OMB No. 1545-0047 2016

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

•	<ul> <li>Do not enter social:</li> </ul>	security num	bers on this f	form as it may	be made pu	blic. 🐧
-	Information about Fo	oti bac`000 ma	s inclusedions	e ie at ununu îr	e anythin	maan l

Open to Public

A	For t	he 2016 calen	dar year, or tax year beginning Jul 1 , 2016, and ending	Jun	30	<u> </u>	2017
В	Check	if applicable.	C Name of organization TEXAS CONSTRUCTION ASSOCIATION		D Employ	er Identific	ation number
	$\prod_{A}$	ddress change	Doing business as		74-2	88569	94
	$\prod_{N}$	ame change	Number and street (or P.O. box if mall is not delivered to street address) Room/suit	8	E Telepho	ne number	
	H	uital return	1011 SAN JACINTO BLVD 330		(512	1 473	3-3773
	$\vdash$	inal return/terminated	City or town, state or province, country, and ZIP or foreign postal code		\ <u>~~</u>	., .,	, , , , , ,
	Н	mended return			G	aninta Ġ	1,517,952.
	$\vdash$		AUSTIN TX 78701  F Name and address of principal officer:	a) le thic s	group return		
	∐^	pplication pending		-	•		
			RAYMOND RISK 1011 SAN JACINTO BLVD, #330 AUSTIN TX 78701	If No,	subordinates i attach a list (s	ee instructi	ons)
<u> </u>		exempt status	501(c)(3)   X 501(c) ( 6 ) (insert no.)   4947(a)(1) or   527(				
<u> </u>	We	ebsite: ► WW	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	c) Group	exemption nur		
K		m of organization	X Corporation Trust Association Other ► L Year of formation:	199	8 Mis	ate of lega	qouncile. TX
Pă	itil	🕸 Summar					
9	1	Briefly describ	be the organization's mission or most significant activities: EDUCATION	AND A	ADVOCAC	Y FOR	CONSTRUCTION
φ	<b>\</b>						
2	{						
Ĕ	1						
o.	2		x > if the organization discontinued its operations or disposed of more that			sets.	
2019 Activities & Governance	3		ting members of the governing body (Part VI, line 1a) . 🦡			3	21
တ္	4		dependent voting members of the governing body (Part VI, line 1b)			4	20
<b>€</b>	5		of individuals employed in calendar year 2016 (Part V, line 2a)			5	4
Ç <b>≩</b>	6		of volunteers (estimate if necessary)			6	25
	1		d business revenue from Part VIII, column (C), line 12			7a	24,000.
<b>€</b>	t	Net unrelated	business taxable income from Form 990-T, line 34			7b	-9,903.
			and grants (Part VIII, line 1h)03.12.2018	P	rior Year		Current Year
Revenue	8						- <del></del>
⋛⋛	9	-	ice revenue (Part VIII, line 2g)	L	432,0	56.	475,498.
√ § .	10		come (Part VIII, column (A), lines 3, 4, and 7d)		4,5	45.	4,242.
√] Œ	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		917,9	53.	1,038,212.
	12	Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	.,354,5	54.	1,517,952.
? <b>3</b>	13	Grants and s	milar amounts paid (Part IX, column (A), lines 1-3)		7,6	00.	6,524.
8	14	Benefits paid	to or for members (Part IX, column (A), line 4)	,			
, ,	15	Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10)		679,1	11.	636,719.
Expenses	16:	a Professional	fundraising fees (Part IX, column (A), line 11e)				<del></del>
E	ì			4835 - VI	Figural Angli	Sales Sales	
ă	1		sing expenses (Part IX, column (D), line 25) ►				NACOTAL SERVICE SERVIC
	17		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	465,8	84.	554,225.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)		L,152,5	95.	1,197,468.
	19	Revenue les	s expenses. Subtract line 18 from line 12		201,9	59.	320,484.
ō 8				Beginni	ing of Curre	ıt Year	End of Year
e de tra	20		(Part X, line 16)		1,839,2	19.	2,138,811.
t Aes		Total liabilitie	s (Part X, line 26)		633,1	18.	612,226.
Ne Ne	22	Net assets or	fund balanges. Subtract line 21 from line 20		1,206,1	01.	1,526,585.
		Signatu	re Black/	·——			
			<del></del>	of my knov	wadne and he	of it is true	correct and
com	plets.	Declaration of prepa	clare that have exemified this return, including accompanying schedules and statements, and to the best rer (other had officer) is based on all information of which preparer has any knowledge.	o,	mongo ame oc	.01, 11 15 5 4	,, 5011004 2112
			KKI K (SI/A)		#1 As A	220	. 70
Sid	gn	Signat	ure of biffolic . L D 1 1 1	Ø	ate	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	ere	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	C.A. KISK tresident/ceo				
		Type o	r print name and title				
		Print/Type	preparer's name Preparer's signature Date		Check	(f P	TIN
_		1	1 (25)/20 20	7	1 -	<b>-</b> -"   .	
Pa			L. Allman, CPA   1   12/14/1	<u>'</u>	self-employ	- 1 E	00648533
	epa se O				-		007000
US	•	niy Firm's add			Firm's EIN		2979080
			Austin TX 78759		Phone no.	(512	
			is return with the preparer shown above? (see instructions)	• • • •	· · · · ·	· · · ·	X Yes No
BA	A F	or Paperwork	Reduction Act Notice, see the separate instructions.	0101 11/	16/16		Form 990 (2016)

	1990 (2016) TEXAS CONSTRUCTION ASSOCIATION	/4-2	885694	Fage 2
Par	<del></del>			
<del></del>	Check if Schedule O contains a response or note to any line in this Part III	· · · · · ·	· · · · · · · ·	• • • • • • • • • • • • • • • • • • • •
1	,			
	EDUCATION AND ADVOCACY FOR CONSTRUCTION			
	Did the organization undertake any significant program services during the year which were not listed on t	ne prior		
_	Form 990 or 990-EZ?		Yes	X No
	If 'Yes,' describe these new services on Schedule O			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi	ces?	Yes	X No
	If 'Yes,' describe these changes on Schedule O			
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to and revenue, if any, for each program service reported	es, as measu o others, the	red by expens total expense	es s, 
4 a	(Code ) (Expenses \$ including grants of \$	) (Revenue	\$	)
	PROVIDED SERVICES TO MEMBER FIRMS AND 17 ASSOCIATION			
	MEMBERS TO KEEP THEM INFORMED OF LEGISLATIVE DEVELOPMENTS			
	AND ADVOCATE ON THEIR BEHALF. MEMBERS TOTAL APPROXIMATE			
	1,200 AND AN ADDITIONAL 1,200 COMPANIES ARE DIRECT MEMBERS THR	OUGH		
	A TCA MEMBER BENEFIT PROGRAM.	. <b></b> .		- <b></b>
			<b>-</b>	
4 b	c (Code ) (Expenses \$ including grants of \$	) (Revenue	\$	)
	PUBLISHED NEWSLETTERS, ALERTS, AND WEB PAGES FOR EDUCATION			
	OF MEMBERS CONCERNING STATE LAWS THAT AFFECT THEIR			
	COMPANIES AND THE CONSTRUCTION INDUSTRY.			
	MAINTAINED A CONSTRUCTION CLAUSE LIBRARY FOR USE OF MEMBER			
	FIRMS THROUGH INTERNET ACCESS ON ASSOCIATION'S WEB SITE.			
4 0	: (Code ) (Expenses \$ including grants of \$	) (Revenue	\$	
	INCREASED AWARENESS OF TEXAS LEGISLATURE CONCERNING ISSUES	, (	`	
	THAT IMPACT CONTSTRUCTION SUBCONTRACTS AND SUPPLIERS AS			
	WELL AS EDUCATED LEGISLATORS ABOUT THE ROLE OF SUBCONTRACTORS			
	AND SUPPLIERS IN CONSTRUCTION.			
				<del>-</del>
40	d Other program services (Describe in Schedule O )			
	(Expenses \$ including grants of \$ ) (Revenue	\$		)
4 €	e Total program service expenses			

## Form 990,(2016) TEXAS CONSTRUCTION ASSOCIATION Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	(A. )	200	<b>3</b> → .
á	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŀ	Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(	Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
C	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		х
12 <i>a</i>	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	х	
t	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		х

Checklist of Required Schedules (continued) Yes No Х 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H . . . . . . 20a b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . 20b 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 . . . . . . . Х 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . . 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?.............. 240 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I . . . . . . 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I . . . 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or Х 26 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 Х 27 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) Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV . . . 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV. . . . . . . 28h Х Х 28c Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I . . . . . . . X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N. Part II . . . . . . . 32 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, Х 34 35a Х Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 37 BAA Form 990 (2016)

# Form 990 (2016) TEXAS CONSTRUCTION ASSOCIATION Part'V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V . . . . .

	Check if Schedule O contains a response of note to any line in this Part V	<u></u>	<u>· · · · </u>	للن
		<u>ज्ञिल</u>	Yes	No
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	8 8 38	1	糠
	L	이		
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	لتنشا
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a	4	<b>3</b> 20	A THE PARTY OF THE
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	, lif	14	1
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X	
	<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b	Х	
4	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		х
	b If 'Yes,' enter the name of the foreign country	<u>Σ</u> ,		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		1	45
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b	}	X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a	Х	
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were <sup>tar</sup> not tax deductible?	6 b	х	
7	Organizations that may receive deductible contributions under section 170(c).	E	·* *	
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	<u>*</u> '3	
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	-	
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	1. WE	£ .19	. 20
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		$\vdash$
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	- <del>``</del>	-	
	as required?	7 g		<u> </u>
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring		120	12.
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	سَنَّ اللَّهُ	45-4	遺
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		<u> </u>
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	ļ	
10	Section 501(c)(7) organizations. Enter	次级	1 ( ) 1 ( )	
	a Initiation fees and capital contributions included on Part VIII, line 12	1		
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	- <b>∤</b> ∙ ޱ,	*	*
77	Section 501(c)(12) organizations. Enter	11 1	,3894, PM 7	
	a Gross income from members or shareholders	· ,x,	£ 3	3,00
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	Ž.		
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		E	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  a is the organization licensed to issue qualified health plans in more than one state?	13a	* <u>\$`</u>	
	Note. See the instructions for additional information the organization must report on Schedule O	134		
	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		,	
4.4	c Enter the amount of reserves on hand	1		<del>  ↓</del>
14	a Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
3A	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b	_`	2016)
	FEMULA II/IO/IO	1 0111		

. Page 6

Pai	tt VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Schedule O. See instructions.	iń		
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u></u>	. X
Sec	tion A. Governing Body and Management			
1 a	a Enter the number of voting members of the governing body at the end of the tax year		Yes	No
	Enter the number of voting members included in line 1a, above, who are independent	2	1	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5 6 7 a	Did the organization become aware during the year of a significant diversion of the organization's assets?	5 6 7 a	X	Х
Ł	o Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	F. 60		
	a The governing body?	8 a	<u>X</u>	ļ
9				├
	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		) <del> </del> —
10-	a Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X
	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?	10 a		^
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		$\frac{1}{x}$
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990	<u></u>	· , ·	<del></del>
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	X	ت نظم ا
ł	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
C	C Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	X	
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	X	3 0
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	132		17 #3 14: **
	a The organization's CEO, Executive Director, or top management official	15a	_X	X
•	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)	135	33	A.
16 a	a 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	` <u>*</u>	X
	o 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?	16 b	· -	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply	availab	le	
19	Own website Another's website X Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year.	le to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
		12) 4	173-	3773
BAA				2016)

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

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

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

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

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

Check this box if neither the organization nor an	y related organi	zatio	n co	mpe	ensa	ted ar	ıy c	current officer, dire	ctor, or trustee	
				(C)						
(A) Name and Title	(B) Average hours per			(D)  Reportable compensation from	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation				
ع. عا	Per p		Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) KEN BOEN	2.00									
CHAIR		X		X	<u>L</u> .	Ш		0.	0.	0.
(2) VICTOR LONGO VICE-CHAIR		х		х				0.	0.	0.
(3) DAVID STONE	2.00	<u> </u>	$\mid \rightarrow \mid$	<del></del> -	-				<u> </u>	<del></del>
TREASURER		х		Х				0.	_ 0.	0.
(4) JERRY BRATTON	2.00									
SECRETARY		Х		Х				0.	0.	0.
(5) RAYMOND RISK	40.00								<del></del>	
PRESIDENT/CEO		Х		Х				428,660.	0.	0.
(6) ANDY ADAMS	2.00					Π				
DIRECTOR		Х						0.	0.	0.
(7) MACKIE BOUNDS	2.00	x							_	
DIRECTOR		_			<u> </u>			0.	0.	0.
(8) KEVIN CAMARATA		X			1					
DIRECTOR			$\vdash$		<u> </u>	$\vdash$		0.	0.	0.
(9) ROGER FISHER II	-2.00	x		ļ	į					
DIRECTOR		<u>^</u>	$\vdash$		┝	$\vdash$		0.	0.	0.
(10) KEITH COLVIN	$-\frac{1}{2 \cdot 00}$	x								_
DIRECTOR		<u> </u>	Н		$\vdash$	$\vdash$		0.	0.	0.
(11) JOHN GARGOTTA	$-\frac{2.00}{}$	x								^
DIRECTOR	<del>-   2 00</del>		$\vdash$		┝	$\vdash$		0.		0.
(12) FRED HELDENFELS IV DIRECTOR		x						0.	0.	_ 0.
(13) PAUL HOLDEN	2.00								<del></del>	<del></del>
DIRECTOR		X						0.	0.	0.
(14) MIKE KANETZKY	2.00		$\Box$							
DIRECTOR		Х						0.	_0.	0.
								· · · · · · · · · · · · · · · · · · ·		

Part VII   Section A. Officers, Directors, 111	(B)	l	<u> </u>	(0		<i>-</i> 03,	4,,,	i riigilest con	ipensated Linp	loyees (commuea)
(A) Name and title	I DOURS I DOX UNIESS DEISON IS DOWN AN		an	(D)  Reportable compensation from	(E)  Reportable compensation from	(F) Estimated				
	week (list any hours for related organiza - tions below dotted line)	or director	<u></u> 1	_		Highest compensated employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(15) ROBBIE KETCH DIRECTOR	2.00	x			_			0.	0.	0.
(16) CHRIS LAMBERT DIRECTOR	2.00	x						0.	0.	0.
(17) ERIC LESCH DIRECTOR	2.00	x						0.	0.	0.
(18) KEITH MCKEE DIRECTOR	2.00	x			-		-	0.	0.	0.
(19) FELIX MUNSON DIRECTOR	2.00	x						0.	0.	0.
(20) BRIAN CHESTER DIRECTOR	2.00	x						0.	0.	0.
(21) BETHANY THOMPSON DIRECTOR	2.00	x			_			0.	0.	0.
(22) MICHAEL WHITE GOVERNMENT RELATIONS	40.00					х		119,800.	0.	0.
(23)										
(24)										
(25)										
1 b Sub-total	on A						<b>▶</b>	548,460.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	548,460.	0.	0.
2 Total number of individuals (including but not limite from the organization ▶ 2	d to those	listed	abo	ove)	who	rece	eive	d more than \$100,0	000 of reportable cor	npensation
Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it.										Yes No
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater such individual	han \$150,	0002	' If 'Y	'es, '	and con	other	coi	mpensation from hedule J for		4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'										5 X
Section B. Independent Contractors  1 Complete this table for your five highest compensa	ted indepe	ndon	t cor	otrac	ctore	that	F0.0	awad mara than \$	(00 000 of	
compensation from the organization Report compe	ensation fo	r the	cale	nda	r ye	ar en	ding	with or within the	organization's tax ye	
Name and business addi								Description of		(C) Compensation
RAYMOND RISK, JR. 602 W. 13TH STREET	AUSTIN			TX		787	<u>v1</u>	MANAGEMENT		428,660.
					_					
Total number of independent contractors (including	but not lir	nited	to th	ose	liste	ed ab	ove	) who received mo	re than	
\$100,000 of compensation from the organization	<u> 1</u>	TEFA	3400	11/1	6/46					Form 990 (2016)

74-2885694

<u> </u>	Check if Schedule O contains a response or note to any line in this Part VIII											
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns 1 a  Membership dues 1 b  Fundraising events 1 c  Related organizations 1 d  Government grants (contributions) 1 e  All other contributions, gifts, grants, and similar amounts not included above 1 f  Noncash contributions included in lines 1a-1f: \$										
	h	Total. Add lines 1a-1f		AND THE RESERVE	· 建二次 · 接一次 · 支		A. 1888 - A					
휠			Business Code	養長 100美	<b>建新</b>		4276					
e¥e	2 a		900099	438,081.	438,081.	0.	0.					
e e	0		900099	18,500.	18,500.	0.	0.					
ξ	C		900099	12,100.		0.	0.					
୬	a	OTHER REVENUE	900099	6,817.	6,817.	0.	0.					
Program Service Revenue	e	All other program convex revenue										
8	'   ~	All other program service revenue [ Total. Add lines 2a-2f	<del></del>	155 100	· · · · · · · · · · · · · · · · · · ·		<b>1 2 3 5 5 1</b>					
<u> </u>		·		475,498.	<b>養</b> 養 (編書 ) 達	學 以在漢字 人,是	<b>劉</b> 紹· 、 <u> </u>					
	3	Investment income (including dividends, other similar amounts)		4,242.	0.	0.	4,242.					
	5	Royalties		1,014,212.	0.	0.	1,014,212.					
ļ		Gross rents	(ii) Personal									
		Less rental expenses										
[		Rental income or (loss)		I RELIE								
	a	Net rental income or (loss)	(ii) Other	(SE) (Value V	郡·tha , Pa to 其 y L , 客	ALCON HAMBERON (	- 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12					
į		assets other than inventory	(ii) Other									
		Less cost or other basis and sales expenses Gain or (loss)										
		Net gain or (loss)	<u> </u>	in Broken and Blittale in	Billion - Library		Marine de la Constante de la C					
nue	ı	Gross income from fundraising events (not including. \$										
Other Revenue		of contributions reported on line 1c) See Part IV, line 18	a									
<u> </u>			b	1.4.31		ZEN KEN						
ರ	С	Net income or (loss) from fundraising even	ents	A - 4.65 1 5- 17		Fig. 1870 -465						
		Gross income from gaming activities. See Part IV, line 19	a									
		Less direct expenses	p	£2 32		1 超图 1 121	<u> </u>					
	С	Net income or (loss) from gaming activities	es				<del></del>					
			a				- 1					
		Less cost of goods sold	D				للك المناقد					
	<u>c</u>	Net income or (loss) from sales of inventor	Business Code	\$ \$ \$ \$	95° , 1 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	11 -	· · · · · · · · · · · · · · · · · · ·										
		ADVERTISING SERVICES	541800 561000	12,000.	0.	12,000. 12,000.	0.					
			561000	12,000.	<del>                                     </del>	12,000.	ļ <del></del>					
		All other revenue	<del> </del>	<del>                                     </del>		<del></del>						
		Total. Add lines 11a-11d		24,000.								
		Total revenue. See instructions		1,517,952.	475,498.	_24,000.	1,018,454.					

#### Part IX | Statement of Functional Expenses

	Check if Schedule O contains a re-	<del></del>			Check if Schedule O contains a response or note to any line in this Part IX											
Do 1 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	(D) Fundraising expenses											
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,524.	6,524.	· · · · · · · · · · · · · · · · · · ·												
2	Grants and other assistance to domestic individuals See Part IV, line 22			· 1000000000000000000000000000000000000	A COMPANY OF THE PROPERTY OF T											
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·											
4	Benefits paid to or for members				5											
5	Compensation of current officers, directors, trustees, and key employees	354,492.														
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)															
7	Other salaries and wages	259,862.														
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)															
9	Other employee benefits	2,296.														
10	Payroll taxes	20,069.														
11	Fees for services (non-employees)															
a	Management				li											
t	Legal	143,746.		<del></del>												
c	: Accounting	9,025.														
c	Lobbying	156,000.														
6	Professional fundraising services. See Part IV, line 17		<b>建一次</b>	: "霍" 藻。												
f	Investment management fees															
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)															
	Advertising and promotion	51,223.	<del> </del>													
13	Office expenses	58,341.														
14	Information technology															
15	Royalties				<del></del>											
16	Occupancy	<u>38,791.</u>			<del> </del>											
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	16,286.														
19	Conferences, conventions, and meetings	49,719.														
20	Interest	26,918.														
21	Payments to affiliates															
22	•															
23	Insurance	4,082.		<del></del>												
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)															
á	TCA PAC ADMIN EXPENSES	94.														
ŀ																
(	;															
•	,															
•	All other expenses			<u> </u>												
	Total functional expenses. Add lines 1 through 24e	1,197,468.	6,524.													
26																
BAA	<del></del>	TEEA0110 11	/16/16		Form <b>990</b> (2016											

		Check if Schedule O contains a response or note to any line in this Part X	· · · · <u>· · · · · · · · · · · · · · · </u>		
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	6,007.	1	5,667.
	2	Savings and temporary cash investments		2	660,062.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	(	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	· 放射	. 98	
တ္	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	**	8	
As	9	Prepaid expenses and deferred charges		9	·
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			<b>文</b> (1)
	b	Less accumulated depreciation 10 b	923,082.	10 c	923,082.
	11	Investments — publicly traded securities		11	550,000.
	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)	1,839,219.	16	2,138,811.
	17	Accounts payable and accrued expenses		17	2/200/022.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
E.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		,; 22	
-	23	Secured mortgages and notes payable to unrelated third parties	633,118.	23	612,226.
	24	Unsecured notes and loans payable to unrelated third parties	033,110.	24	012,220.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
_	26	Total liabilities. Add lines 17 through 25	633,118.	26	612,226.
Ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		MONTH OF	
lan	27	Unrestricted net assets	1,206,101.	27	1,526,585.
Ba	28	Temporarily restricted net assets		28	
밀	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.		14	· · · · · · · · · · · · · · · · · · ·
\$	30	Capital stock or trust principal, or current funds		30	The state of the s
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
۲	32	Retained earnings, endowment, accumulated income, or other funds		32	
اق	33	Total net assets or fund balances	1,206,101.	33	1,526,585.
	34	Total liabilities and net assets/fund balances	1,839,219.	34	2,138,811.
BAA					Form 990 (2016)

FOII	1990 (2016) TEXAS CONSTRUCTION ASSOCIATION /4	<u>-2885</u>	694		, Pag	ge 12
Pa	rt XI Reconciliation of Net Assets	-				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u> .	<u></u> .	٠.,		_ []
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,51	7,9	52.
2	Total expenses (must equal Part IX, column (A), line 25)			1,19	7,4	68.
3	Revenue less expenses Subtract line 2 from line 1				0,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,20	6,1	01.
5	Net unrealized gains (losses) on investments					
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments	-				
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,					
Da	column (B))	10		1,52	<u>6,5</u>	<u>85.</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					<u>. 11</u>
			_		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			~ ~	•	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Ì			_
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?		1	2 a		لئت X
	· · · · · · · · · · · · · · · · · · ·		`			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both	а	- 1		*	- 34
	Separate basis Consolidated basis Both consolidated and separate basis		-	-		أسست
	b Were the organization's financial statements audited by an independent accountant?			2 b	$_{\rm X}$	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		7	7,14,		43.15
	basis, consolidated basis, or both		1	1.5		,
	X   Separate basis			: 446	٠	-
1	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dit,		2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		10000	- 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e 		3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required	audıt	ľ			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b	- 1	
BAA	\			Form 9	90 (2	(016)

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

#### Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) org	anizations Complete Part III				
	of organization			Employer identific	ation number	
TEX	KAS CONSTRUCTION AS	SOCIATION		74-288569	4	
Pai	rt I-A Complete if the o	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.	
1		ganization's direct and indirect political camp of 'political campaign activities')	aign activities in Part I	V		_
2	Political campaign activity exp	enditures (see instructions)		▶ \$		0.
3	Volunteer hours for political ca	ampaign activities (see instructions)	<u> </u>	<u></u>		40
Pai	rt I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).			
1	Enter the amount of any excis	e tax incurred by the organization under sect	ion 4955	<b>&gt;</b> \$		
2	Enter the amount of any excis	e tax incurred by organization managers und	er section 4955	▶\$		
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		Yes	No
4 a	Was a correction made?				· · · Tyes	∏No
t	If 'Yes,' describe in Part IV				ш	
Pai	t I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)		
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function act	vities · · · · · ▶ \$		0.
2	Enter the amount of the filing of function activities	organization's funds contributed to other orga	nizations for section 5	27 exempt ▶ \$		0.
3	Total exempt function expendine 17b	tures Add lines 1 and 2 Enter here and on F	Form 1120-POL,			0.
4	Did the filing organization file I	Form 1120-POL for this year?			· · · Yes	X No
5	organization made nayments	and employer identification number (EIN) of a For each organization listed, enter the amou so received that were promptly and directly de action committee (PAC). If additional space is	nt paid from the filing o	roanization's funds. Also	enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter-0-	(e) Amount of policontributions received promptly and direction of a seption political organization one, enter -0	ed and ectly arate on If
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

Schedule C (Form 990 or 990-EZ) 20	<sup>16</sup> TEXAS CONSTI	RUCTION ASSOCIAT	ION	74-288	5694 , Page <b>2</b>
Part II-A Complete if	the organization	is exempt under se			
Section 501  A Check ► ☐ If the film	<del>'''</del>	s to an affiliated group (and	l list in Part IV each affi	listed group member's no	
		share of excess lobbying ex		mated group member s na	c,
_		ed box A and 'limited contro			
B Check P   I the limit	g organization checke				
(The term	Limits on Lobbyir 'expenditures' mean	ng Expenditures ns amounts paid or incurr	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	res to influence public	opinion (grass roots lobbyi	ng)		
b Total lobbying expenditu	res to influence a legi:	slative body (direct lobbying	1)		
c Total lobbying expenditu	res (add lines 1a and	1b)			
	•				
e Total exempt purpose ex	penditures (add lines	1c and 1d)			
f Lobbying nontaxable amboth columns		nt from the following table in			
If the amount on line 1e, colo		The lobbying nontaxable		- J. " - F Ent	10 pt = 1 pt = 2
Not over \$500,000		20% of the amount on line 1e.			1982
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000.		ē
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.	· 11 · 11 · 11 · 11 · 11 · 11 · 11 · 1	3 3
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000.	1 1	·
Over \$17,000,000		\$1,000,000.		The second	4 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
g Grassroots nontaxable a	mount (enter 25% of I	ine 1f)			
h Subtract line 1g from line	1a If zero or less, er	nter -0			
i Subtract line 1f from line	1c If zero or less, en	ter -0			
j If there is an amount other section 4911 tax for this		line 1h or line 1i, did the or			Tyes No
	<del></del>				
(Som	e organizations that	-Year Averaging Period U made a section 501(h) eloow. See the separate inst	ection do not have to		
	Lobby	ing Expenditures During	4-Year Averaging Pe	riod	<del></del>
Calendar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	( <b>d)</b> 2016	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount				1	

BAA

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

f Grassroots lobbying expenditures . . . .

Schedule C (Form 990 or 990-EZ) 2016

#### Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Van' manages on lines do the such disheless manages in Doublish additional to a section	(a	1)	(b)
or each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description for the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		地域は対象	
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			大人變物 寶
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i	. 202	72.	· · · · · · · · · · · · · · · · · · ·
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	- Laffella		
b If 'Yes,' enter the amount of any tax incurred under section 4912	£1,	7. (2.2)	arten alteriore de la companya del companya del companya de la com
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	٠, إ		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		in a district	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	. or	<u> </u>
	,-,,-,	,	

## section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	438,081.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	<b>建</b>	
a	ı Current year	2 a	213,767.
k	Carryover from last year ....................................	2 b	58,938.
•	: Total	2 c	272,705.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	180,000.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	92,705.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0.
Par	t-IV Supplemental Information	· · · · · ·	

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

Pt I-A Line 1

THE ASSOCIATION HAS A SEPARATE POLITICAL ACTION COMMITTEE WHICH HANDLES ALL POLITICAL CAMPAIGN ACTIVITY. MEMBERS MAKE CONTRIBUTIONS DIRECTLY TO THE PAC. THE PAC'S DIRECTORS MAKE ALL DECISIONS ON POLITICAL CAMPAIGN CONTRIBUTIONS.

#### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 2016

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

	TEXAS CONSTRUCTION ASSOCIATION	74-2885694
Par		
Гаі	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	<del></del>
3	Aggregate value of grants from (dunng year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advisore the organization's property, subject to the organization's exclusive legal control?	sed funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose impermissible private benefit?	used only conferring
Par	Conservation Easements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
		historically important land area
	$oldsymbol{arphi}$	certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	of a conservation easement on the
_	last day of the tax year	
		Held at the End of the Tax Year
á	Total number of conservation easements	2 a
t	Total acreage restricted by conservation easements	2 b
(	Number of conservation easements on a certified historic structure included in (a)	2 c
c	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic	
	structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the tax year ►	e organization during the
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	violations
3	and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing con	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservations.	ation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 17 and section 170(h)(4)(B)(ii)?	0(h)(4)(B)(ı) Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expensinclude, if applicable, the text of the footnote to the organization's financial statements that describes conservation easements	se statement, and balance sheet, and the organization's accounting for
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	ther Similar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or research in fur in Part XIII, the text of the footnote to its financial statements that describes these items	ement and balance sheet works of therance of public service, provide,
ŀ	o If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue stateme historical treasures, or other similar assets held for public exhibition, education, or research in further following amounts relating to these items	nt and balance sheet works of art, ance of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1	▶\$
	(ii) Assets included in Form 990, Part X	> \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financ amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
á	Revenue included on Form 990, Part VIII, line 1	▶ \$
. t	Assets included in Form 990, Part X	

Part III Organizations Maintaining Co	ollections of	Art, Histori	cal Treasures, or	r Other Similar Ass	sets (c	ontınu	ed)
3 Using the organization's acquisition, accession items (check all that apply)	on, and other rec	ords, check any	of the following that	are a significant use of it	s collect	ion	
a Public exhibition	•	di 🔲 Loan ore	xchange programs				
b Scholarly research	•	e 🔲 Other _	··				
c Preservation for future generations							
4 Provide a description of the organization's co Part XIII	llections and exp	lain how they fi	urther the organization	n's exempt purpose in			
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma					Yes		No
	gements. Cor n Form 990, f	nplete if the Part X, line 2	organization ansv	wered 'Yes' on Form	า 990,   	Part I\	/, 
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?	an or other intern	nediary for cont	ributions or other asse	ets not included	Yes	Г	No
b If 'Yes,' explain the arrangement in Part XIII a	and complete the	following table					
					Amount		
c Beginning balance							
d Additions during the year							
e Distributions during the year				<del></del>			
f Ending balance							<u> </u>
2 a Did the organization include an amount on Fe				- 1		 	No
b If 'Yes,' explain the arrangement in Part XIII	Check here if the	explanation ha	is been provided on P	art XIII		٠٠٠ [	╛
Dat V   Endoument Funds Complete	of the evenin	otion analys	and Waster Farm	000 Dent IV line 4	-		
Part V   Endowment Funds. Complete							11-
1 a Beginning of year balance	rent year	(b) Prior year	(c) Two years back	(d) Three years back	(e) F	our years	раск
b Contributions		<del></del>	<del></del>	<del></del>	<del></del>		
<del></del>		<del></del>	<del></del>	<del></del>	<del> </del>		
c Net investment earnings, gains, and losses	<u></u>						
d Grants or scholarships					<u> </u>		
e Other expenditures for facilities and programs					1		
f Administrative expenses					- <del> </del>		
g End of year balance					_!		
2 Provide the estimated percentage of the curr	ent year end bala	ince (line 1g, co	olumn (a)) held as				
a Board designated or quasi-endowment		_ * -					
b Permanent endowment	~ <sup>%</sup>						
c Temporarily restricted endowment	old sough 100%						
The percentages on lines 2a, 2b, and 2c sho							
3 a Are there endowment funds not in the posses	ssion of the organ	nization that are	held and administere	ed for the	Г	Yes	No
organization by  (i) unrelated organizations					. 3a(i)	163	140
(ii) related organizations							
b If 'Yes' on line 3a(ii), are the related organiza							<del></del>
4 Describe in Part XIII the intended uses of the		•			.1_05_1		<u> </u>
Part VI Land, Buildings, and Equipm			<u> </u>	<del></del>			
Complete if the organization an		on Form 990	Part IV line 11	See Form 990 P	art X I	ne 10	,
Description of property	(a) Cost or of		(b) Cost or other	(c) Accumulated		Book va	
1 a Land	(investr		basis (other)	depreciation			<del></del>
b Buildings				X- 75 1 - 5A		003	
c Leasehold improvements			923,082.			923	,082.
d Equipment	<del></del>	<del></del>	<del></del>			<del></del>	
e Other	<del></del>	<del></del>					
Total. Add lines 1a through 1e (Column (d) must e		Part X column	(R) line 10c )			023	,082.
BAA	-quai i 01111 330, 1	a.c.n, column	(2), mio 100 /		lule D (F		

Part VII Investments — Other Securities.	Yes' on Form 990	Part IV, line 11b See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	<del></del>	
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		<u> </u>
(F)		
(G)		
(H)		
<u>(l)</u>	<u> </u>	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12) >	<u> </u>	ACT OF THE STATE O
Part VIII Investments - Program Related.	'Yes' on Form 990	Part IV, line 11c. See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)	(1)	
(2)	<del> </del>	
(3)	<del> </del>	
(4)	<del> </del>	
(5)	<del>                                     </del>	
(6)	<del></del>	
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)		重新智見者等當勘看 今年以後軍
Dort IVE Other Assets		Port IV Ivan 14 d Con Form 000 Port V Ivan 45
Complete if the organization answered	Yes on Form 990, escription	Part IV, line 11d. See Form 990, Part X, line 15.
(1)	sacription	(a) Book value
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		<del></del>
Total. (Column (b) must equal Form 990, Part X, column (B)	line 15 )	
Part X Dother Liabilities.	and to j	
Complete if the organization answered 'Yes' on	Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25
(a) Description of liability	(b) Book value	B R Sa Control of the
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 25).	. •	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the foo	otnote to the organization's fir	
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote		

Part XIII Supplemental Information.

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

Amounts included on Form 990, Part IX, line 25, but not on line 1.

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

BAA

Schedule **D** (Form 990) 2016

1,197,468

1,197,468

SCHEDULE		į	ants and Oth	er Assistance t	o Organization	ń		OMB No 1545-0047
(Form 990)		Gov	ernments, ar	nd Individuals i	Governments, and Individuals in the United States	ıtes	•	2016
		Complet	te if the organizatio	n answered 'Yes' on F	Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ▼ Attach to Form 990.	l or 22.	<u>-</u>	Silding of man
Department of the Treasury Internal Revenue Service	!	► Information	about Schedule I (	Form 990) and its instr	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	ov/form990.		open to rubite;
, ~							Employer identification number	cation number
TEXAS CONSTRUCT	ION ASSOCIATION	CONSTRUCTION ASSOCIATION	0000				74-2885694	74
raitis General IIII	Ormation on Gra	alles and Assista	anue					
1 Does the organization the selection criteria	on maintain records to i used to award the gr	o substantiate the am rants or assistance? .	nount of the grants o	r assistance, the grantee	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	s or assistance, and		X Yes No
2 Describe in Part IV ti	the organization's pro	cedures for monitorin	ng the use of grant fu	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States				
Part II*] Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Other Assistan	ce to Domestic	Organizations a at received more	and Domestic Gov e than \$5,000. Part	<b>Grants and Other Assistance to Domestic Organizations and Domestic Governments.</b> Complete if the organization answere Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	te if the organization if additional space	on answered 'Ye e is needed.	s' on
(a) Name and address of organization or government	s of organization ment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
(2)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	}           							
(3)								
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
(4)								
<u></u> ( <u>5</u> )								
1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							,
<u>(1)</u>								
		,						
(8)								
	1						1	
<ul><li>2 Enter total number or</li><li>3 Enter total number or</li></ul>	of section 501(c)(3) are of other organizations	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	izations listed in the	line 1 table				
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	duction Act Notice,	see the Instructions	for Form 990.		TEEA3901 11/03/16	11/03/16	Schedu	Schedule I (Form 990) (2016)
								•

Schedule I (Form 990)	Schedule I (Form 990) (2016) TEXAS CONSTRUCTION ASSOCIATION	CTION ASSOCIA	LION		7	74-2885694	Page 2
Part III Grants can be c	Part III Grants and Other Assistance to Domestic Individucan be duplicated if additional space is needed.	Jomestic Individue is needed.	nals. Complete if the	e organization ansv	vered 'Yes' on Form 990	uals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III	
(a) Type	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
-							
5							
က							
4							
ស							
9							
7							
Part IV Suppler	Supplemental Information. Provide the information	le the information	required in Part I, lir	ne 2; Part III, colum	required in Part I, line 2; Part III, column (b); and any other additional information.	litional information.	

THE ASSOCIATION MAKES CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS BASED ON BOARD DISCRETION.

Pt I Line 2

#### SCHEDULE J (Form 990)

**Compensation Information** 

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

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

Open to Public Inspection

Name of the organization
TEXAS CONSTRUCTION ASSOCIATION

Employer identification number

74-2885694

Part	Questions Regarding Compensation		$\neg$	Yes	No
1 a (	Check the appropriate box(es) if the organization provided any of the follow VII, Section A, line 1a Complete Part III to provide any relevant information	n redarding these items	- X	- 103 - 121 - 1	
		ing allowance or residence for personal use	. ₹.	1. 1.	- h s
	닏	nents for business use of personal residence	Ť		, ,
		th or social club dues or initiation fees		' [	-
		onal services (such as, maid, chauffeur, chef)	. '		-
	Discretionary spending account	onal services (such as, maid, chadhedr, cher)	`	1	·
b	If any of the boxes on line 1a are checked, did the organization follow a wr reimbursement or provision of all of the expenses described above? If 'No.	itten policy regarding payment or complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing trustees, and officers, including the CEO/Executive Director, regarding the	expenses incurred by all directors, items checked in line 1a?	2		
	Indicate which, if any, of the following the filing organization used to establish CEO/Executive Director. Check all that apply Do not check any boxes for establish compensation of the CEO/Executive Director, but explain in Part	methods used by a related organization to		ا ا ا ا	, , , , ,
	X Compensation committee Writt	en employment contract	人	4, 3	
	Independent compensation consultant Com	pensation survey or study	75	Ĺ	E.C.
	Form 990 of other organizations	oval by the board or compensation committee		. ·	Ž,
4	During the year, did any person listed on Form 990, Part VII, Section A, lin organization or a related organization	e 1a, with respect to the filing			
	Receive a severance payment or change-of-control payment?		4 a		X
b	Participate in, or receive payment from, a supplemental nonqualified retire	ment plan?	4 b		X
С	Participate in, or receive payment from, an equity-based compensation are	angement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable am	ounts for each item in Part III	1020	في السار	进入本.
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must c			,	歌
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organ contingent on the revenues of	zation pay or accrue any compensation		: ;	
	The organization?		5 a		
b	Any related organization?		5 b		
	If 'Yes' on line 5a or 5b, describe in Part III		變		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organ contingent on the net earnings of	1 *	書	7 12 E	1. T.
а	The organization?		6 a		<u> </u>
b	Any related organization?		6 b		
	If 'Yes' on line 6a or 6b, describe in Part III		·	* ) <u>*</u>	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organ payments not described on lines 5 and 6? If 'Yes,' describe in Part III	zation provide any nonfixed	7		
	Were any amounts reported on Form 990, Part VII, paid or accrued pursu to the initial contract exception described in Regulations section 53 4958-4 If 'Yes,' describe in Part III	1(a)(3)?	8		
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption section 53 4958-6(c)?	on procedure described in Regulations	9		
BAA	For Paperwork Reduction Act Notice, see the Instructions for Form 9	90. Schedule J (	Form	າ 990)	2016

Page 2

Schedule J (Form 990) 2016 TEXAS CONSTRUCTION ASSOCIATION

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation				
(A) Name and Title		(i) Base	(ii) Bonus & incentive compensation	(III) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(I)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
RAYMOND RISK	€	261,492.	90,000.	77,168.	.0	0	428,660.	0 -
1 PRESIDENT/CEO	(1)		0.		0.	0.	.0	0.
	(i)							
2	(ii)							
	Ξ				1			
3	(ii)							
	Ξ	           	         	1	! ! !	           		
4	▣							
	Ξ		<del> </del>            	         		-           	 	
5	(ii)			į				
	ε	- <del> </del>	         	1 1	         	 	;           	
9	(ii)			į				
	ε	             	             	1 1	         	           	1 1	1 1 1
7	<u>(ii)</u>	- 1						
	Ξ	         	 					
8	(ii)							
	Ξ	<del></del>	             					
6	<b>(E)</b>							
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	ε	) }						
12	(ii)							
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BAA			TEEA4102 08/19/16				Schedule.	Schedule J (Form 990) 2016
							, , , , , , , , , , , , , , , , , , , ,	

i

# Part III Supplemental Information

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

Schedule J (Form 990) 2016

#### **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.

OMB No 1545-0047 2016

Open to Public

Department of the Treasury Internal Revenue Service

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

	<u>at</u>	201 202 203
Name of the organization		Employer identification number
TEXAS CONSTRUCT	TION ASSOCIATION	74-2885694
	THE ASSOCIATION IS COMPOSED OF 17 MEMBER TRADE ASSOCIATIONS HAVE OVER 1,200 SUBCONTRACTORS AN MEMBERS REPRESENT OVER 175,000 EMPLOYEES. AN A 1,200 COMPANIES ARE DIRECT MEMBERS OF THE ASSOC	D SUPPLIERS AS THEIR DDITIONAL APPROXIMATELY
Pt VI, Line 6	BENEFIT PROGRAMS.	
Pt VI, Line 7a	THE MEMBER ASSOCIATIONS ELECT REPRESENTATIVES TANY CHANGES TO THE BYLAWS MUST BE APPROVED BY	
Pt VI, Line 7b	ASSOCIATIONS. THE TREASURER IS PROVIDED A COPY OF THE FORM 99	0 FOR REVIEW PRIOR TO ITS
Pt VI, Line 11k	FILING. THE PRESIDENT AND THE BOARD ARE REQUIRED TO DI	SCLOSE ANY CONFLICTS OF
Pt VI, Line 120	INTEREST. THE EXECUTIVE COMMITTEE SERVES AS THE COMPENSAT UP OF INDEPENDENT PERSONS. THEY REVIEW AND DETE	
Pt VI, Line 15a	THE PRESIDENT/CEO. THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLIC	T OF INTEREST POLICY AND
Pt VI, Line 19	FINANCIAL STATEMENTS ARE AVAILABLE TO MEMBERS	UPON REQUEST.

(g) Sec 512(b)(13) controlled entity? Schedule R (Form 990) 2016 ŝ × (f)
Direct controlling
entity Open to Public Inspection OMB No 1545-0047 2016 Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Employer identification number (f) Direct controlling entity 74-2885694 (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Part I Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33 Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. (d) Total income Related Organizations and Unrelated Partnerships (d) Exempt Code section TEEA5001 09/09/16 (c)
Legal domicile (state or foreign country) 527 (c)
Legal domicile (state or foreign country) (b)
Primary activity X POLITICAL ACTION (b) Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. COMMITTEE (a) Name, address, and EIN (if applicable) of disregarded entity (1) TEXAS CONSTRUCTION ASSOCIATION PAC - 1011 SAN JACINTO BLVD #330 (a) Name, address, and EIN of related organization TEXAS CONSTRUCTION ASSOCIATION - AUSTIN, TX 78701-Department of the Treasury Internal Revenue Service Name of the organization 05-0634633 SCHEDULE R (Form 990) Part II \_\_\_1( 1 1 1 ଫ୍ର €, <u>|@</u> ල; ন্ত

Schedule R (Form 990) 2016 TEXAS CONSTRUCTION ASSOCIATION

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections		f total ne_	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?		Percentage ownership
		country)		512-514)				Yes No	1 1	Yes	S.	
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(2)												
				<del>_</del>	<del></del>							
(3)											_	
Part IV Identification o	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization a line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations re related	Taxable as	a Corporations treated as	on or Trust (	complete if the or trust du	he organizaring the tax	tion answel	a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, ons treated as a corporation or trust during the tax year.	rm 990, Pa	art IV,	
(a) Name, address, and EIN of related organization	if related organization		(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling	Type of entity (C corp., S corp.	<u> </u>	Φ	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	)(13) entity?
				country)	entity	or trust	6				Yes	S.
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Schedule R (Form 990) 2016 TEXAS CONSTRUCTION ASSOCIATION

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

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1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(c) Amount invo	(b) (c) Transaction Amount invol
	splo	insaction thresh	If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
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		≥	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
ON SOX			

Schedule R (Form 990) 2016 TEXAS CONSTRUCTION ASSOCIATION

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

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

Name, address, and Ell v of earlily   Primary activity   Legal commons   Primary activity   Primary activi	(a)	9	(b) (b) (c)	( <del>p</del> )	(9)	<u> </u>		(8)	æ		_		3
From is under   From is unde	Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	_	Are all pa section 501(c)		Share of total income	Share of end-of-year assets	Dispropor tionate			ral or R	ercentage ownership
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				sections 512-514)	Yes	2			_	- 1	_	٩ N	
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Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.



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