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990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2017

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

Open to Public

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection ernal Revenue Service 2017, and ending For the 2017 calendar year, or tax year beginning , 20 D Employer identification number C Name of organization Texas Panhandle Builders Association Check if applicable Doing business as Address change 75-0949942 Number and street (or P O. box if mail is not delivered to street address) Name change E Telephone number Initial return 5601 Enterprise Circle (806)353 - 3565City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Amarillo, TX 79106 Amended return G Gross receipts \$ 642,464. Application pending F Name and address of principal officer H(a) Is this a group return for subordinates? Yes X No H(b) Are all subordinates included? Tes No Lew Bradshaw, 5601 Enterprise Circle, Amarillo, **区** 501(c) (If "No," attach a list (see instructions) 501(c)(3) 6) **◄** (insert no) ☐ 4947(a)(1) or Tax-exempt status: Website: ▶ www.tpba.org H(c) Group exemption number > Form of organization X Corporation Trust Association [L Year of formation 1947 M State of legal domicile TX Part I Briefly describe the organization's mission or most significant activities: Promotion and education in the area of home building. Activities & Governance Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 18 Number of independent voting members of the governing body (Part VI, line 1b) 4 18 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 4 Total number of volunteers (estimate if necessary) 6 700 Total unrelated business revenue from Part VIII celumn (C) in 7a 53,988. Net unrelated business taxable income from Form 990 1. In a -6,670. **Prior Year Current Year** Contributions and grants (Part VIII, line MAY .1.8.2018. Program service revenue (Part VIII, line 29) 305,310 324,267. Investment income (Part VIII, column (A), lines 3.4 10 102,274 68,188. Other revenue (Part VIII, column (A), lines 5. 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 407,584 392,455. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 31,859 6,000 Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 138.715 142,792 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 257,493 237,047. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 428,067. 385,839. Revenue less expenses. Subtract line 18 from line 12 19 -20,483. 6,616. **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 483,202 646,644. 21 Total liabilities (Part X, line 26) ¹235,545 392,371. 22 Net assets or fund balances. Subtract line 21 from line 20 247,657. 254,273. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete (6) ther than officer) is based on all information of which preparer has any knowledge. 5-10-18 Sian Here Executive Officer Lew Bradshaw, Type or print name and title Print/Type preparer's name Paid Check I if Ronald W Meyer self-employed P00082589 Preparer Firm's name ► Ronald W Meyer PLLC Firm's EIN ► 20-5246709 **Use Only** Firm's address ► 401 W 15TH ST, Suite 850 Phone no (512) 476-4511

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions. BAA

X Yes No

Form **990** (2017)

REV 12/05/17 PRO

Part	art III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III		 X
1			
	Promotion and education in the area of home building.		
2	2 Did the organization undertake any significant program services during the year wi	uch were not listed on the	
2	prior Form 990 or 990-EZ?	· · · · · · · · · · · · · · · · · · ·	₩ No
	If "Yes," describe these new services on Schedule O.	i i i i i i i i i i i i i i i i i i i	<u> </u>
3		t conducts, any program	
	services?	· · · · · · · · □Yes	⊠ No
	If "Yes," describe these changes on Schedule O.		
4	Total and organization of program out the description for each of its till of		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the	amount of grants and allocations to	others,
	the total expenses, and revenue, if any, for each program service reported.		
40	4a (Code:) (Expenses \$including grants of \$	\ (Payonus ¢	
74	Directory - Compilation of members and services offered) (neveride \$	_ 3
	various contractors and subcontractors. Distributed to	211	
	members and associates.	.9.4.4	

	Ab (Code) \(\((Fyronoog \text{\text{(Fyronoog \text{(Fyronoog \text{(Fyr	\/Dayanya ¢	
4b	· · · · · · · · · · · · · · · · · · ·		
	Newsletter - Distributed monthly to members and associate Promotes news and advertising concerning the area's built	es.	
	environment.		
	GIVII OIMOIL.		

4c	4a (Code) (Expenses \$ including grants of \$	\(\(\mathbb{P}\)\(\mathbb{O}\)\(\mathbb{O}\)\(\mathbb{O}\)	
40	, , , , , , , , , , , , , , , , , , ,		- ⁾
	Parade - Annual showcase of newly constructed homes to educate and inform the public on the newest innovations		
	by the construction industry.	<u>useu</u>	
	by the construction rhadsery.		

	44.00		
4d		.	
4e	(Expenses \$ including grants of \$) (Revenue \$ 4e Total program service expenses ▶) See Statement	·
70	re real program control expended F		

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Form 990 (2017) Part IV **Checklist of Required Schedules** No Yes Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." 1 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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, 5 × 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 6 × 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." 8 × Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 9 custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or 9 × 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 If the organization's answer to any of the following questions is "Yes." then complete Schedule D. Parts VI. 11 VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a × Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more 11b × Did the organization report an amount for investments—program related in Part X. line 13 that is 5% or more × 11c Did the organization report an amount for other assets in Part X. line 15 that is 5% or more of its total assets 11d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e × Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X... 11f × 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 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 × Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.... 13 × 14 a Did the organization maintain an office, employees, or agents outside of the United States? 14a × 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 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 × Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 17 X

Form 990 (2017)

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X

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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Part	V Checklist of Required Schedules (continued)			
			Yes	No
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b or	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		×
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	-22	×	
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		×
2-10	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			<u> </u>
	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		×
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		×
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	-		
	Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	×	<u></u>
		Forn	n 990	(2017)

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	Check if Schedule O contains a response or note to any line in this Part V	···	<u> </u>	
4			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		į	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	×	
Za		i		
b	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b		
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	×	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	×	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-02	-	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1	ł	
	account)?	4a	1	×
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).	' I		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		1	
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			1
а	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		_X
b c	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
Ū	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	1	1	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	i 1		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	ı j		
a b	Gross income from members or shareholders			
	against amounts due or received from them.)		l	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		l	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	ľ	
	the organization is licensed to issue qualified health plans		Ì	
С	Enter the amount of reserves on hand			
14a		14a		×
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		l

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI			
Secti	on 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 18			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
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	_	×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5_		×
6	Did the organization have members or stockholders?	_6_	_×	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	×	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	_×_	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Did the agreement in hear level shorters broughts as offlicted.	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		×
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		<u> </u>
11a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a		×
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	اــــــا
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		×
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		×
13	Did the organization have a written whistleblower policy?	13		×
14	Did the organization have a written document retention and destruction policy?	14		×
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?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b		×
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		×
р	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			
Cook:	organization's exempt status with respect to such arrangements?	16b		L
3ecti	on C. Disclosure 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 available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19 20	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.		-	/, and
20	State the name, address, and telephone number of the person who possesses the organization's books and release Bradshaw, 5601 Enterprise Circle, Amarillo, TX 79106 (806)353-3565	cords	-	

T	$\Delta \Delta \Delta \Delta$	(2017)

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

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

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

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

☐ Check this box if neither the organization	on nor any relate	d org	aniz	atic	n c	ompe	ensa	ited any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Former Highest c employee Control Highest c employee Control Highest c employee Institution Institution Institution Institution Institution Institution		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
		itee	ustee			ensated				
(1) Lew Bradshaw Executive Officer	40.00			×				70,000.	0.	0.
(2) Chris Lyons President	2.00	×		×				0.	0.	0.
(3) Brad Stark 1st Vice President	2.00	×		×				0.	0.	0.
(4) Raymond Roberts 2nd Vice President	2.00	×		×				0.	0.	0.
(5) Ross Macon Treasurer	2.00	×		×				0.	0.	0.
(6) Scott Allison Director	1.00	×						0.	0.	0.
(7) Chance Beasley Director	1.00	×						0.	0.	0.
(8) Brennan Connally Director	1.00	×						0.	0.	0.
(9) Glenn Crowder Director	1.00	×						0.	0.	0.
(10) Tim DeCeuster Director	1.00	×						0.	0.	0.
(11) Terry Dickerson Director	1.00	×						0.	0.	0.
(12) Diana Fuller Director	1.00	×						0.	0.	0.
(13) JT Laramore Director	1.00	×						0.	0.	0.
(14) Alason Moorhead Director	1.00	×						0.	0.	0.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted	office office or direct	iot ch unles	Position neck more than as person is both d a director/trus Highest compensated of a director May employee			h an stee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)		Esti amo o comp froi orgai	(F) mated ount of ther ensation the nizatio	f on on
	line)	ustee	trustee		/ee	npensated					organ	ızatıor	าร
(15) Nathan Morrow Director	1.00	×						0.		0.			0.
(16) Joseph Peterson Director	1.00	×						0.		0.			
(17) Terry Rich Director	1.00							0.		0.			0.
(18) Henry Wall	1.00												0.
Director (19)		_	\vdash					0.	<u> </u>	0.			0.
(20)													
(21)													
(22)		-		-			ļ			+			
(23)							-			-			
(24)													
(25)									 				
1b Sub-total	art VII, Sectio	n A					>	70,000.		0.			0.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including reportable compensation from the org 	but not limited) W		ore than \$10		of		0.
3 Did the organization list any former		tor o	r tr	icto		kov e	mn	loves or high	ost comper	neated		Yes	No
employee on line 1a? If "Yes," comple	te Schedule J	for su	ıch i	ındi	vidu	ıal .					3		×
4 For any individual listed on line 1a, is organization and related organization													
individual	 re or accrue co							 related organiz	 ation or ind	 ividual	4		×
for services rendered to the organizati											5		×
Complete this table for your five highe compensation from the organization. I year.													 :ax
(A) Name and business	address							(B) Description of so	ervices	С	(C) ompens	atıon	
													
Total number of independent contra received more than \$100,000 of compe							th	ose listed abo	ove) who				

Par	VIII	Statement of Revo						
		Check if Schedule C	O contains a res	ponse or note to				· · · · · · · · · · · · · · · · · · ·
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns	s 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .						
A, (C	Fundraising events .			[Ì		
랿	ď	Related organizations			{			
Sim	е	Government grants (cor						
utio er (f	All other contributions, g		ļ]	Ì		
를 돌 -		and similar amounts not inc	<u> </u>	L				
Contributions, and Other Sim	g	Noncash contributions inclu			L	}		
	<u>h</u>	Total. Add lines 1a-1	<u> </u>	Business Code	 			
Program Service Revenue	20	Mambanahin Dua	-		40.070			
ě	2a	Membership Due Parade of Home		561000 900099	48,879.	48,879.	0.	0.
8	b	Advertising	:5	541800	132,510. 29,925.	108,666.	23,844. 29,925.	0.
Š	d	Home Show		900099	62,946.	62,946.	29,923.	0.
ı S	e	Golf Tournamen	+	900099	23,815.	23,815.	0.	0.
grai	f	All other program ser		300033	26,192.	25,973.	219.	0.
Po	9	Total. Add lines 2a-2			324,267.	23,313.	217.	<u> </u>
	3	Investment income			321/2071			
		and other similar amo		▶	8,297.	0.	0.	8,297.
	4	Income from investmen	nt of tax-exempt b	ond proceeds ▶				
	5	Royalties						, , - , , ,
			(ı) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses				1		
	С	Rental income or (loss)						
	d	Net rental income or		▶				
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
	l _	assets other than inventory		309,900.		j		
	b	Less: cost or other basis	1			1		
		and sales expenses .	ļ	250,009.			ļ	
	C	Gain or (loss)		59,891.		······		
	d	Net gain or (loss) .		· · · · •	59,891.	59,891.	0.	0.
Other Revenue	8a	Gross income from fuevents (not including \$	undraising					
er Re		of contributions reported See Part IV, line 18 .						
돌	b	Less: direct expenses	s b					
		Net income or (loss) f Gross income from ga	aming activities.					
		See Part IV, line 19 .						
		Less: direct expenses						
		Net income or (loss) f		ivities ▶				
	IVa	Gross sales of in returns and allowance						
	.	Less: cost of goods s						
		Net income or (loss) f						
		Miscellaneous F		Business Code				
	11a							
	b							
	c							
	d	All other revenue .						
	e	Total. Add lines 11a-		· •				
	12	Total revenue. See		1	392,455.	330,170.	53,988.	8,297.

	IX Statement of Functional Expenses				
Section	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , 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 and domestic governments. See Part IV, line 21	1,000.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign	5,000.			
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	70,000.			
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	53,842.			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	9,189.			
10	Payroll taxes	9,761.			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting	13,315.			
d	Lobbying			 	
e f	Investment management fees			 	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)	4,200.			
12 13	Advertising and promotion Office expenses	14 005			
14	Office expenses	14,925. 6,012.			
15	Royalties	0,012.			
16	Occupancy	12,650.			
17	Travel	44,314.		 	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	124,150.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	461.			
23	Insurance	3,790.			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				;
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Charitable donations	1,250.			
b	Community involvement	2,050.			
С	Education	45.			
d	Miscellaneous	4,805.			
е	All other expenses	5,080.		ļ	
25_	Total functional expenses. Add lines 1 through 24e	385,839.		<u> </u>	
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)				

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 2,557. 8,765. 1 2 2 135,429. 69,699. 3 3 4 34,738. 50,661. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 8 8 9 Prepaid expenses and deferred charges . . . 11,947. 9 4,270. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 30,834. 1,907. b Less: accumulated depreciation 10b 28,927. 2,369. 10c 113,513. 11 105,199. 11 Investments—other securities. See Part IV, line 11 12 12 13 Investments—program-related. See Part IV, line 11 13 14 14 15 184,755. 404,037. 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 483,202. 16 646,644. 17 17 7,512. 3,764. 18 18 19 45,528. 19 36,300. 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities 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 . . . 23 352,307 182,505. 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 26 26 235,545. 392,371. Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 142,458. 27 27 140,760. 28 28 29 105,199. 29 113,513. Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 32 Retained earnings, endowment, accumulated income, or other funds . 32 33 247,657. 254,273. 33 34 Total liabilities and net assets/fund balances 646,644. 483,202. 34 Form 990 (2017)

Page	1	2
0.40		

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	92,4	55.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	85,8	39.
3	Revenue less expenses. Subtract line 2 from line 1	3		6,6	516.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	47,6	57.
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	2	54,2	273.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>	<u></u>	
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_	1	1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	וו	1	l i
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				×
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled or			
	reviewed on a separate basis, consolidated basis, or both:		1	1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	1		
	separate basis, consolidated basis, or both:				1
	Separate basis Consolidated basis Both consolidated and separate basis				[i
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o		1	,	.
	of the audit, review, or compilation of its financial statements and selection of an independent according to the control of the selection of an independent according to the control of the selection of the sele		2c	×	ļ
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain in	'		[i
_	Schedule O.	6			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	torn in	ı		
	the Single Audit Act and OMB Circular A-133?		3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		- 1		[
	required addit or addits, explain why in schedule O and describe any steps taken to undergo such a	uuiis.	3b	L	L

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 2017

Open to Public

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.

Inspection

If the c	organization answered "Yes	," on Form 990, Part IV, line 3, or For	m 990-EZ, Part V,	ine 46 (Political Campaign	Activities), then			
 Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. 								
• Se	 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.							
		," on Form 990, Part IV, line 4, or For						
		that have filed Form 5768 (election und						
	 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. 							
Tax) (s	see separate instructions), t		/ Tax) (see separat	e instructions) or Form 990	-EZ, Part V, line 35c (Proxy			
	ection 501(c)(4), (5), or (6) orga	anizations. Complete Part III.						
	of organization			1 -	ntification number			
	s Panhandle Build			75-09499				
Part		e organization is exempt und						
1	definition of "political car		·	. •	: IV. (see instructions for			
2		y expenditures (see instructions) .			; 			
3		cal campaign activities (see instruc						
Part		e organization is exempt und			 			
1	-	excise tax incurred by the organiza						
2		excise tax incurred by organization	-					
3	_	ed a section 4955 tax, did it file For			= =			
4a				<i>.</i>	Yes No			
b Doza	If "Yes," describe in Part			-\	(-\(0\)			
Part		e organization is exempt und			(C)(3).			
1	activities	ly expended by the filing organiz		▶ \$				
2		filing organization's funds contributies	•	_				
3	•	expenditures. Add lines 1 and 2.		· · · · · · · · · · · · · · · · · · ·				
4	Did the filing organization	file Form 1120-POL for this year?	?		Yes No			
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on tributions received that were pro- fund or a political action committee	enter the amount motly and directly	paid from the filing organi delivered to a separate p	zation's funds. Also enter olitical organization, such			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								

Page	2

Pa	art II-A Complete if the organization section 501(h)).	is exempt	under section 5	01(c)(3) and file	d Form 5768 (elec	ction under
A	theck ► ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).					
В	Check ► ☐ if the filing organization checke			•		
<u>-</u>	Limits on Lobby			TOVISIONS apply.	(a) Filing	(b) Affiliated
	(The term "expenditures" mea			.)	organization's totals	group totals
	la Total lobbying expenditures to influence p				 	
	b Total lobbying expenditures to influence a	-		• •	 - - - - - - - 	
	c Total lobbying expenditures (add lines 1a	•	• •	. ,		
		•				
	e Total exempt purpose expenditures (add I	ines 1c and	1d)			
	f Lobbying nontaxable amount. Enter th	e amount t	from the following	g table in both		
	columns.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	nt is:		
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.]	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.]	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess of	ver \$1,500,000]	
_	Over \$17,000,000	\$1,000,000.				
	g Grassroots nontaxable amount (enter 25%	•				
	h Subtract line 1g from line 1a. If zero or les					
	i Subtract line 1f from line 1c. If zero or less	•				
	j If there is an amount other than zero of reporting section 4911 tax for this year?			•		Yes No
			Period Under sec		 	1103
	(Some organizations that made a sect	ion 501(h) el		e to complete all	of the five column	s below.
_	Lobbying E	xpenditures	During 4-Year A	veraging Period		
	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))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					-
	f Grassroots lobbying expenditures					
	BAA	<u></u>	REV 12/20/17 PRO		Schedule C (Form	990 or 990-EZ) 2017

For	(election under section 501(h)).	(;	a)	Γ -	(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes		A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?			-		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1))?		 	1		
c	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?			†		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
ì	Other activities?					
j	Total. Add lines 1c through 1					
2a b	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		i	<u> </u>		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			ļ		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (or se	ction		
					Yes	\leftarrow
1	Were substantially all (90% or more) dues received nondeductible by members?			1	ļ <u></u>	×
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<u>×</u>	 .
3 Post	Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)				L	×
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OI answered "Yes."	R (b)	Par	t III-A,	line	3, is
1	Dues, assessments and similar amounts from members		1_	ļ		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a	L		
b	Carryover from last year		2b			
C	Total		2c	<u> </u>		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	•	3	Ļ		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	ing				
	and political expenditure next year?		4	L		
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5			
Par						
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grounstructions); and Part II-B, line 1. Also, complete this part for any additional information.	ıb iis	t); Pa	π II-A,	ines	and
_ (000	mondono, and rare in 5, into 117 look complete tine part for any additional information.					
			~			
						

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name o	f the organization		Employer identification number
Texa	as Panhandle Builders Association		75-0949942
Par	Organizations Maintaining Donor Adv Complete if the organization answered '		ds or Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)	,	
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor funds are the organization's property, subject to th		
6			r any other purpose
Par			
	Complete if the organization answered '		
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recreat	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Protection of natural habitat	☐ Preservation of	a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а			
b	Total acreage restricted by conservation easement		
c	Number of conservation easements on a certified h	` ,	
d	Number of conservation easements included in		
•	historic structure listed in the National Register . Number of conservation easements modified, trans		· [2d]
3	tax year ►	sterred, released, extinguished, or term	inated by the organization during the
4	Number of states where property subject to conser	nyation easement is located	
5	Does the organization have a written policy reg		pection handling of
•	violations, and enforcement of the conservation ear		
6	Staff and volunteer hours devoted to monitoring, inspect		
•		ing, naraling of violations, and officioning of	onesi valion saccinente dannig ino year
7	Amount of expenses incurred in monitoring, inspectin	a, handling of violations, and enforcing c	conservation easements during the year
	▶ \$	3	- · · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		· · · · · · □ Yes □ No
9	In Part XIII, describe how the organization reports of		
	balance sheet, and include, if applicable, the text o		
	organization's accounting for conservation easeme		
Part			Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar	•	•
	public service, provide, in Part XIII, the text of the fo		
b	If the organization elected, as permitted under S	FAS 116 (ASC 958), to report in its r	evenue statement and balance sheet
	works of art, historical treasures, or other similar		ucation, or research in furtherance of
	public service, provide the following amounts relati	_	
	(i) Revenue included on Form 990, Part VIII, line 1(ii) Assets included in Form 990, Part X		> \$
•	(ii) Assets included in Form 990, Part X		· · · · ▶ \$
2			
_	following amounts required to be reported under S	, ,	
a	Revenue included on Form 990, Part VIII, line 1 .		• \$
<u> </u>	Assets included in Form 990, Part X	<u> </u>	<u> </u>

Pag	ıe	2

	Organizations Maintaining					
3	Using the organization's acquisition, collection items (check all that apply):		ner records, chec	ck any of the follo	owing that are a si	gnificant use of its
а	Public exhibition		d 🗌 Loan	or exchange pro	grams	
b	Scholarly research		e 🗌 Othe	r		
C	Preservation for future generation					
4	Provide a description of the organiza XIII.	tion's collections a	nd explain how t	hey further the o	rganization's exem	pt purpose in Part
5	During the year, did the organization					r
	assets to be sold to raise funds rather		ned as part of the	e organization's o	collection?	☐ Yes ☐ No
Part	Complete if the organization 990, Part X, line 21.		on Form 990, F	Part IV, line 9, o	r reported an am	ount on Form
1a	Is the organization an agent, trustee included on Form 990, Part X?					t 🔲 Yes 🗌 No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the following to	able:	An	nount
С	Beginning balance			 	c	
d	Additions during the year			├	d	
e	Distributions during the year			⊢	e	
f	Ending balance			·	lf	
2a	Did the organization include an amou	nt on Form 990, Pa	rt X, line 21, for e	scrow or custod	al account liability?	? 🗌 Yes 🗋 No
b	If "Yes," explain the arrangement in P					
Par						
	Complete if the organization	answered "Yes"				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	105,199.	106,517.			
b	Contributions	5,025.	1,250.	9,925.	3,520.	14,697.
С	Net investment earnings, gains, and	1				
	losses	8,289.	1,732.			3,967.
d	Grants or scholarships	5,000.	4,300.	5,500.	<u> </u>	
е	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	113,513.	105,199.	106,517.	109,456.	103,067.
2	Provide the estimated percentage of	the current year end	d balance (line 1g	, column (a)) held	as:	
a b	Board designated or quasi-endowme Permanent endowment ▶	nt ► 100.	.%			
c	Temporarily restricted endowment ▶	· ⁷⁰				
	The percentages on lines 2a, 2b, and		0%			
3a	Are there endowment funds not in th			at are held and a	dministered for the	2
	organization by:	•	3			Yes No
	(i) unrelated organizations					3a(i) ×
	(ii) related organizations					3a(ii) ×
b	If "Yes" on line 3a(ii), are the related of	rganizations listed	as required on So	chedule R?		3b ×
4	Describe in Part XIII the intended uses	s of the organization	n's endowment fu	unds.		
Part	, , ,					
	Complete if the organization	answered "Yes"	on Form 990, F	Part IV, line 11a	. See Form 990,	Part X, line 10.
	Description of property	(a) Cost or oth (investme	1 ' '		Accumulated depreciation	(d) Book value
1a	Land					
b	Buildings	.				
C	Leasehold improvements	•		25 420	22 254	4 474
ď	Equipment	•		25,428.	23,954.	1,474.
E e	Other	ruet equal Form 00	O Port V!	5,406.	4,973.	433.
rotal.	Add lines 1a through 1e. (Column (d) r	nust equal Form 99	u, Part X, column	i (B), iine 10c.) .	<u> ▶ </u>	1,907.

Part VII	Investments - Other Securities.				
<u></u>	Complete if the organization answere	ed "Yes" on For	m 990, Part IV, Iır	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value		nod of valuation. -of-year market value
(1) Financial	derivatives				
(2) Closely-l	neld equity interests	[
(3) Other					
(A)					
(B)				<u> </u>	
(C)					
(D)					
(E) (F)					
(G)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12)▶				
Part VIII	Investments—Program Related.		 	<u> </u>	
I alt VIII	Complete if the organization answere	ed "Yes" on For	m 990 Part IV lin	e 11c See Form	990 Part X line 13
	(a) Description of investment	ed Tes ellTol	(b) Book value		hod of valuation
				Cost or end	of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)				ļ	
(7)					
(8)				<u> </u>	
(9)	11		· 		
Part IX	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			<u> </u>	
Partix	Complete if the organization answere	nd "Ves" on Ear	m 000 Part IV lin	a 11d Saa Earm	000 Port V line 15
		scription	111 990, Fart IV, III	e i iu. See i oilli	(b) Book value
(1) Const	cuction in Process_				404,037.
(2)	uccion in flocess				404,037.
(3)					
(4)					
(5)					
(6)			 		
(7)					
(8)					
(9)					
Total. (Colu	mn (b) must equal Form 990, Part X, col. (E	3) line 15.)			404,037.
Part X	Other Liabilities. Complete if the organization answere	ed "Yes" on For	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value			
(1) Federal ır	ncome taxes				
(2)					
(3)]		
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	him to a constant of the const				
	b) must equal Form 990, Part X, col. (B) line 25.) ▶			, ,	
∠. Liability fol organization'	r uncertain tax positions. In Part XIII, provide the slability for uncertain tax positions under FIN	THE TEXT OF THE TOOTH	ore to the organization	n s tinancial stateme he footnote has bee	nts that reports the

	Page
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.
1 Total revenue, gains, and other support per audited financial statements	392,455.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	332,433.
a Net unrealized gains (losses) on investments 2a	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	392,455.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	392,455.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	<u>385,839.</u>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	205 020
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	385,839.
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	385,839.
Part XIII Supplemental Information.	
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional informat	

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

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OMB No. 1545-0047

% □ Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant **Employer identification number** or assistance X Yes 75-0949942 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance Texas Panhandle Builders Association (p) EIN 1 (a) Name and address of organization or government Name of the organization Part I Part II 2 Ξ ල € 9 8 <u>@</u> 6 (10)

Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

E

(12)

N

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Schedule I (Form 990) (2017)

Page 2.

Schedule I (Form 990) (2017)

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete of the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance 5,000. (c) Amount of cash grant Part III can be duplicated if additional space is needed. 2 (b) Number of recipients (a) Type of grant or assistance 1 Scholarships See Statement Part IV Part III က Ŋ ဖ N 4

Schedule I (Form 990) (2017)

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.

2017

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ.
➤ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization	Employer identification number
Texas Panhandle Builders Association	75-0949942
Pt VI, Line 6: Membership consists of those in the home building	industry in
Amarillo, Texas and its surrounding counties.	
Pt VI, Line 7a: At the annual meeting of members, approval of boa	rd nominees
is ratified.	
Pt VI, Line 11b: The Finance Committee has the responsibility of	reviewing Form
990 before it is filed with IRS.	
Pt VI, Line 15a: Senior Officers perform an evaluation of the Exe	cutive Officer
and determine his compensation.	
Pt VI, Line 19: These items are available upon request.	
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