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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

	For the	2016 calendar year, or tax year beginning July 1 , 2016, a	nd ending		ne 30	, 20 17						
В	Check if		er identification number									
$\Box$	Address				23-7209853							
님		7.00		E Telephor								
님	Name ch	ango .										
님	initial reti	170				970-818-1041						
$\vdash$					•							
$\vdash$	Amended				<b>G</b> Gross re							
Ш	Application	on pending F Name and address of principal officer		1		subordinates? Yes No						
H(b) Are all subordinates included the subor												
I Tax-exempt status												
<u>J</u>	Website			<del></del>	<del></del>							
K			r of formatio	n 1973	M State	of legal domicile IL						
P	art I	Summary										
	1	Briefly describe the organization's mission or most significant activities:										
če		and national levels, we reach out to approximately 140 colleges and univers	ities to enl	nance the e	ducation	of Construction						
Governance		Management students.										
ē	2	Check this box ▶ ☐ if the organization discontinued its operations or dis	sposed of	more than	1 25% of	its net assets.						
Ĝ	3	Number of voting members of the governing body (Part VI, line 1a)			3	12						
	4	Number of independent voting members of the governing body (Part VI,	line 1b)		4	12						
Activities &	5	Total number of individuals employed in calendar year 2016 (Part V, line	2a) .		5	0						
₹	6	Total number of volunteers (estimate if necessary)	•		6	0						
Ac	7a	Total unrelated business revenue from Part VIII, column (C), line 12 .			7a	0						
	1	Net unrelated business taxable income from Form 990-T, line 34			7b	0						
				Prior Ye	ear	Current Year						
m	8	Contributions and grants (Part VIII, line 1h)	$ abla$		61803	127925						
Revenue		Program service revenue (Part VIII, line 2g)			731328	767447						
š	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	🗀		11730	8816						
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .			0	0						
		Total revenué—add lines 8 through 11 (must equal Part VIII, column (A), lin	ļ		804861	904188						
	+	Grants and similar amounts paid (Part IX, column (A), lines 1–3)			001001	304100						
	:14-	Benefits paid to or nembers (Part IX, column (A), line 4)		· · · · · · · · · · · · · · · · · · ·								
		Salanes other compensation, employee benefits (Part IX, column (A), lines	5_10\									
Expenses	16a	Professional fundralsmy fees (Part IX, column (A), line 11e)	IX column (A) line 11e)									
ē		Total fundraising expenses (Part IX, column (D), line 25) ▶		The Control of Co		The service of the service of						
ᄶ	新	Other expenses Partix, column (A), lines 11a-11d, 11f-24e)	·	MARINE COLUMN		S TO SERVICE STATE OF THE SERVICE STATE STATE OF THE SERVICE STATE STATE						
	11/	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25	". ⊢		719576	773275						
					719576	773275						
		Revenue less expenses. Subtract line 18 from line 12		ginning of Cu	85285	130913 End of Year						
sets or		Tabel access (Dark V. Land 40)	-	giiiiiiiig oi ot								
Sse	20	Total assets (Part X, line 16)	· ·		676530	807443						
Netrass Fund Ba	21	Total liabilities (Part X, line 26)	. –									
•		Net assets or fund balances. Subtract line 21 from line 20	<u>-:</u>		676530	807443						
/ ! <del>.                                    </del>	art II	Signature Block				<del></del>						
		Ities of perjury, I declare that I have examined this return, including accompanying schedules t, and complete Declaration of preparer (other than officer) is based on all information of whic				ny knowledge and belief, it is						
		The state of the s		1								
5		Clay fill holy			42	ep 2017						
Sign		Signature of officer		Da	ate							
4 He	ere	/reasures		<del> </del>		<del></del>						
· —		Type or print name and title				lozu:						
Pa	nid	Print/Type preparer's name Preparer's signature  Margaret R Glick  Margaret R Glick	Date	125/17	Check							
	epare	Margaret B Glick Margaret & Glick	- "	וווכאי	self-em	P01968166						
	se Onl			Firm	n's EIN ▶							
		Firm's address ▶		Pho	one no	970-818-1041						
	11 ads 10	RS discuss this return with the preparer shown above? (see instructions)				🗸 Yes 🗌 No						

Form 990 (2016)

Onn 33	rage Z
Part	· · · · · · · · · · · · · · · · · · ·
•	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	ASC is a professional association for the development and advancement of construction education, where the sharing of ideas and
	knowledge inspires, guides and promotes excellence in curricula, teaching, research and service.
	•
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	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.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 526,738 including grants of \$) (Revenue \$)
	Through the website and conferences at regional and national levels, this organization reaches out to approximately 140 Universities
	and Colleges (higher education) with programs in Construction Management. By sharing research and educational information
	between faculty (approximately 900+) this enhances the education in Construction Management for students. Research includes
	faculty conducting research projects and writing papers. These papers are presented and shared at the annual and regional
	conferences and are published in Journals. Through this sharing, education is enhanced to the students who demonstrate their
	knowledge at the regional conferences in student competitions.
	NOTE: This is the only program service of the organization.
4b	(Code:) (Expenses \$ncluding grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••
	······
	(0.1
4¢	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	······································
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses ► 526,738

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule B, Schedule C Contributors (see instructions)?  2 Is the organization regulared to complete Schedule B, Schedule of Contributors (see instructions)?  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.  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f) election in effect during the tax year? If "Yes," complete Schedule C, Part III.  5 Is the organization amounts and linear amounts are self-intended in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II.  7 Did the organization maintain collections of vivriso of art, historical treasures, or other similar assist? If "Yes," complete Schedule D, Part III.  8 Did the organization, the part X, insee 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, insee 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, insee 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, insee 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, insee 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, insee 10? If "Yes," complete Schedule D, Part VI.  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, per	Part	Checklist of Required Schedules			
2 Is the organization required to complete Schedule B, Schedule of Contribution (see instructions)?  3 Dut the organization required to complete Schedule C, Part I I  4 Section 501(c)(a) organizations. Dut the organization angage in lobbying activities, or have a section 501(h) election in effect during the lax year? If "Yes," complete Schedule C, Part I I  5 Is the organization around an any donor advised funds or any similar funds or accounts for which donors have the inglit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule C, Part II I  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the legit to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II I  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lad areas, or historic structures? If "Yes," complete Schedule D, Part II I  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV II  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 19 Part V, III III, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10 Part V III II	٠,	Is the organization described in costion 501(c)(3) or 4047(a)(1) (other than a private foundation)? If "Yes."		Yes	No
2 Is the organization required to complete Schedule 6, Schedule of Contributors (see instructions)?  3 Did the organization angue in direct or indirect political campaign activities, or have a section 501(h) election in effect during the tax yea? If "Yes," complete Schedule C, Part II  5 Is the organization a section 501(k)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99-187 If "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical cland areas, or historic structures? If "Yes," complete Schedule D, Part III  9 Did the organization report an amount in Part X, line 21, for escrew 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  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.  11 If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII  12 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 VIII  13 Did the organization report an amount for other assets 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 VIII  14 Did the organization export an amount for other isabilities in Part X, line 16. If "Yes," complete Schedule D, Part XIII  15 Did the organization obtain separate, independ	•		1	1	;
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 If I 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 99 in 19" in "Yes," complete Schedule C, Part III.  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 II.  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 III.  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 VI.  Did the organization of sanswer to any of the following questions is "Yes," then complete Schedule D, Part VI.  VII. VIII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part XV.  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 XV.  Did the organization report an amount for other lassities 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 XV.  Did the organization orbit an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part XV.  Did the organization report an amount for blank line program related in Part X, line 15 th	2		-		✓_
election in effect during the tax year? If "Yes," complete Schedule C, Part III  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  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 III  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical and rease, or historic structures? If "Yes," complete Schedule D, Part III  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  Did the organization report an amount in Part X, inc 21, for escrow or custodial account hability, serve as a custodian for amounts not listed in Part X, inc provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IVI  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 VI  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI  VII, VIII, IX, or X as applicable.  Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for investments—other securities in Part X, line 112 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for investments—other securities in Part X, line 10. If Yes, "complete Schedule D, Part XIII.  Did the organization report an amount	3		3		1
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have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If  "Yes," complete Schedule D, Part II  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, histonical treasures, or other similar assets? If "Yes," complete Schedule D, Part II  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 V II  Did the organization assert to any of the following questions is "Yes," then complete Schedule D, Part V IV, IV, IVII, X, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II  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 V II  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 X II  Did the organization 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 X II  Did the organization 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 X II  Did the organization obtain separate, independent audited linancial statements for the tax year? If "Yes," complete Schedule D, Part X II  Did the organization maintain an office, employees, or agents outside of the United States?  Did the organi	5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		1
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 9  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 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 V 10  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasis-endowments? If "Yes," complete Schedule D, Part V 11, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11  Did the organization report an amount for investments—other secunties 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 V 11  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 X 11  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 X 11  Did the organization seport 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 X 11  Did the organization seport 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 X 11  Did the organization seport 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 X 11  Did the organiza	6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		1
Dut 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 negotation services? If "Yes," complete Schedule D, Part IV.  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 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 VII.  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 VIII.  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.  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 XI  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 X III.  4 Did the organization obtain separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X III.  5 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.  5 Did the organization associated in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E.  11 Did the organization maintain an office, employees, or agents outside of the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts III and IV.  12 Did the organizat	7		7		1
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  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 VIII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  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  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 VII  d Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into 15 that is 5% or more of its total assets reported in Part X Into 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X Into	8		8		✓
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 I.  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI I.  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	9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	9		1
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to Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11				
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  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  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  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  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  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII soptional  13 Is the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X I and XII is optional  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 Y  14 a Did the organization maintain an office, employees, or agents outside of the United States?  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 II and IV.  15 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 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 S	а		11a		<b>√</b>
of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	b	· · · · · · · · · · · · · · · · · · ·	11b		1
reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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 1 and XII .  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII is optional Is 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13		of its total assets reported in Part X, line 169 If "Yes," complete Schedule D, Part VIII	11c	_	<b>√</b>
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 .  12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
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  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
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  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12 a		12a		1
b Did the organization maintain an office, employees, or agents outside of the United States?  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.  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.  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.  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)  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	b	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12b		1
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.  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.  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.  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)		-			1
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.  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.  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.  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)  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  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		· · · · · · · · · · · · · · · · · · ·	14a	<b>-</b>	<b>/</b>
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	Ь	fundraising, business, investment, and program service activities outside the United States, or aggregate	146		1
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	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			1
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)	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			1
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	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			<b>√</b>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1

Part	Checklist of Required Schedules (continued)			<del></del> -
, ,	Did the ergonization energia are as more hospital facilities? If "Ven " complete Cahadula H	000	Yes	No.
zu a b	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a 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		_
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		<b>▼</b>
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		1
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		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		1
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		1
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		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<del></del>	1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
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		1
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,		'	,
38	Part VI	37	<b>✓</b>	
		Forr	n 990	(2016)

Form **990** (2016)

Dood	Statements Decording Other IDC Filings and Tay Compliance			
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	once in contains a response of field to any internation art v	·-·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a	5 70%	200347	h. N.
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0	24	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	10		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	7		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		抵視	202
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	}		ļ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	1 .		1
<b>L</b>	,	4a €∴383	· 1995-48	KARA L
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		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<b>-</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1	·	<b>†</b>
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	]	1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	Ĺ	
7	Organizations that may receive deductible contributions under section 170(c).	8. <b>19</b>	藏	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			\$ V
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>├</b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_	]	١,
_	required to file Form 8282?	7c	沙震	<b>√</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year		<b>3.0</b>	The Co
e f	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	<del>                                     </del>	├
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<del> </del>	┼
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<del> </del>	<del> </del>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			196 C
	sponsoring organization have excess business holdings at any time during the year?	8	Link Labor.	
9	Sponsoring organizations maintaining donor advised funds.	146		
а	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:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		緩	17
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	3000	2.00
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	200	200	E-CA
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	CHE STORY	NAT-SITE.
_	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			1
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			9
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and	for a	"No"
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	iee ins	struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		. 🗸
Secti	on A. Governing Body and Management			
4.	Established to the second of t		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 12			
	If there are material differences in voting rights among members of the governing body, or			1
	of the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		٠.	: [
b				
2	Enter the number of voting members included in line 1a, above, who are independent . <b>1b</b> 12 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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct	<u> </u>	<u>-</u>	<del>                                     </del>
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	ļ	1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		1
6	Did the organization have members or stockholders?	6	1	
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	1	
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	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following:			لا
a	The governing body?	8a	1	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	✓_	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode l	<b>V</b>
	St. 21. Global (1.110 coolion 2. roquosia information about points) and information and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about points) and information about points (1.110 coolion 2. roquosia information about po		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1	
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	✓	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
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		1
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	L	ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1	1
	describe in Schedule O how this was done	12c	ļ	<u> </u>
13	Did the organization have a written whistleblower policy?	13	ļ	V .
14 15	Did the organization have a written document retention and destruction policy?	14		<b>V</b>
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1		
а	The organization's CEO, Executive Director, or top management official	15a		\_\
b	Other officers or key employees of the organization	15b	<u> </u>	<b>V</b>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1	-	1
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		<b>✓</b>
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	<u> </u>	<u>L</u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE		-1/01	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(	c)(3)s	only)
19	✓ Own website ☐ Another's website ✓ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interval of the conflict of the	eract	nolio	y and
15	financial statements available to the public during the tax year	ui GOL	POIIC	y, anu
20	State the name, address, and telephone number of the person who possesses the organization's books and re	corde	•	
	Margaret Click 2750 S. Bar C. Lang East Colling CO 90524 970 919 1041	JU, US		

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Page	•

Form		

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

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

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

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

Check this box if heither the organization no	any relate	u orga	anız	auc	11 0	ompe	1150	iteu any curren	t officer, director	, or trustee.
					2)					
(A)	(B)	(B) Position							(E)	(F)
Name and Title	Average		(do not check more than one box, unless person is both an					Reportable	Reportable	Estimated
	hours per week (list any	office	er and		irect	or/trus	<u> </u>	compensation from	compensation from related	amount of other
	hours for	o la	lng!	Officer	Key employee	eng Hg	Former	the	organizations	compensation
	related organizations	lirec	utut	cer	em	) best	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	or to	ona		용	8 8		(44-2) 1099-101130)		and related
	line)	Individual trustee or director	Institutional trustee		8	per	1	{		organizations
		ř	stee		}	Highest compensated employee	)	)		
	<del> </del>	<u> </u>	$\vdash$			l ä	-	<del> </del>		<del> </del>
(1) Lori A Brown	5	 				Ì				
President				✓						
(2) David E Gunderson	5	}	}		ł		}			
1st Vice President		<u> </u>	_	✓		<u> </u>	_			
(3) Ben Farrow	5			} .	Ì	ł			i	
2nd Vice President	<del> </del>	<b> </b>		1	ļ_		<u> </u>	<del> </del>	<del> </del>	
(4) Jay Christofferson	5	1	1	١.	1	ľ	1	1	ĺ	
Treasurer	<u> </u>	ļ	_	✓	<u> </u>	ļ	<b> </b>	<del></del>	<u> </u>	<u> </u>
(5) Lloyd Scott	5	ļ			1	ļ		l .		
Secretary	ļ	<b> </b>	<u> </u>	1	<u> </u>	<b>}</b> _	-	<b></b>		ļ
(6) Michael J Emmer	55	}				}	}		}	
Region 1 Director	<u> </u>	<u> </u>	-	1	<b>├</b>	ļ	-	ļ		
(7) Tom Leathem	55			١,	ł	}	ł	}	}	
Region 2 Director	<del> </del>		-	✓	├	<b>├</b>	<del> </del> —	<del> </del>		<u> </u>
(8) Mohamed A El-Gafy	5	ł					1	1		
Region 3 Director	<del> </del>			<b>✓</b>	-	ļ	<del>-</del>	<del> </del>	ļ	<del></del>
(9) Richard J Gebken	5	ļ			1	ĺ	1		(	
Region 4 Director	<del> </del>	ļ	-	1	<b>├</b>	ļ	<b>├</b> -	<del> </del>	<b></b>	
(10) Jim Carr	5	}		,					<b>j</b>	
Region 5 Director	<del> </del>		-	1	}	<b>├</b>	<del> </del>		<b>_</b>	
(11) Scott Glick	5						}		]	
Region 6 Director	<del> </del>		<u> </u>	1	<u> </u>	<b>├</b>	┼	<del> </del>	<del> </del>	<del> </del>
(12) Philip Barlow	5	ļ		,		ł	1	1	}	
Region 7 Director	<del> </del>	<b>├</b>	├-	✓	┼-	<del> </del>	┼-	<del> </del>	<del>}</del>	
(13) Nick Morton	5	1		,		1		1	1	1
Region 8 Director	<del> </del>			<b>✓</b>	├	<del> </del>	+-	<del> </del> -	<del> </del>	<del> </del>
(14)	<b></b>	ł			Ì				{	(

-	(A) Name and title		box, office	unles er and	Pos eck s pe d a d	rson irect	than out the than the the than the than the than the than the the the the than the than the	an ee)	(D) Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated a mount of other
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)			-		-			<del>                                     </del>			
(16)								-			
17)								-			
(18)					_		<u> </u>	-		<u> </u>	
					-	-		-			
(20)					_	-		-	<u> </u>		<del> </del>
				-		-		_	<u> </u>		<del> </del>
				_	_	-		-	ļ 	<u> </u>	<u> </u>
				_	ļ 	_				· · · · · · · · · · · · · · · · · · ·	ļ
23)						L					
24)											
25)							-				
C	Sub-total  Total from continuation sheets to Part  Total (add lines 1b and 1c)	VII, Sectio	n A	•				<b>&gt; &gt; &gt;</b>			
2	Total number of individuals (including but reportable compensation from the organi	t not limited			e list	ted	above	e) w	nho received m	ore than \$100,0	000 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete:	ficer, direc						emp	oloyee, or high	est compensa	ted Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or individ	ual 5
	n B. Independent Contractors				_				41-4		100 000 - 1
1	Complete this table for your five highest compensation from the organization. Repyear.										
	(A) Name and business add	íress							(B) Description of s	ervices	(C) Compensation
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed ab	ove) who	

Part	VIII	Statement of Reve					B- 43/00		
		Check if Schedule O	contains	a resp	oonse or note to	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>0</b> 0	1a	Endorated compound		12			revenue		512-514
art all	_	Federated campaigns		1a 1b	107005				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .			127925	ľ	1		
	C	Fundraising events		1c					
ַבַּ יַפַּ	d	Related organizations		1d					
Sir	e 4	Government grants (con All other contributions, gi		1e					
iğ e	f	and similar amounts not inc		l 1f			Ì		
를	_	Noncash contributions include		ـــنــــــــــــــــــــــــــــــــــ					
o pu	9	Total. Add lines 1a-1				127025			
90	h	Total. Add lines 1a-1	1	•	Business Code	127925			
ğ	2a	Regional Conferences			611600	737713	737713		
ě	Za b	Website Announcemen			611600	27000	27000		
9	C				611600	2734	2734		
Š	d				011000	2/34	2/34		
пS	e								
Jrar	f	All other program ser							.=
Program Service Revenue	g	Total. Add lines 2a-2				767447			
	3	Investment income	(including	dıvid	ends, interest,	70,447			<u> </u>
		and other similar amo				8816			8816
	4	Income from investmen							
	5	Royalties		•	•				· · ·
		,	(i) Rea		(ii) Personal				
	6a	Gross rents		-					
	b	Less: rental expenses							
	c	Rental income or (loss)							1
	d	Net rental income or	(loss) .	<del></del>	▶				
	7a	Gross amount from sales of	(ı) Securi	tres	(II) Other				
		assets other than inventory	-						
	b	Less: cost or other basis				1			
		and sales expenses					'		
	С	Gain or (loss)							
	d	Net gain or (loss) .	<del></del>		🕨				
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions report See Part IV, line 18	ed on line 1						
Ę	Ь	Less. direct expense		_		1 1	1		
0		Net income or (loss) t			events . ►			·····	
		Gross income from gasee Part IV, line 19 .	aming activ	ities.					
	b	Less: direct expense						·	
	С	Net income or (loss)	irom gamır	ng act	ıvitıes ▶				
	10a	Gross sales of in returns and allowance							
	b	Less: cost of goods s							
	<u> </u>	Net income or (loss)		of inv	<del>,</del>	0	0	0	0
		Miscellaneous F	Revenue		Business Code				
	11a				<u></u>				
	b								
	C	***************************************						_	
	d	All other revenue .							<del> </del>
	e	Total. Add lines 11a-			🟲				
	12	Total revenue. See i	nstructions	· ·	· · · · •	904188	767447	0	8816 Form <b>990</b> (2016)
									FOILIT <b>330</b> (2016)

# Part IX Statement of Functional Expenses

Check if Schadule O contains a response or note to any line in this Part IX.  Do not include amounts reported on lines 66, 75, 108, 95, and 10b of Part VIII.  198, 95, and 10b of Part VIII.  199, 90, 90, 90, 90, 90, 90, 90, 90, 90,	Sectio	nn 501(c)(3) and 501(c)(4) organizations must com	nplete all columns. A	ll other organization	s must complete co	olumn (A).
Do not include amounts reported on fines 6b, 7b, 8b, 9b, and 10b of Part VIII.  1 Grants and other assistance to domestic organizations and domestic governments. See Part VI, Ine 21  2 Grants and other assistance to domestic includes a control of the control of		Check if Schedule O contains a respon-	se or note to any lir	ne in this Part IX .		
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 22 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 22 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Compensation of current officers, directors, trustees, and key employees 8 Penson (as defined under section 4556(f(3ll)) and persons described in section 4556(f(3ll)) and persons described in section 4556(f(3ll)). 7 Other salanes and vages 8 Penson pina accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 11 Fees for services (non-employees). 13 Management 5175 5175 14 Legal 0 0 0 0 15 Accounting 45315 45315 15 Legal 0 0 0 0 16 Accounting 45315 45315 16 Lobbying 0 0 0 0 17 Assistance of the file is generated site of the 25 column (A) amount, list ine 11g expenses on Schedule 0) 18 Professional fundration generate site of the 25 column (A) amount, list ine 11g expenses on Schedule 0) 19 Advertising and promotion 95411 95411 10 Office expenses 6 100 of 100 100 100 100 100 100 100 100 100 10			(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
individuals. See Part IV, line 22  Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(B)  Other salaries and wages  Penson plan accruals and contributions (include section 4958(c)(3)(B)  Other salaries and wages  Penson plan accruals and contributions (include section 4968(c)(3)(B)  Other salaries and wages  Penson plan accruals and contributions (include section 401(A) and 405(b) employer contributions)  Other employee benefits  Penson plan accruals and contributions (include section 401(A) and 405(b) employer contributions)  Other employee benefits  Penson plan accruals and contributions (include section 4958(c)(3)(B)  Other salaries and 405(b) employer contributions)  Other semployee benefits  Penson plan accruals and contributions (include section 405(b) employee contributions)  A decounting of taxes  Other semployees benefits  Professional fundrasing services. See Part IV, line 17 if investment management fees  Other employees benefits  Other employees benefits  Other employees and promotion  Other employees and promotion and amortization insurance  Conferences, conventions, and meetings  Interest  Insurance  Other expenses in covered above (Bust miscellancous expenses in inc 24e, 1f line 24e amount acceeds 10% of line 25, column (A) amount, list line 24e expenses on schedule O)  All ether expenses  Other expenses  Other expenses  Other expenses in column (B) pint tools officials  Conferences, conventions, and meetings  Insurance  Other expenses  Other expenses on schedule O)  All other expenses  Other expenses  Other expenses  Other expenses  Other expenses  Other expenses  Othe	1				,	3, '
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 .  6 Compensation not included above, to desqualifile and persons described in section 4958(c)(3)(B) .  7 Other salanes and wages .  8 Pension plan accruals and contributions (include section 4018) and 403(b) employer contributions) .  9 Other employee benefits .  10 Payroll taxes .  11 Fees for services (non-employees).  12 Management	2					
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(f)) and persons (as defined under section 4958(f)(f)) and persons (as defined under section 4958(f)(f)) and persons (aschaelin excent for five five for five five for five five for five five for five for five for five for five for five five for five five for five for five for five for five for five five for five for five five five five five five five five	3	organizations, foreign governments, and foreign			· ·	
persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		Compensation of current officers, directors,				
8 Penson plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits	6	persons (as defined under section 4958(f)(1)) and				
10 Payroll taxes 11 Fees for services (non-employees). a Management		Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
11 Fees for services (non-employees). a Management	9	· -				
a Management 5175 5 5175 5 5175 5 6 5175 5 6 6 7 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	10	,				
b Legal	11					
C   Accounting	а	-	5175		5175	·····
d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 23594 23594 0	b	<del>-</del>	0			<del></del>
e Professional fundraising services. See Part IV, line 17 f Investment management fees	_	- I	45315		45315	
Investment management fees		, ,	. 0			
9 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)   23594   23594   0						
Advertising and promotion		Other (If line 11g amount exceeds 10% of line 25, column				
13 Office expenses	40	-	· · · · · · · · · · · · · · · · · · ·	23594		
14 Information technology		- · ·				
15 Royalties 16 Occupancy 17 Travel			6775		6775	
16 Occupancy 17 Travel		_ ·				·
Travel		· •	-			
Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings . 20 Interest			40103		40400	·
Interest   Payments to affiliates   Payments to affiliate   Payments to affiliates   Payments to affiliates   Payments to affiliate   Payments to affiliate   Payments to affiliate   Payments to affiliates   Payments to affiliates   Payments to affiliate   Payments to affiliates   Payments to affiliate   Payments to		Payments of travel or entertainment expenses	49103		49183	
21 Payments to affiliates	19	Conferences, conventions, and meetings .				
Depreciation, depletion, and amortization  Insurance	20	Interest				
23 Insurance	21	Payments to affiliates				
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 Regional activities 507104 507104 0  b General operating 18662 18662  c ICJER Expenses 19634 19634 0  e All other expenses  Total functional expenses. Add lines 1 through 24e 545400 526738 18662  25 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  Image in the content of		· · · · · · · · · · · · · · · · · · ·				
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 Regional activities 507104 507104 0  b General operating 18662 18662  c ICJER Expenses 19634 19634 0  e All other expenses 19634 19634 0  25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662  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	23	Insurance	2693		2693	
line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)  a Regional activities  507104  507104  0  General operating  18662  18662  19634  19634  0  e All other expenses  Total functional expenses. Add lines 1 through 24e  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  In the state of the solution of the line of the line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  In the state of the solution of the line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here  In the state of the state of the solution of the line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	24		1		* .	
(A) amount, list line 24e expenses on Schedule O.)  a Regional activities 507104 507104 0  b General operating 18662 18662  c ICJER Expenses 19634 19634 0  e All other expenses 25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662  25 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						\ \ {
a Regional activities 507104 507104 0  b General operating 18662 18662  c ICJER Expenses 19634 19634 0  e All other expenses  Total functional expenses. Add lines 1 through 24e 545400 526738 18662  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		·				
b General operating 18662 18662 c ICJER Expenses 19634 19634 0  e All other expenses 25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662 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	_					
c ICJER Expenses 19634 0  e All other expenses 25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662  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	_			507104	·	
d e All other expenses  25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662  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		IC IED Evpopens				
e All other expenses  25 Total functional expenses. Add lines 1 through 24e 545400 526738 18662  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			19634	19634	0	<del></del>
Total functional expenses. Add lines 1 through 24e  545400  526738  18662  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		All other expenses				<del> </del>
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ □ if			E4E400	525720	40000	
10110 ming 0 0 1 0 0 2 (m0 0 0 0 1 2 0 )		Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	545400	526738	18662	0

P	art X	Balance Sheet .			
•		Check if Schedule O contains a response or note to any line in this Par	<u>tX</u>	<u></u>	<u> U</u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	51547	1	68675
	2	Savings and temporary cash investments	612852	2	729668
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	12131	4	1100
	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			
S		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	* *		"一、流流"
		organizations (see instructions) Complete Part II of Schedule L	the matter, where annotes to the state of th	6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	0	9	8000
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			<u> </u>
	b	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities .		11	
	12	Investments—other securities. See Part IV, line 11 .		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	676530	16	807443
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors,		- 1-	- ,
Ě		trustees, key employees, highest compensated employees, and			- 
Liabilities		disqualified persons Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	<u> </u>	25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
s		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Se		complete lines 27 through 29, and lines 33 and 34.			<u></u>
Net Assets or Fund Balances	27	Unrestricted net assets	676530	<del>                                     </del>	807443
Ва	28	Temporarily restricted net assets		28	
nd D	29	Permanently restricted net assets		29	<u> </u>
ß		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			,
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ř.	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Š	33	Total net assets or fund balances	676530		807443
	34_	Total liabilities and net assets/fund balances	676530	34	807443

Form 99	10 (2016)			Pac	ge 12
Par	XI Reconciliation of Net Assets				90
	Check if Schedule O contains a response or note to any line in this Part XI				П
1	Total revenue (must equal Part VIII, column (A), line 12)	1		90	)4188
2	Total expenses (must equal Part IX, column (A), line 25)	2			73275
3	Revenue less expenses Subtract line 2 from line 1	3			30913
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			76530
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		80	7443
Part	XII Financial Statements and Reporting	<del></del>			
	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		'n	27.1	3 2
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in		ر بنون ا	
	Schedule O.		5 4		der F
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	•	2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or	1. 爱	<b>秦</b> 出	1 2 2
	reviewed on a separate basis, consolidated basis, or both:		4.4	43.	, e
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1 4 6		ed su distance
b	Were the organization's financial statements audited by an independent accountant?		2b		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	7-4	X - 1	1.3
	separate basis, consolidated basis, or both.		- 1		Ĩ.,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				1 1/2 E
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	•	[ ]		
	of the audit, review, or compilation of its financial statements and selection of an independent account	untant?	20		

If the organization changed either its oversight process or selection process during the tax year, explain in

За

3b

Form **990** (2016)

**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.

Schedule O

#### **SCHEDULE A** (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2016

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization Associated Schools of Construction Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e. 12f. and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations . . . . . . . . . Provide the following information about the supported organization(s). g (i) Name of supported organization (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see document? above (see instructions)) instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

THE PERSON NAMED IN

Total

Schedul	e A (Form 990 or 990-EZ) 2016					70 (I- \/4\/ 4\/ · i\	Page Z
Part	(Complete only if you checked th	e box on line	5, 7, or 8 of 1	Part I or if the	e organization	ralled to qua	lify under
ı	Part III. If the organization fails to	qualify unde	r the tests list	ed below, pl	ease complet	te Part III.)	
Section	on A. Public Support						<del></del>
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3			1 VE	1,	1 - Fag. 1	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	-206 					
6	Public support. Subtract line 5 from line 4		<u> </u>		<u></u>		<del></del>
	ion B. Total Support				4.0.0045	(-) 0016	(f) Total
Caler	ndar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4			<del></del>			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10		<del></del>		<u> </u>	40	
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for to organization, check this box and stop he	he organizatio ere	n's first, secor		h, or fifth tax y	vear as a section	on 501(c)(3) ▶ □
Sect	tion C. Computation of Public Suppo	rt Percentag	ge	44		14	
14 15 16a	Public support percentage for 2016 (line Public support percentage from 2015 Sc 331/3% support test—2016. If the organ box and stop here. The organization qu 331/3% support test—2015. If the organ	hedule A, Pari nzation did no alifies as a put	t II, line 14 . It check the boolicly supported	 ox on line 13, a d organization	and line 14 is 3	15 31/3% or more	%, check this
b	this box and stop here. The organization	n qualifies as a	a publicly supp	orted organiza	ition		
17a	10% or more, and if the organization meats the organization	neets the "fact "facts-and-cir 	s-and-circums cumstances" (	est. The organ	nization qualifie	es as a publicly	/ supported
t	10%-facts-and-circumstances test— 15 is 10% or more, and if the organiz Explain in Part VI how the organization	ration meets f	the "facts-and	-cırcumstance	s" test, cneck	this box and	stop nere.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

## Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support	under the ter	oto notog por	m, piedee ee	mpieto i ait.	,	
	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2012	(0) 2013	(6) 2014	(u) 2013	( <b>e)</b> 2010	(i) Total
,	received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise	74450	337320	81925	61803	127925	683423
2	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	415850	193785	595246	687089	737713	2629683
3	Gross receipts from activities that are not an unrelated trade or business under section 513				-		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	1	;				
6	Total. Add lines 1 through 5	490300	531105	677171	748892	865638	3313106
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from line 6.)						3313106
Section	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	490300	531105	677171	748892	865638	3313106
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,	1					
	royalties and income from similar sources .	2528	2123	3683	11730	8816	28880
b	Unrelated business taxable income (less						
_	section 511 taxes) from businesses acquired after June 30, 1975	;					
С	Add lines 10a and 10b	2528	2123	3683	11730	8816	28880
11	Net income from unrelated business	2020		3000	.,,,,,		
••	activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	492828	533228	680854	760622	874454	3341986
14	First five years. If the Form 990 is for to organization, check this box and stop he	-		d, third, fourth	_	ear as a section	
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2016 (line			3. column (fl)		15	99.14 %
16	Public support percentage from 2015 Sc	, , , , , , , , , , , , , , , , , , , ,	•	, ,,		16	99.27 %
	on D. Computation of Investment In			<del></del>	· · · · ·	1.01	33.27 70
17	Investment income percentage for 2016			v line 13 colun	nn (fl)	17	.86 %
18	Investment income percentage for 201					18	.73 %
19a	33 <sup>1</sup> / <sub>3</sub> % support tests – 2016. If the organ						
.Ja	17 is not more than 331/3%, check this box						
b	331/3% support tests—2015. If the organization 18 is not more than 331/3%, check this	zation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	31/3%, and
20	Private foundation If the organization d						

#### Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All	Supporting (	Organizations	

determine whether the organization had excess business holdings.)

ecu	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	-	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	-~ -	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		J
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		ز
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		:
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a	1	-3
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6		·>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI.</b>	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9с		
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to			

Part	Supporting Organizations (continued)			-3
,			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	<b>!</b>	- 1	,
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
h	below, the governing body of a supported organization?  A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		<u> </u>
	on B. Type I Supporting Organizations	1 10		L
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		4	· ·
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		A.	, -
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,		-" '	ï
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1-1-	~	
2	Did the organization operate for the benefit of any supported organization other than the supported	<del></del> -		
-	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>		.*	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control	1		
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
	the supported organization(s)	1-1		
Secti	on D. All Type III Supporting Organizations	<u>. –                                    </u>		l
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		7,5	-
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	) ` "	, 17	-,
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
_		1		ļ.—.
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		]	<u> </u>
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	<del>  -</del>		<del>                                     </del>
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			<u> </u>
	supported organizations played in this regard.	3	<u> </u>	
Sect	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s)
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
þ	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see ın	struct	ions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1	ĺ	
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Za	<del> </del>	
U	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the	]		
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			ļ _
	trustees of each of the supported organizations? Provide details in Part VI.	3a	<u> </u>	<del> </del>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in <b>Part VI</b> the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
. 1 Check here if the organization satisfied the Integral Part Test as a qualifying			ın ın Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		<del></del>
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5	· · · · · · · · · · · · · · · · · · ·	
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).	,		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)	j,		1
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	,	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
<ul> <li>7 Check here if the current year is the organization's first as a non-functional instructions).</li> </ul>		egrated Type III supportin	g organization (see

Part <sup>*</sup>	Type III Non-Functionally Integrated 509(a)(3	Supporting Organia	zations (continued)	Current Year
	on D - Distributions			Current rear
1	Amounts paid to supported organizations to accomplish e	xempt purposes	AI	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppor	rea	
	organizations, in excess of income from activity	of supported organ	aizatione	
3	Administrative expenses paid to accomplish exempt purp	oses of supported organ	lizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions			
7_	Total annual distributions. Add lines 1 through 6	h the organization is res	nonsiya	
8	Distributions to attentive supported organizations to whic	n the organization is res	ponsive	
	(provide details in <b>Part VI</b> ). See instructions.  Distributable amount for 2016 from Section C, line 6		-	
9_	Distributable amount for 2016 from Section 6, line 6			
10	Line 8 amount divided by Line 9 amount		(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2016	Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016.			
а				
<u>b</u>				
С	From 2013			
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			
<u>h</u>				
i	Carryover from 2011 not applied (see instructions)			
<u>j</u> _	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2016 from			
	Section D, line 7 \$			
a	Applied to underdistributions of prior years	<del> </del>		
<u>b</u>				
c	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3r and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.	n		
7	Excess distributions carryover to 2017. Add lines 3j and 4c			
8	Breakdown of line 7:		_	
a				
b	5 ( 0010	<u> </u>	<u> </u>	<del> </del>
- 0	Excess from 2014			<del> </del>
	Excess from 2015			
	Excess from 2016			<u> </u>

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

# Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2017

OMB No 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

Associated Schools of Construction	23-7209853
Form 990, Part I, Line 1, Description of Organization Mission:	
140 Universities/Colleges (Higher Education) with Construction Management programs.	
By sharing research and educational information between faculty (approximately 900+) they develop a	nd enhance education of
Construction Management students at these institutions.	
Form 990, Part VI, Section A, Line 6:	
Members are Universities and Colleges, about 140.	
Form 990, Part VI, Section Line 7A:	
Members elect members of the governing body.	
Form 990, Part VI, Section B, Line 11:	
Certain decisions are ratified by the members.	
Form 990, Part VI, Section B, Line 11:	
Form 990 is available to members after it is filed.	
Form 990, Part VI, Section C, Line 19:	
Upon request through email on website, information is made available.	