	0
PAMELA L VOLM IMMEDIATE PAST CHAIR	3 00 1 00	X		X				0	0	0
GEORGE NASH SECRETARY	3 00	X		X				0	0	0
ANTHONY STAGLIANO TREASURER	3 00 1 00	X						0	0	0
CHUCK WIEGERS PACIFIC REGION	2 00	X						0	0	0
RAY ZAMORA MOUNTAIN WEST REGION	2 00	X						0	0	0
TONY RADER SOUTH CENTRAL REGION	2 00	X						0	0	0
TIM KEATING SOUTHEAST REGION	2 00 1 00	X						0	0	0
STEPHANIE SCHMIDT NORTHEAST REGION	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVE KLESSIG MIDWEST REGION	2 00	X						0	0	0
PAUL LEMLEY MID-AMERICA REGION	2 00	X						0	0	0
JON BOONE DIRECTOR	1 00	X						0	0	0
MATT KLEBS DIRECTOR	1 00	X						0	0	0
TAMI CHAPMAN DIRECTOR	1 00	X						0	0	0
ED OTT DIRECTOR	1 00	X						0	0	0
JOSEPH FERRARA DIRECTOR	1 00	X						0	0	0
MALCOLM JR BARCARSE DIRECTOR	1 00	X						0	0	0
HANS ERICKSON DIRECTOR	1 00	X						0	0	0
GREG SCHNIEGENBERG DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DINA KIMBLE DIRECTOR	1 00	X						0	0	0
RONALD HICKS DIRECTOR	1 00	X						0	0	0
TARA KRAMER DIRECTOR	1 00	X						0	0	0
RICH TROYER DIRECTOR	1 00	X						0	0	0
DIANE KOESTER-BYRON DIRECTOR	1 00	X						0	0	0
ALEX GALICIA DIRECTOR	1 00	X						0	0	0
PAUL ROWAN DIRECTOR	1 00	X						0	0	0
JOHN HAMO DIRECTOR	1 00	X						0	0	0
RODNEY MATHIS DIRECTOR	1 00	X						0	0	0
CHRISTOPHER WHITE DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAMIE CREEK DIRECTOR	1 00	X						0	0	0
MICHAEL SCHULTIS DIRECTOR	1 00	X						0	0	0
MARK VANWELL DIRECTOR	1 00	X						0	0	0
ANDY BAILEY DIRECTOR	1 00	X						0	0	0
STEVE BOWEN DIRECTOR	1 00	X						0	0	0
PAUL COHEN DIRECTOR	1 00	X						0	0	0
TIM PAULSON DIRECTOR	1 00	X						0	0	0
DUSTY BROWN DIRECTOR	1 00	X						0	0	0
KEVIN BATTAGLIA DIRECTOR	1 00	X						0	0	0
DAVID CROW DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TOM WANAMAKER DIRECTOR	1 00	X						0	0	0
KENT MEYN DIRECTOR	1 00	X						0	0	0
NICK L STEINKAMP DIRECTOR	1 00	X						0	0	0
SCOTT BLACK DIRECTOR	1 00	X						0	0	0
STEVE KNODE DIRECTOR	1 00	X						0	0	0
MARK MEYER DIRECTOR	1 00	X						0	0	0
CARLA STRUBLE DIRECTOR	1 00	X						0	0	0
BILL MONFRE DIRECTOR	1 00	X						0	0	0
JAY ZAHN DIRECTOR	1 00	X						0	0	0
GEOFFREY VINE DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSH D TRITT DIRECTOR	1 00	X						0	0	0
BRUCE CROSS DIRECTOR	1 00	X						0	0	0
COREY TAYLOR DIRECTOR	1 00	X						0	0	0
DAVID SMITH DIRECTOR	1 00	X						0	0	0
DARLENE EAST DIRECTOR	1 00	X						0	0	0
WARREN ADAMSON DIRECTOR	1 00	X						0	0	0
MIKE HOLLAND DIRECTOR	1 00 1 00	X						0	0	0
JASON MANSON DIRECTOR	1 00	X						0	0	0
DALE LEBLANC DIRECTOR	1 00	X						0	0	0
JENNIFER JEZEK DIRECTOR	1 00	X						0	0	0

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

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JIM BLOSE DIRECTOR	1 00	X						0	0	0
ANDY WRIGHT DIRECTOR	1 00	X						0	0	0
GLEN REDD DIRECTOR	1 00	X						0	0	0
JOE WILEY DIRECTOR	1 00	X						0	0	0
ANDREW B LOPEZ DIRECTOR	1 00	X						0	0	0
SEAN MCGARITY DIRECTOR	1 00	X						0	0	0
DESI VALDEZ DIRECTOR	1 00	X						0	0	0
RANDY HARPER DIRECTOR	1 00	X						0	0	0
TROY RODER DIRECTOR	1 00	X						0	0	0
MIKE GARZA DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LAWRENCE WILCOX DIRECTOR	1 00	X						0	0	0
AMANDO GONZALEZ JR DIRECTOR	1 00	X						0	0	0
MARK MONICAL DIRECTOR	1 00	X						0	0	0
JARED TOMANEK DIRECTOR	1 00	X						0	0	0
PAUL LEMBKE DIRECTOR	1 00	X						0	0	0
RANDY HUMPHREY DIRECTOR	1 00	X						0	0	0
G PAUL HOLLIMAN DIRECTOR	1 00	X						0	0	0
RANDALL CURTIS DIRECTOR	1 00	X						0	0	0
DAVID PUGH DIRECTOR	1 00	X						0	0	0
ROBIN W SAVAGE DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RYAN WATHEN DIRECTOR	1 00	X						0	0	0
TOM HEADLEE DIRECTOR	1 00	X						0	0	0
ART ODOM DIRECTOR	1 00	X						0	0	0
CHIP TUCKER DIRECTOR	1 00	X						0	0	0
MICHAEL DODANE DIRECTOR	1 00	X						0	0	0
J SHELTON LEE DIRECTOR	1 00	X						0	0	0
JESUS VAZQUEZ DIRECTOR	1 00	X						0	0	0
CHRIS KENNEDY DIRECTOR	1 00	X						0	0	0
ANTONIO OBREGON DIRECTOR	1 00	X						0	0	0
BRENT ZIMMERMAN DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BARRY CRITCHER DIRECTOR	1 00	X						0	0	0
BROOKE MAY DIRECTOR	1 00	X						0	0	0
JACK A OLMSTEAD DIRECTOR	1 00	X						0	0	0
ETHAN ADAMS DIRECTOR	1 00	X						0	0	0
ROB COOPER DIRECTOR	1 00	X						0	0	0
JEFF TOEBE DIRECTOR	1 00	X						0	0	0
NANCY JUNEAU DIRECTOR	1 00	X						0	0	0
JOHN STALLWORTH DIRECTOR	1 00	X						0	0	0
DAREK BELL DIRECTOR	1 00	X						0	0	0
DAVID S STANSELL DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
FRANK WHITE DIRECTOR	1 00	X						0	0	0
KEVIN PAYNE DIRECTOR	1 00	X						0	0	0
CHRIS COLLINS DIRECTOR	1 00	X						0	0	0
RICHARD ANDERSON DIRECTOR	1 00	X						0	0	0
DAVID WILKINSON DIRECTOR	1 00	X						0	0	0
SCOTT BREWER DIRECTOR	1 00	X						0	0	0
VINCE MAZZOLA DIRECTOR	1 00	X						0	0	0
DON SLOAN DIRECTOR	1 00	X						0	0	0
MATTHEW BOLYARD DIRECTOR	1 00	X						0	0	0
JEFFREY HARGRAVE DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
VIC VICTORIANO DIRECTOR	1 00	X						0	0	0
FRANCIS HALL CHANEY II DIRECTOR	1 00	X						0	0	0
GILBERT W DISSEN DIRECTOR	1 00	X						0	0	0
DEL CARDEN DIRECTOR	1 00	X						0	0	0
GREGORY W BROWN DIRECTOR	1 00	X						0	0	0
STEVE LEX DIRECTOR	1 00	X						0	0	0
TOM DILLEY DIRECTOR	1 00	X						0	0	0
LORRI GRAYSON DIRECTOR	1 00	X						0	0	0
MARK W DRURY DIRECTOR	1 00	X						0	0	0
JIM ANGLEMYER DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BUDDY HENLEY DIRECTOR	1 00	X						0	0	0
TODD HAMMOND DIRECTOR	1 00	X						0	0	0
JEFF DAVOUD DIRECTOR	1 00	X						0	0	0
DAN HUGEBACK DIRECTOR	1 00	X						0	0	0
DON GATEWOOD DIRECTOR	1 00	X						0	0	0
JEFF KELLY DIRECTOR	1 00	X						0	0	0
STEVE SETTERLIN DIRECTOR	1 00	X						0	0	0
BRIAN STADLER DIRECTOR	1 00	X						0	0	0
ED TANZINI DIRECTOR	1 00	X						0	0	0
STEVE RUSSELL DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN D ROOP JR DIRECTOR	1 00	X						0	0	0
SCOTT BERLINE DIRECTOR	1 00	X						0	0	0
CHARLES HENRY DIRECTOR	1 00	X						0	0	0
ZOLTAN KOVACS DIRECTOR	1 00	X						0	0	0
RYAN ODENDAHL DIRECTOR	1 00	X						0	0	0
ROBERT M REESE DIRECTOR	1 00	X						0	0	0
WENDY CLOUSER DIRECTOR	1 00	X						0	0	0
TODD KELCHNER DIRECTOR	1 00	X						0	0	0
CHANCE TRUEMPER DIRECTOR	1 00	X						0	0	0
RICK J JACKSON DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PERRY MERLO DIRECTOR	1 00	X						0	0	0
JAMES STRUBLE DIRECTOR	1 00	X						0	0	0
BRIAN CRISSMAN DIRECTOR	1 00	X						0	0	0
JOHN DE BLAAY DIRECTOR	1 00	X						0	0	0
NATE KOETJE DIRECTOR	1 00	X						0	0	0
KAREN DEMONTIGNY DIRECTOR	1 00	X						0	0	0
PAUL TOMCZUK DIRECTOR	1 00	X						0	0	0
TIM O'BRIEN DIRECTOR	1 00	X						0	0	0
DAVID THOMPSON DIRECTOR	1 00	X						0	0	0
PAUL ZIEGLER DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL FUNARI DIRECTOR	1 00	X						0	0	0
KATHY GORSKI DIRECTOR	1 00	X						0	0	0
THOMAS J MURPHY DIRECTOR	1 00	X						0	0	0
CHRIS TAGUE DIRECTOR	1 00	X						0	0	0
RAY CUDNEY DIRECTOR	1 00	X						0	0	0
DONNA J SHOFF DIRECTOR	1 00	X						0	0	0
DAVID A NACE DIRECTOR	1 00	X						0	0	0
KEN SCHWEBEL DIRECTOR	1 00	X						0	0	0
BRAD STOUT DIRECTOR	1 00	X						0	0	0
JAMES MCBRADY DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC J FORISH DIRECTOR	1 00	X						0	0	0
JAMES P ALIBRANDI DIRECTOR	1 00	X						0	0	0
THOMAS DESCOTEAUX DIRECTOR	1 00	X						0	0	0
KELLY GAGLIUSO DIRECTOR	1 00	X						0	0	0
BRIAN HOOPER DIRECTOR	1 00	X						0	0	0
TIMOTHY LONG DIRECTOR	1 00	X						0	0	0
GREGORY SYKORA DIRECTOR	1 00	X						0	0	0
DREW WAGNER DIRECTOR	1 00	X						0	0	0
KIRBY WU DIRECTOR	1 00	X						0	0	0
JOHN J CARDOSI JR DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PHILIP P FRESHMAN DIRECTOR	1 00	X						0	0	0
ANDY MICHIELLI DIRECTOR	1 00	X						0	0	0
KEITH A IMPINK DIRECTOR	1 00	X						0	0	0
KEN KORTMAN DIRECTOR	1 00	X						0	0	0
WES MCCLURE DIRECTOR	1 00	X						0	0	0
REED CAUDLE DIRECTOR	1 00	X						0	0	0
RICH WELLS DIRECTOR	1 00	X						0	0	0
MIKE BISSELL DIRECTOR	1 00	X						0	0	0
BRYCE WISAN DIRECTOR	1 00	X						0	0	0
SANDRA ROCHE DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOE STROBBE DIRECTOR	1 00	X						0	0	0
DAN LYONS DIRECTOR	1 00	X						0	0	0
DARREN HINTON DIRECTOR	1 00	X						0	0	0
JASON MAXWELL DIRECTOR	1 00	X						0	0	0
PENNY KAPP DIRECTOR	1 00	X						0	0	0
JOHN PAULSEN DIRECTOR	1 00	X						0	0	0
MICHAEL BELLAMAN PRESIDENT & CEO	40 00 2 00			X				735,969	0	48,578
JASON R DAISEY CFO	40 00 2 00			X				365,815	0	33,134
KRISTEN SWEARINGEN YORK SENIOR DIR OF LEGISLATIVE	40 00				X			188,334	0	38,259
BEN BRUBECK DIR OF LABOR AFFAIRS	40 00				X			182,418	0	45,564

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DOUG CURTIS VP CHAPTER SERVICES	40 00				X			225,447	0	36,655
GREGORY SIZEMORE VP OF WORKFORCE DEVELOPMENT	40 00				X			262,321	0	61,942
SANDRA LYNCH VP PUBLIC AFFAIRS & MEMBER	40 00				X			273,623	0	51,127
ETHAN HARLOWE BUSINESS ANALYST	40 00					X		121,275	0	40,636
TEUTA GENNARO CONTROLLER	40 00					X		134,596	0	42,654
CHRIS SINGERLING SEN DIR OF POLITICAL AFFAIRS	40 00					X		155,514	0	8,797
DONNA REICHLE DIRECTOR OF PUBLIC AFFAIRS	40 00					X		121,787	0	39,596
KAREN LIVINGSTON DIRECTOR OF POLICY	40 00					X		129,394	0	22,549

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

2016

Open to Public Inspection

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 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
- 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
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
ASSOCIATED BUILDERS AND CONTRACTORS INC	52-0579380

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures ▶ $
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
4a Was a correction made? ☐ Yes ☐ No
b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $
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 year? ☐ Yes ☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(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 promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount 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 $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2013	**(b)** 2014	**(c)** 2015	**(d)** 2016	**(e)** Total
2a Lobbying nontaxable amount					
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					

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
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 1i			
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			
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 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	Yes	

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	11,165,651
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	2a	2,070,142
b	Carryover from last year	2b	-570,256
c	Total	2c	1,499,886
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	2,066,662
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	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-566,776

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

Return Reference	Explanation

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 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

2016

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds 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		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations . . . . . 3a(i)		
(ii) related organizations . . . . . 3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c)Accumulated depreciation	(d)Book value
1a Land				
b Buildings				
c Leasehold improvements		2,012,232	608,521	1,403,711
d Equipment		668,258	538,048	130,210
e Other		3,085,854	1,542,360	1,543,494
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				3,077,415

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DUE FROM RELATED PARTIES AND AFFILIATES	948,968
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	948,968

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
DEFERRED COMPENSATION 457(B) PLAN	648,968
OBLIGATION UNDER CAPITAL LEASES	87,235
DEFERRED RENT AND LEASE INCENTIVE OBLIGATION	2,195,204
PENSION TERMINATION LIABILITY	310,095
POST-RETIREMENT BENEFIT OBLIGATION	310,866
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	3,552,368

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	21,506,863
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-381,041		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	2,081,728		
e	Add lines **2a** through **2d**			2e	1,700,687
3	Subtract line **2e** from line **1**			3	19,806,176
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,780		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	24,780
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	19,830,956

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	21,836,012
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	2,324,085		
e	Add lines **2a** through **2d**			2e	2,324,085
3	Subtract line **2e** from line **1**			3	19,511,927
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,780		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	24,780
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	19,536,707

Part XIII Supplemental Information

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 X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-0579380
Name: ASSOCIATED BUILDERS AND CONTRACTORS INC

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	ABC IS EXEMPT FROM THE PAYMENT OF INCOME TAXES ON THEIR EXEMPT ACTIVITIES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE THE ASSOCIATION INCURRED INCOME TAX EXPENSE OF $39,490 FOR THE YEAR ENDED DECEMBER 31, 2016 THE NATURE OF THE ACTIVITIES THAT GENERATED THE INCOME TAXES PRIMARILY CONSISTED OF FEES FOR SERVICES FROM AFFINITY ARRANGEMENTS THE ASSOCIATION HAS EVALUATED ITS INCOME TAX POSITIONS FOR THE YEAR ENDED DECEMBER 31, 2016, AND DETERMINED THAT THE ASSOCIATION HAS NO MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, THE ASSOCIATION HAS NOT RECOGNIZED ANY LIABILITY FOR UNRECOGNIZED INCOME TAX

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	ABCSC INCLUDED IN CONSOLIDATED FS 1,659,149 TEF INCLUDED IN CONSOLIDATED FS 464,591 CLRF INCLUDED IN CONSOLIDATED FS 1,027,578 PAC INCLUDED IN CONSOLIDATED FS 862,560 ELIMINATI ON IN CONSOLIDATED FS -1,932,150

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	ABCSC INCLUDED IN CONSOLIDATED FS 1,622,311 TEF INCLUDED IN CONSOLIDATED FS 402,689 CLRF INCLUDED IN CONSOLIDATED FS 1,356,610 PAC INCLUDED IN CONSOLIDATED FS 837,788 ELIMINATI ON IN CONSOLIDATED FS -1,895,313

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CONSTRUCTION LEGAL RIGHTS FOUNDATION 440 FIRST ST NW SUITE 200 WASHINGTON, DC 20001	52-1687857	501(C)(6)	892,870				GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 0

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 1

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	A COMMITTEE OF THE ASSOCIATION'S MEMBERS ACCEPTS AND REVIEWS APPLICATIONS FOR GRANTS AND DETERMINES THE AMOUNTS TO BE GRANTED THE NATIONAL BOARD APPROVES THE GROSS AMOUNT OF GRANTS TO BE AWARDED WHILE THE COMMITTEE DETERMINES THE RECIPIENTS ABC UTILIZES A SET OF METRICS TO MONITOR GRANT DISTRIBUTION GRANTS ARE DESIGNED FOR A SPECIFIC PURPOSE OR GOAL AND THROUGH THIS SYSTEM OF METRICS, ABC MONITORS THE GRANTS TO ENSURE THAT THEY ARE BEING EFFECTIVELY AND EFFICIENTLY USED FOR THEIR INTENDED PURPOSE

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Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		
b	Any related organization?	**5b**		
	If "Yes," on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		
b	Any related organization?	**6b**		
	If "Yes," on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

(A) Name and Title	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-0579380
Name: ASSOCIATED BUILDERS AND CONTRACTORS INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 MICHAEL BELLAMAN PRESIDENT & CEO	(I)	596,581	139,388	0	24,000	24,578	784,547	0
	(II)	0	0	0	0	0	0	0
1 JASON R DAISEYCFO	(I)	283,991	81,824	0	18,000	15,134	398,949	0
	(II)	0	0	0	0	0	0	0
2 KRISTEN SWEARINGEN YORK SENIOR DIR OF LEGISLATIVE	(I)	163,523	24,811	0	13,681	24,578	226,593	0
	(II)	0	0	0	0	0	0	0
3 BEN BRUBECK DIR OF LABOR AFFAIRS	(I)	157,489	24,929	0	13,771	31,793	227,982	0
	(II)	0	0	0	0	0	0	0
4 DOUG CURTIS VP CHAPTER SERVICES	(I)	175,691	49,756	0	16,617	20,038	262,102	0
	(II)	0	0	0	0	0	0	0
5 GREGORY SIZEMORE VP OF WORKFORCE DEVELOPMENT	(I)	210,575	51,746	0	16,701	45,241	324,263	0
	(II)	0	0	0	0	0	0	0
6 SANDRA LYNCH VP PUBLIC AFFAIRS & MEMBER	(I)	212,738	60,885	0	24,000	27,127	324,750	0
	(II)	0	0	0	0	0	0	0
7 ETHAN HARLOWE BUSINESS ANALYST	(I)	116,275	5,000	0	18,000	22,636	161,911	0
	(II)	0	0	0	0	0	0	0
8 TEUTA GENNARO CONTROLLER	(I)	125,596	9,000	0	13,320	29,334	177,250	0
	(II)	0	0	0	0	0	0	0
9 CHRIS SINGERLING SEN DIR OF POLITICAL AFFAIRS	(I)	147,014	8,500	0	0	8,797	164,311	0
	(II)	0	0	0	0	0	0	0
10 DONNA REICHLE DIRECTOR OF PUBLIC AFFAIRS	(I)	114,033	7,754	0	23,700	15,896	161,383	0
	(II)	0	0	0	0	0	0	0
11 KAREN LIVINGSTON DIRECTOR OF POLICY	(I)	120,610	8,784	0	18,000	4,549	151,943	0
	(II)	0	0	0	0	0	0	0

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (CONST MATERIALS)	X	33	393,500	FMV
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement — 29

		Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION HAS FOUR TYPES OF MEMBERS REGULAR MEMBER, WHO IS A PERSON, A FIRM OR A CO RPORATION PAYING DUES TO THE ASSOCIATION THROUGH A CHAPTER OR CHAPTER-IN-FORMATION MEMBER -AT-LARGE, WHO IS A PERSON, A FIRM OR A CORPORATION NOT LOCATED WITHIN AN AREA SERVICED BY A CHAPTER OR CHAPTER-IN-FORMATION A MEMBER-AT-LARGE APPLIES FOR MEMBERSHIP AND PAYS DUES TO THE NATIONAL ASSOCIATION LIFE MEMBER, WHO IS AN INDIVIDUAL RETIRED FROM AN ACTIVE ROL E IN THE INDUSTRY A LIFE MEMBER SHALL HAVE CONTRIBUTED OUTSTANDING SERVICE TO THE ASSOCIA TION AND BE RECOMMENDED BY THE CHAPTER BOARD OF DIRECTORS IF A REGULAR MEMBER OR BY THE EX ECUTIVE COMMITTEE IF A MEMBER-AT-LARGE, AND BE DESIGNATED A LIFE MEMBER BY THE BOARD NATI ONAL AFFILIATE MEMBER, WHO IS A PERSON, NATIONAL CORPORATION OR FIRM, INDUSTRY ASSOCIATION , FOUNDATION, OR ANY OTHER GROUP OR INDIVIDUAL WHO MAKES AN ANNUAL CONTRIBUTION AS ESTABLI SHED BY THE EXECUTIVE COMMITTEE TO FURTHER THE OBJECTIVES, PURPOSES AND PROGRAMS OF THE AS SOCIATION NATIONAL AFFILIATE MEMBERS ENJOY ALL MEMBERSHIP BENEFITS OF THE ASSOCIATION, EX CEPT THAT THEY MAY NOT HOLD OFFICE WITHIN THE ASSOCIATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERSHIP FROM THE CHAPTERS IS BASED ON THE NATIONAL DUES PAYING MEMBERS DIRECTORS OF TH E BOARD ARE SELECTED BY CHAPTERS PRIOR TO DECEMBER 1ST EACH YEAR A CHAPTER THAT BECOMES 6 0 DAYS DELINQUENT IN THE SUBMISSION OF ITS MONTHLY DUES STATEMENT OR HAS BEEN PLACED "IN T RUST" SHALL NOT BE ELIGIBLE FOR VOTING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE ASSOCIATION HIRES A CPA FIRM TO PREPARE THE FEDERAL FORM 990 THE EXECUTIVE COMMITTEE HAS APPOINTED THE COMPENSATION COMMITTEE, CONSISTING OF THE CHAIR, CHAIR-ELECT, IMMEDIATE PAST CHAIR AND TREASURER, TO BE THE BODY TO RECEIVE THE FORM 990 PRIOR TO FILING THE FORM IS SENT TO THE EXECUTIVE COMMITTEE PRIOR TO FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AT THE BEGINNING OF EACH YEAR, MEMBERS OF THE ASSOCIATION'S EXECUTIVE COMMITTEE AND THE EX ECUTIVE MANAGEMENT TEAM ON THE ASSOCIATION'S STAFF SIGN A CONFLICT OF INTEREST STATEMENT I N WHICH ANY DEVIATIONS FROM COMPLIANCE WOULD BE NOTED IF ANY CONFLICT OF INTEREST AROSE, THE MEMBER WOULD RECUSE THEMSELVES FROM VOTING AND/OR PARTICIPATING IN REGARDS TO THE ISSU E AT HAND THE ASSOCIATION ENCOURAGES EACH OF ITS CHAPTERS TO ADOPT THEIR OWN CONFLICT-OF-INTEREST POLICIES, BUT DOES NOT ASK ALL BOARD MEMBERS, OTHER THAN THE EXECUTIVE COMMITTEE, TO EXECUTE THEM

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE REVIEWS AND DETERMINES THE SALARY OF THE PRESIDENT/CEO THE PRESIDENT/CEO REVIEWS AND DETERMINES THE SALARY OF KEY EMPLOYEES APPROXIMATELY EVERY THREE YEARS, THE ASSOCIATION EMPLOYS A CONSULTANT TO PERFORM A SALARY SURVEY OF ALL POSITIONS TO DETERMINE COMPARABLE SALARIES IN THE WASHING DC METROPOLITAN AREA BONUS /INCENTIVE COMPENSATION IS DERIVED BY AN EVALUATION OF THE COMPENSATION COMMITTEE OF PERFORMANCE AGAINST THE ORGANIZATIONS STRATEGIC AND OPERATIONAL OBJECTIVES FOR THE YEAR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE T O THE PUBLIC HOWEVER, THE FEDERAL FORM 990 AND THE CONFLICT OF INTEREST POLICY ARE AVAILA BLE UPON REQUEST FOR THE SAME PERIOD OF DISCLOSURE AS FORTH IN SECTION 6104(D)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND SELECTION OF AN INDEP ENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEA RS

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATED BUILDERS AND CONTRACTORS INC

Employer identification number
52-0579380

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No
(1)TRIMMER EDUCATION FOUNDATION INC 440 FIRST ST NW SUITE 200 WASHINGTON, DC 20001 23-7122569	EDUCATION	MD	501(C)(3)	LINE 7	ASSOCIATED BUILDERS AND CONTRACTORS INC	Yes	
(2)CONSTRUCTION LEGAL RIGHTS FOUNDATION 440 FIRST ST NW SUITE 200 WASHINGTON, DC 20001 52-1687857	LEGAL DEFENSE	MD	501(C)(6)		ASSOCIATED BUILDERS AND CONTRACTORS INC	Yes	
(3)ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE 440 FIRST ST NW SUITE 200 WASHINGTON, DC 20001 52-1458097	PAC	MD	527		ASSOCIATED BUILDERS AND CONTRACTORS INC	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) ASSOCIATED BUILDERS AND CONTRACTORS SERVICES CORPORATION 440 FIRST ST NW SUITE 200 WASHINGTON, DC 20001 54-1854662	PUBLISHING	MD	ASSOCIATED BUILDERS AND CONTRACTORS INC	C	1,659,149	838,395	100 000 %	Yes	

Part V **Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)**annuities, **(iii)** royalties, or**(iv)** rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	
o Sharing of paid employees with related organization(s)	1o	Yes	
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q	Yes	
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 52-0579380
Name: ASSOCIATED BUILDERS AND CONTRACTORS INC

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	ASSOCIATED BUILDERS AND CONTRACTORS SERVICES CORPORATION	A	32,048	CASH
(1)	CONSTRUCTION LEGAL RIGHTS FOUNDATION	B	892,870	CASH
(2)	CONSTRUCTION LEGAL RIGHTS FOUNDATION	C	568,000	CASH
(3)	ASSOCIATED BUILDERS AND CONTRACTORS SERVICES CORPORATION	O	176,372	CASH
(4)	CONSTRUCTION LEGAL RIGHTS FOUNDATION	O	48,897	CASH
(5)	ASSOCIATED BUILDERS AND CONTRACTORS SERVICES CORPORATION	Q	16,922	CASH
(6)	CONSTRUCTION LEGAL RIGHTS FOUNDATION	Q	2,692	CASH
(7)	TRIMMER EDUCATION FOUNDATION INC	Q	8,784	CASH