For Paperwork Reduction Act Notice, see the separate Instructions. DAA

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047 2017 Open to Public Inspection

Form **990** (2017)

<u> </u>	For the	2017 calendar year, or tax year beginning , and ending				
\neg	Check if ap Address ch		rs,		D Employer	Identification number
╡	Name char	Doing business as AIA IOWA			42-0	920934
=	Maine Chai	Number and street (or PO box if mail is not delivered to street address)		Room/suite I	E Telephone	
	Initial return			<u> </u>	515-	244-7502
	Final return terminated					
\neg	Amended r	DES MOINES IA 50309			G Gross rece	eipts \$ 737,738
╣		r Name and address of principal officer		H(a) is this a group	n roturn for cu	bordinates? Yes X No
	Application	pending JESSICA REINERT		ri(a) is alis a group	p return to: St	
				H(b) Are all subor	rdinates incli	uded? Yes No
			Y 10	If "No," a	attach a list	(see instructions)
1	Tax-exem	npt status 501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1) or 5	27	1		
J	Website:	17170111 070		H(c) Group exem	ption numbe	r Þ
- K	Form of or		L Ye	ear of formation 19		M State of legal domicile IA
	art I	Summary				Oldico of logal controllo 2222
		Briefly describe the organization's mission or most significant activities:				
Activities & Governance	I.	PROFESSIONAL MEMBERSHIP ASSOCIATION FOR ARCHITECTS STATE OF IOWA. Check this box if the organization discontinued its operations or disposed of more sumber of voting members of the governing body (Part VI, line 1a)				гн е 13
Se		Number of independent voting members of the governing body (Part VI, line 1b)			4	13
į	1	Fotal number of individuals employed in calendar year 2017 (Part V, line 2a)			5	5
妄	1	Total number of volunteers (estimate if necessary)	6	100		
⋖	1	Fotal unrelated business revenue from Part VIII, column (C), line 12	7a	15,606		
		Net unrelated business taxable income from Form 990-T, line 34	7b	13,000		
	l Di	vet unrelated business taxable income from Form 990-1, line 34		Prior Year		Current Year
_	8 0	Contributions and grants (Part VIII, line 1h)				0
Ę	9 F	Program service revenue (Part VIII, line 2g)	,710	668,066		
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 70) RECEIVED	,257	4,417		
&	11 0	Other revenue (Part VIII, column (A), lines 5, 4, and 707		,636	55,158	
					,603	727,641
		Fotal revenue – add lines 8 through 11 (must equal Part VI) Column (A), (in) 12018	<u> </u>		,550	
		Grants and similar amounts paid (Part IX, column (A), lines (1-3)	, 550	0		
		Benefits paid to or for members (Part IX, column (A), line 4)	- 1 ⊦	200	0.63	
es es	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 10)	-	288	,063	286,693
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)	ļ.,			<u>U</u>
Ž	· b1	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	-			
ш	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			,111	386,486
	18 7	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	⊢		,724	673,179
	19 F	Revenue less expenses. Subtract line 18 from line 12			,879	<u>54,462</u>
Net Assets or			}-	Beginning of Curro		End of Year
Sec	B 20	Total assets (Part X, line 16)	· -		,414	658,170
¥	E 21]	Total liabilities (Part X, line 26)			,159	150,453
		Net assets or fund balances. Subtract line 21 from line 20		453	, 255	507,717
	art II					
_ t	Inder per rue, corre	nalties of perjury, I declare that I have examined this return, including accompanying schedules are ect, and complete. Declaration of preparer (other than officer) is based on all information of which	nd statemer preparer h	nts, and to the bes as any knowledge	st of my kn	owledge and belief, it is
		- aprovi silenna			8/	1//8
Si	gn	Signature of officer			Date	• -
	ere	JESSICA REINERTE	EXECU	rive dir	ECTOR	2_
	_	Type or print name and title				·
_		Print/Type preparer's name Preparer's signature		Date	Check	ıf PTIN
Pa	id	JOHN A. SCHMIDT, CPA JOHN A. SCHMIDT, CPA		V3V18	self-em	ployed P00478173
_	eparer		P.C.		m's EIN	42-1104473
	e Only	1601 W LAKES PKWY STE 300	<u> </u>		IIIS EIN F	47-1104412
	· · · · ·	. WELL DEC MOTNES IN E0266		1		E1E_200 2270
_		Firm's address WEST DES MOINES, IA 50266		Į Ph	one no	515-288-3279
840		(> dicours this follow with the brendfor should above? Lead instructions)				

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D1 N/	Chastist of Demiired Cobodules
Part IV	Checklist of Required Schedules
1 41 6 7 1	Oncomist of Modalion Contraction

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	Γ		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
-	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	1	l	
	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	<u> </u>	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		X
		Fo	99	0 (2017)

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20Ь		
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		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			l
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1		
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	ł		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	ļ		
	disqualified persons? If "Yes," complete Schedule L, Part II	26	ļ	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		ĺ	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		•	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		1	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	l		. <i>.</i>
	complete Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	l		٠,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	l		٠.,
	or IV, and Part V, line 1	34	<u> </u>	X
35a		35a	-	X
b		l		ŀ
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	 	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		1
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	₩
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	1	.,	
_	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	Щ_

42-0920934 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 6 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1b 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return X 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) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? Х If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes." indicate the number of Forms 8282 filed during the year 7е Did the organization receive any funds, directly or 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? **7**f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g a If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 10a а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: 11 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11h 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13 Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c Did the organization receive any payments for indoor tanning services during the tax year? 14a

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2017) AMERICAN INSTITUTE OF ARCHITECTS. 42-0920934 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 13 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a X one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a The governing body? Х 8b **b** Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a with a taxable entity during the year? 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 16h organization's exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records 400 LOCUST ST, STE 100 JESSICA REINERT

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Form 990 (201	7) AMERICAN	INSTITUTE	OF	ARCHITECTS,	42-0920934	Page 7
Part-VII	Compensation	of Officers, Dire	ector	s, Trustees, Key E	mployees, Highest Com	pensated Employees, and
	Independent C	ontractors				

	Check if Schedule O contains a response or note to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W 21000 MIGG)	organization and related organizations
(1) MATT OSTANIK										
	4.00				1					
PRESIDENT	0.00	X		Х				0	0	0
(2) GARY VAN DYKE										
,, ==	2.00	İ]				
PRESIDENT-ELECT	0.00	X		Х				ol	0	0
(3) DANIELLE HERMANN		1				П				
(0, 212.12.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	2.00									
2ND VICE PRESIDENT	0.00	x		х				ol	0	0
(4) DAN DRENDEL	0.90	1				\dagger				
(4) DIEV DILLIVELL	2.00			1						
SECRETARY	0.00	$ _{\mathbf{X}}$		х				ol	0	0
(5) TONIA HOUSEHOLDE		1	t					- i		
(3) 101(17) 110002110221	2.00									
TREASURER	0.00	$ _{\mathbf{X}}$		x				ol	0	o
(6) MINDY AUST	0.00	+*	\vdash			\vdash				·
(O)MINDI ACCI	2.00	1	İ							
PAST PRESIDENT	0.00	x	1	x				ol	0	o
(7) ALAN WEISKAMP	0.00	+*	┢	1	\vdash	\vdash				•
(/)ALIAN WEISKAME	1.00					1				
DIRECTOR	0.00	$ _{\mathbf{X}}$			ļ			o	0	0
(8) DOUG FORESHOE	0.00	╁	\vdash	╫	╁	\vdash		0		
(6) DOUG FORESHOE	1.00	1								
DIRECTOR	0.00	$ _{\mathbf{x}}$						o	0	0
DIRECTOR WELC	0.00	+≏	├	<u> </u>	┢	Н		- U	<u>_</u>	
(9) KERRY WEIG	1 1 00									
7.7.7.CEO.D	1.00	١.,				1			^	_ ر
DIRECTOR	0.00	X	├	┢	┢	Н		0	0	0
(10) STEVE KING	1 1 00									
D.T.D.T.G.T.O.D.	1.00	\ _v			1				_	_
DIRECTOR	0.00	X	\vdash	\vdash	\vdash	\vdash		0	0	0
(11) CHRIS WAND	1									
	1.00								_	_
DIRECTOR	0.00	X	<u> </u>	<u> </u>				0	0	Form 990 (2017)

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
(A) Name and title	(B) Average hours per week (list any hours for	bo	x, unle icer a	Pos check ess pe	rson i	than o s both	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(12) JARROD SIEGEI	1									
ASSOCIATE DIRECTOR	1.00	x						0	0	0
(13) KELLI PASKER	t T									
ALLIED DIRECTOR	1.00	x						0	0	ď
(14) JESSICA REINI	RT	<u> </u>				ļ				
DIRECTOR DIRECTOR	40.00			v				107,845	0	10,145
EXECUTIVE DIRECTOR	0.00			Х				107,845	0	10,145
								,		
		ļ								
								1		
4. 6.1441	_				L.		Ļ	107,845		10,145
1b Sub-total c Total from continuation she	ets to Part VII,	Sect	ion	A			•			
d Total (add lines 1b and 1c) 2 Total number of individuals (ii	ncludina but not	lımıtı	ed to	thos	se lis	sted a	abov	107,845		10,145
reportable compensation from	n the organizatio	n 🕨	1					-		Yes No
 Did the organization list any fi employee on line 1a? If "Yes, For any individual listed on line 	" complete Sche	dule	J fo	r suc	ch in	dıvıdı	ual			3 X
organization and related orga individual 5 Did any person listed on line	inizations greate	r tha crue	n \$1 com	50,0 pens	00? satio	<i>If "Ye</i> n fro	es," m a	complete Schedule J for sun sun related organization of	ıch	4 X
for services rendered to the o		Yes,	" con	nplet	e Sc	hedu	ile J	I for such person		5 X
Complete this table for your fi compensation from the organ	ive highest comp nization. Report o	ens	ated ens	inde ation	pen	dent the c	contalen	idar year ending with or wit	<u>hin the organization's tax y</u>	ear.
Name an	(A) d business address					-	1	Descri	(B) ption of services	(C) Compensation
							_			
							-		*	
	<u> </u>						1		<u> </u>	
						-			·	<u> </u>
2 Total number of independent received more than \$100,000	contractors (inc of compensation	ludin on fro	g bu	t not	lımi ganı	ted to	otho n ▶	ose listed above) who	0	- 000

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (C) Unrelated (D) Revenue Total revenue exempt function excluded from tax under sections business revenue revenue 512-514 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f Program Service Revenue Busn. Code 541900 302,789 2a 302,789 ANNUAL CONVENTION 541900 297,606 297,606 b MEMBERSHIP DUES 611600 64,708 64,708 C MEETINGS 541900 2,963 2,963 INDUSTRY PUBLICATIONS f All other program service revenue 668,066 Total. Add lines 2a-2f \triangleright Investment income (including dividends, interest, 4,417 and other similar amounts) 4,417 Income from investment of tax-exempt bond proceeds ▶ 39,468 Royalties 39,468 (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) Þ d Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets other than inventor **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) ▶ 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 17,346 returns and allowances b Less: cost of goods sold b 10,097 7,249 249 c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 541800 11a ADVERTISING-ELECTRONIC MEDIA 8,357 8,35 b MISCELLANEOUS 900099 84 All other revenue 2016/1900 Total. Add lines 11a-11d 8,441 Total revenue. See instructions 727,641 365 361 15,606 346,674 Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must on Check if Schedule O contains a resp			mplete column (A).	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		J. G.	general expenses	
	and domestic governments. See Part IV, line 21				`
2	Grants and other assistance to domestic				
	ındıviduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			Í	
	individuals See Part IV, lines 15 and 16				`
4	Benefits paid to or for members			`	
5	Compensation of current officers, directors,				
	trustees, and key employees	117,991			
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 salanes and wages	138,139			
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	3,873			
9	Other employee benefits	7,663		<u> </u>	
10	Payroll taxes	19,027	·		
11	Fees for services (non-employees)				
a	Management	···· · · · · · · · · · · · · · · · · ·		<u> </u>	
b	Legal	6,380			
2	Accounting	15,000			
d	Lobbying Professional fundraising services. See Part IV, line 17			· · · · · · · · · · · · · · · · · · ·	
f	Investment management fees				-
g					
9	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	15,000		-	-
13	Office expenses	27,494			<u> </u>
14	Information technology	22,500			
15	Royalties				-
16	Occupancy	42,679			*
17	Travel	25,203			†·
18	Payments of travel or entertainment expenses	,			<u> </u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	171,496			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	4,242			
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)	as he cacal black in it is in	TOMORES IN		
а	COMMITTEE EXPENSE	33,573		_	
b	PRINTING & PUBLICATIONS	11,910	<u> </u>	<u></u>	
С	MISCELLANEOUS	5,274			<u> </u>
d	TELEPHONE	4,711		ļ	<u> </u>
е	•	1,024			
25	Total functional expenses. Add lines 1 through 24e	673,179	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 147,966 110,784 1 Cash-non-interest bearing 449,448 2 538,825 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. . 3 Complete Part II of Schedule L 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 7 Notes and loans receivable, net Inventories for sale or use 8,561 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D 10b 10c b Less accumulated depreciation Investments—publicly traded securities 11 11 12 Investments—other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 14 Intangible assets Other assets, See Part IV, line 11 15 15 658,170 597,414 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 7,126 17 18 Grants payable 18 137,033 140,499 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets Temporarily restricted net assets 28 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ \mathbf{X} complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 453,255 507,717 32 32 Retained earnings, endowment, accumulated income, or other funds

> 658,170 Form **990** (2017)

507.717

453,255

597,414

33

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

orm	990 (2017) AMERICAN INSTITUTE OF ARCHITECTS, 42-0920934			Pag	ge 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				\Box
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	27,	<u>641</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	73,	<u> 179</u>
3	Revenue less expenses Subtract line 2 from line 1	3		54,4	<u>462</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	53,	<u> 255</u>
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	5	07,	717
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual X Other MODIFIED C	CASH	<u>. </u>		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1	
	Schedule O			•	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			,	
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b]	_X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				v
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
ь	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		36		

Form **990** (2017)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ.

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

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

• S	ection 501(c)(4), (5), or (6) organizations: Complete Part III	•			
Name	e of organization AMERICAN INSTITUTE (OF ARCHITECTS,			ification number
D'a	IOWA CHAPTER ti-A Complete if the organization is exem	ent under section 501(c)	or is a section	42-09209	
1	Provide a description of the organization's direct and indire				711.
'	definition of "political campaign activities")	or political campaign doublines	(5555		
2	Political campaign activity expenditures (see instructions)			▶ \$	
3	Volunteer hours for political campaign activities (see instru	ictions)			
	Complete if the organization is exem)(3).		
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	t I-C Complete if the organization is exen	npt under section 501(c), except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribu	ited to other organizations for s	ection		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 En	ter here and on Form 1120-PO	L,		
	line 17b	_		▶ \$	
4	Did the filing organization file Form 1120-POL for this year				∐ Yes ∐ No
5	Enter the names, addresses and employer identification n				
	organization made payments For each organization listed	•			
	the amount of political contributions received that were pro			-	
	as a separate segregated fund or a political action commit	T	l		(a) Associated solution
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter -0-
(1)					
('')					
(2)					
\ - /					
(3)					
(-,					
(4)					
(5)					
					
(6)					
		<u></u>	L.—		

Schedule C (Form 990 or 990-EZ) 2017 - 7	MERICAN INSTIT	UTE OF ARC	CHITECTS,	42-0920934	Page 2
Part II-A Complete if the c	organization is exempt				tion under
address, EIN, e	nization belongs to an affili xpenses, and share of exc anization checked box A	ess lobbying expe	enditures)		er's name,
	on Lobbying Expendit		TITOL PROVISIONS 2	(a) Filing	/h) Affiliated
	ures" means amounts p			organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli			·		
b Total lobbying expenditures to infli	uence a legislative body (direc	ct lobbying)			
c Total lobbying expenditures (add l	nes 1a and 1b)				
d Other exempt purpose expenditure					
e Total exempt purpose expenditure					
f Lobbying nontaxable amount. Ente	er the amount from the followi	ng table in both			
If the amount on line 1e, column (a)	or (b) is: The lobbying non	taxable amount is:			
Not over \$500,000	20% of the amount				
Over \$500,000 but not over \$1,000,00		of the excess over \$5			
Over \$1,000,000 but not over \$1,500,0		of the excess over \$1		,	
Over \$1,500,000 but not over \$17,000		of the excess over \$1,5	500,000		
Over \$17,000,000	\$1,000,000				
 g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer 	*		-		
i Subtract line 1f from line 1c. If zer					
j If there is an amount other than ze	·	did the organization	file Form 4720		
reporting section 4911 tax for this		did tilo organization	1110 1 01111 4120		Yes No
		ng Period Under	section 501(h)	· · · · · · · · · · · · · · · · · · ·	1.00
(Some organizations th	at made a section 501(h)	election do not l	nave to complete	all of the five columr	ns below.
	See the separate in	structions for lin	es 2a through 2f.))	
	Lobbying Expenditu	res During 4-Yea	r Averaging Perio	d	
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount		. -			
b Lobbying ceiling amount		······································	· · · · · · · · · · · · · · · · · · ·		
(150% of line 2a, column (e))		<u> </u>			
c Total lobbying expenditures					
d Grassroots nontaxable amount		-			
e Grassroots ceiling amount (150% of line 2d, column (e))	11/2/42 14/2				
•	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	an allega a comme	" to State of Blench	<u> </u>	
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

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

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

c If "Yes," enter the amount of any tax incurred by organization managers under section 4912

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

 `Hai	(election under section 501(h)).	S NOT filed	Form	1 5768	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)	
		Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local	1			
	legislation, including any attempt to influence public opinion on a legislative matter or	1		,	
	referendum, through the use of:	1 (1)			
а	Volunteers?			`	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			·	
С	Media advertisements?				
d	Mailings to members, legislators, or the public?			· ·	
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
а	Direct contact with legislators, their staffs, government officials, or a legislative body?				

d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	<u> </u>
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	15,000
t	Carryover from last year	2b	-1,089
c	Total	2c	13,911
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	14,880
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
_5	Taxable amount of lobbying and political expenditures (see instructions)	5	-969

Part IV Supplemental Information

i Other activities?

j Total. Add lines 1c through 1i

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

Part IV Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization

AMERICAN INSTITUTE OF ARCHITECTS. IOWA CHAPTER

Employer identification number 42-0920934

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

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

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS THE ANNUAL BUDGET FOR THE ORGANIZATION, INCLUDING THE DUES STRUCTURE, IS PREPARED BY THE GOVERNING BODY AND PRESENTED TO THE MEMBERSHIP FOR APPROVAL BY MAJORITY VOTE AT THE ANNUAL MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE RETURN PREPARER PROVIDES AN INITIAL DRAFT OF THE COMPLETED FORM 990 TO MANAGEMENT FOR REVIEW AND EDITING. UPON COMPLETION OF MANAGEMENT'S REVIEW,

42-0920934

A FINAL DRAFT OF FORM 990 IS PROVIDED TO THE EXECUTIVE COMMITTEE OF THE BOARD. UPON RESOLUTION OF COMMENTS BY THE EXECUTIVE COMMITTEE, IF ANY, THE FINAL FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD FOR APPROVAL AND THEN FILED WITH THE IRS.

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

ALL AFFECTED INDIVIDUALS MUST REVIEW AND SIGN THE CONFLICT OF INTEREST

POLICY FOR THE ORGANIZATION. THE AFFECTED INDIVIDUALS MUST UPDATE AND

RESUBMIT A POLICY ACKNOWLEDGEMENT ANNUALLY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE PROCESS FOR SETTING COMPENSATION OF THE ORGANIZATION'S EXECUTIVE
DIRECTOR INCLUDES FORMAL REVIEW AND APPROVAL BY THE OFFICERS, USE OF
COMPARABLE COMPENSATION DATA FROM SURVEYS OF SIMILARLY QUALIFIED PERSONS IN
COMPARABLE POSITIONS, AND CONTEMPORANEOUS DOCUMENTATION OF DELIBERATIONS
AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT. ALL OTHER OFFICERS
OF THE ORGANIZATION SERVE IN A VOLUNTEER CAPACITY WITHOUT COMPENSATION.
THE ORGANIZATION HAS NO KEY EMPLOYEES AS DEFINED BY THE IRS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
ITS FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE GENERAL PUBLIC.
SUCH DOCUMENTS ARE, HOWEVER, MADE AVAILABLE FOR REVIEW AT THE
ADMINISTRATIVE OFFICE OF THE ORGANIZATION TO MEMBERS IN GOOD STANDING WHO
SO REQUEST.

FORM 990, PART XII - ADDITIONAL INFORMATION

Name of the organization

AMERICAN INSTITUTE OF ARCHITECTS,

42-0920934

LINE 1, ACCOUNTING METHOD:

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

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