Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990 for instructions and the latest info

Depa	artment of th	ne Treasury	► Do not enter social security numbers on this form as it may be ■ Go to www.irs.gov/Form990 for instructions and the latest i		1800	Open to Public Inspection
A	•		ndar year, or tax year beginning Jul 1 , 2017, and endin		n 30	,2018
B	Check if a		C Name of organization TEXAS CONSTRUCTION ASSOCIATION	<u> </u>		er identification number
	Address c		Doing business as			885694
Η		ľ	Number and street (or P.O. box if mail is not delivered to street address) Room/su	ito		ne number
H	Name cha		·	ite		
	Initial retur		1011 SAN JACINTO BLVD 330		(512) 473-3773
님	Final return		City or town, state or province, country, and ZIP or foreign postal code			
\sqcup	Amended		AUSTIN, TX 78701		G Gross re	eceipts \$ 1,676,916.
Ш	Application	n pending	F Name and address of principal officer:	H(a) Is this a g	roup return for	subordinates? 🔲 Yes 🗵 No
			RAYMOND RISK, 1011 SAN JACINTO BLVD, #330, AUSTIN, TX 7870			s included? 🗌 Yes 🔲 No
<u></u>	Tax-exem	pt status:	□ 501(c)(3) × 501(c) (6) ◄ (insert no) □ 4947(a)(1) or □ 527	6 If "N	o," attach a	a list. (see instructions)
<u>J</u>	Website:	<u>► WI</u>	WW.TEXCON.ORG	H(c) Group	exemption	number ▶
K	Form of org	ganization:	Corporation ☐ Trust ☐ Association ☐ Other ► / L Year of format	ion 199	B M State	of legal domicile: TX
P	art I	Summa	ary			
	1 E	Briefly de:	scribe the organization's mission or most significant activities: EDUCA	TION AND	ADVOCAC	Y FOR CONSTRUCTION
٠ė,						
& Governancė						***************************************
9.	2 0	heck thi	s box ▶☐ if the organization discontinued its operations or disposed of	of more than	25% of	its net assets.
õ	1		of voting members of the governing body (Part VI, line 1a)		3	21
ಹ	1		if independent voting members of the governing body (Part VI, line 1b)		4	20
es	1		ber of individuals employed in calendar year 2017 (Part V, line 2a)		5	3
CU IS Activities			aber of volunteers (estimate if necessary)		6	
ुइ			elated business revenue from Part VIII, column (C), line 12		7a	25
ວັ						24,000.
<u> </u>	l b r	ver uniter	ated business taxable income from Form 990-T, line 34	Prior Ye	7b	-15,854.
		S 4 - 1 40		Prior 16	ar	Current Year
inue s			ions and grants (Part VIII, line 1h)			
રું 5			service revenue (Part VIII, line 2g)	475	,498.	484,248.
HÉ.			nt income (Part VIII, column (A), lines 3, 4, and 7d)	4	,242.	9,647
8	1				3,212.	1,183,021.
¥.			nue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,517	7,952.	1,676,916.
Expenses STMARK DATE JAI	13 (arants an	d similar amounts paid (Part X/oelumn (A), lines 1-3)		,524.	15,000.
Ē	14 E	Benefits p	paid to or for members (Part-IX, column (A) line 4)			
S	15 S	Salaries, o	ther compensation, employee benefits (Part), column (A), lines 5–10)	636	719.	686,231.
nse n	16a F	rofessio	nal fundraising fees (Part IX, column (A), line 11e)			
g	b T	otal fund		THE WAR TO		のいなりまれる。
Ш	17 (Other exp	enses (Part IX, columnt/A); indes 1 tal-11 d, 1 f-24e)		,225.	557,430.
	18 T	otal exp	enses. Add lines 13- m (must equal Part IX, column (A), line 25)		,468.	1,258,661.
			ess expenses. Subtract line 18 from line 12		,484.	418,255.
≥ S				Beginning of Cu		End of Year
Net Assets or Fund Balances	20 T	otal asse	ets (Part X, line 16)			
Ass	21 T		lities (Part X, line 26)	2,138		2,436,762.
夏	22 1		s or fund balances. Subtract line 21 from line 20		,226.	491,922.
	art II		ure/Bjock	1,526	,585.	1,944,840.
_						
tru	der penam e. correct.	es or perjur and comple	y, I declare that I have examined this return, including accompanying schedules and stater te. peclaration of the parer (other than officer) is based on all information of which preparer	ments, and to ti	ne best of r	ny knowledge and belief, it is
		1	Ki Ki Ki	1145 4117 14115111		<u> </u>
e:-		0				2019
Sign		y Signa	ture of officer	Da	te	
He	re		MOND RISK, PRESIDENT/CEO			
	i	, , , , , , , , , , , , , , , , , , , 	or print name and title			
Pa	id	1	e preparer's name Preparer's signature Da		Check	if PTIN
	eparer	Peter		2/06/2018	3 self-em	P00648533
	e Only	Firm's na	me ►Allman & Associates Inc.	Firm	ı's EIN ►	46-2979080
		Firm's ad	dress ▶ 9600 Great Hills Trail, Suite 150W, Austin, TX			12)502-3077
Ma	y the IRS	discuss	this return with the preparer shown above? (see instructions)			· · 🛛 Yes 🗌 No
				V 10/16/18 PRO	10 F	Form 990 (2017)



Form 99	0 (2017)	Page 2
Part	•	_
	Check if Schedule O contains a response or note to any line in this Part III	<u> 🗆</u>
1	Briefly describe the organization's mission: EDUCATION AND ADVOCACY FOR CONSTRUCTION	
		
2		_Yes ⊠ No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	7.4 57.4
	services?	☐Yes 🏻 No
4	Describe the organization's program service accomplishments for each of its three largest program services, a expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocathe total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$	1
74	PROVIDED SERVICES TO MEMBER FIRMS AND 17 ASSOCIATION	/
	MEMBERS TO KEEP THEM INFORMED OF LEGISLATIVE DEVELOPMENTS	
	AND ADVOCATE ON THEIR BEHALF. MEMBERS TOTAL APPROXIMATE	
	1,200 AND AN ADDITIONAL 1,200 COMPANIES ARE DIRECT MEMBERS THROUGH	
	A TCA MEMBER BENEFIT PROGRAM.	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	PUBLISHED NEWSLETTERS, ALERTS, AND WEB PAGES FOR EDUCATION OF MEMBERS CONCERNING STATE LAWS THAT AFFECT THEIR	
	COMPANIES AND THE CONSTRUCTION INDUSTRY.	
	MAINTAINED A CONSTRUCTION CLAUSE LIBRARY FOR USE OF MEMBER	
	FIRMS THROUGH INTERNET ACCESS ON ASSOCIATION'S WEB SITE.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	INCREASED AWARENESS OF TEXAS LEGISLATURE CONCERNING ISSUES	
	THAT IMPACT CONTSTRUCTION SUBCONTRACTS AND SUPPLIERS AS	
	WELL AS EDUCATED LEGISLATORS ABOUT THE ROLE OF SUBCONTRACTORS	
	AND SUPPLIERS IN CONSTRUCTION.	
	······································	
	······································	
	•••••••••••••••••••••••••••••••••••••••	
	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

SOUTION

Part	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		×
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_	×	
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? <i>If "Yes," complete Schedule C, Part II</i>	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	×	
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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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		×
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		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	×	
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		×
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		×
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		×
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		×
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14 a	,,, -	14a		<u></u>
D	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		V
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		
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		
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>X</u>
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		
	, , , , , , , , , , , , , , , , , , , ,		990	

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a		20a		×
	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	l		
00	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	00		
00		22		×
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	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	 -	<u> </u>	_
	\$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		
	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		<u> </u>
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	200		
20	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,			
	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):			بسنبد
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		×
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	006		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28b		×
C	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,"			
00	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? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		×_
04	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.	_		
	10. Note: An 1 of 11 ooo life of are required to complete outledule of	38	×	

Part	V Statements Regarding Other IRS Filings and Tax Compliance	•		
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		<u> </u>
			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	F4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		`	
0-	reportable gaming (gambling) winnings to prize winners?	1c	×	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
b	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	-		ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	$\overline{\mathbf{x}}$	<u> </u>
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			
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶	٠;	•	.3
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	1 800		
	(FBAR).	37	<u>-</u>	
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		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	×	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u></u>	
7	Organizations that may receive deductible contributions under section 170(c).		, - 1	ļ .
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?	<u></u>		
		7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	75		
С	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	70	, ,	7.4,
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7 1		
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ĥ	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	3	ڌ '	9
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			<u>. </u>
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:	. '	,	1
а	Initiation fees and capital contributions included on Part VIII, line 12	٠, -	,	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	ļ.	+	;
11	Section 501(c)(12) organizations. Enter:	٠,	÷, 1	
a	Gross income from members or shareholders		t.	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			_ ,
40-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	—	-
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	124		-
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	۱۰ ا	,	-
ıз a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	•••		<u> </u>
b	Enter the amount of reserves the organization is required to maintain by the states in which			.
-	the organization is licensed to issue qualified health plans	,	•	
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.									
	Check if Schedule O contains a response or note to any line in this Part VI			. X						
Secti	ion 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.	1								
ь 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?									
3	B 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? .									
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing bodý?	4 5 6 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:									
a	The governing body?	8a	_×_							
b	Each committee with authority to act on behalf of the governing body?	8b	×							
9	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 Reve		ode.)							
_			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		×						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		٠,						
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.			350						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	_ X	<u> </u>						
b c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12b	×							
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?			Z.						
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		×						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b								
	on C. Disclosure									
17 18	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 available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)						
19 ,	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in 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 re	cords:	>							

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII

tion 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 no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	of the lindwidua	unies	Pos eck s pe	rson	than the state of	n an	(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
(1) VICTOR LONGO	2.00					<u>e</u>				
CHAIR	<u>2.00</u>	×		×				0.	0.	0.
(2) JERRY BRATTON VICE-CHAIR	2.00	×		×				0.	0.	0.
(3) CHRIS LAMBERT TREASURER	2.00	×		×				0.	0.	0.
(4) DAVID STONE SECRETARY	2.00	×		×				0.	0.	0.
(5) RAYMOND RISK PRESIDENT/CEO	40.00	×		×				453,881.	0.	4,400.
(6) ANDY ADAMS DIRECTOR	2.00	×						0.	0.	0.
(7) MACKIE BOUNDS DIRECTOR	2.00	×		_				0.	0.	0.
(8) KEVIN CAMARATA DIRECTOR	2.00	×			ļ 			0	0.	0.
(9) ROGER FISHER II DIRECTOR	2.00	×						0.	0.	0.
(10) KEITH COLVIN DIRECTOR	2.00	×						0.	0.	0.
(11) JOHN GARGOTTA DIRECTOR	2.00	×						0.	0.	0.
(12) FRED HELDENFELS IV DIRECTOR	2.00	×						0.	0.	0.
(13) PAUL HOLDEN DIRECTOR	2.00	×						0.	0.	0.
(14) MIKE KANETZKY DIRECTOR	2.00	×						0.	0.	0.

Part VII Section A. Officers, Directors, Trust (A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than of box, unless person is both officer and a director/trust					one (D) n an Reportable compensation		(E) Reportable compensation from	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) ROBBIE KETCH DIRECTOR	2.00	×						0.	0	. 0.
(16) KEN BOEN DIRECTOR	2.00	×						0.	0	. 0.
(17) ERIC LESCH DIRECTOR	2.00	×			_			0.	0	0.
(18) MARVIN OHLENBUSCH DIRECTOR	2.00	×					_	0.	0	0.
(19) FELIX MUNSON DIRECTOR	2.00	×						0.	0	0.
(20) BRIAN CHESTER DIRECTOR	2.00	×						0.	0.	0.
(21) BETHANY THOMPSON DIRECTOR	2.00	×						0.	0.	0.
(22) MICHAEL WHITE GOVERNMENT RELATIONS	40.00					×		123,500.	0	731.
(23)										
(24)										
(25)										
1b Sub-total	VII, Sectio						> > >	577,381. 577,381.	0.	
Total number of individuals (including but reportable compensation from the organi	not limited				ed a		_			
3 Did the organization list any former of employee on line 1a? If "Yes," complete 5	ficer, direc						emp	loyee, or high	est compensat	Yes No
4 For any individual listed on line 1a, is the organization and related organizations individual										the The Control
5 Did any person listed on line 1a receive of for services rendered to the organization?									ation or individ	
Section B. Independent Contractors		•					_			
Complete this table for your five highest of compensation from the organization. Replyear.										
(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensation
RAYMOND RISK, JR., 602 W. 13TH ST	REET, AU	JSTII	, I	ΤX	78	701	MA	NAGEMENT		453,881.
Total number of independent contractor received more than \$100,000 of compensations.							th	ose listed abo	ove) who	म । व

Par	VIII	Check if Schedule O contains a re	spansa ar nata t	to any line in this	Part VIII		
	· ·	Office in Schedule O Contains a re	sponse or note i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b]			
s, G	С	Fundraising events 10					
Sift lar	d	Related organizations 1d					- !
imi	е	Government grants (contributions) 1e					
tion r S	f	All other contributions, gifts, grants,					
ig #		and similar amounts not included above 1	<u> </u>	_			į
d C	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f			_		
Jue			Business Code	ļ			
e e	2a	MEMBERSHIP DUES	900099	465,824.	465,824.	0.	0.
e E	b	LEGISLATIVE ROUNDUP	900099	0.	0.	0.	0.
<u>Ş</u>	C	MEMBER MEETINGS	900099	11,350.	11,350.	0.	0.
Se	d	OTHER REVENUE	900099	7,074.	7,074.	0.	0.
ram	e	All all all and an annual and an an annual and an					
Program Service Revenue	f g	All other program service revenue. Total. Add lines 2a-2f		484,248.			
	3	Investment income (including divi		484,248.			
		and other similar amounts)		9,647.	0.	0.	9,647.
	4	Income from investment of tax-exempt		3,01,.	· · · · · · · · · · · · · · · · · · ·	<u> </u>	3,017.
	5			1,159,021.	0.	0.	1,159,021.
		Royalties	(II) Personal		,		
	6a	Gross rents		-			
	b	Less rental expenses]			
	С	Rental income or (loss)]		•	
	d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					•
	b	Less cost or other basis					,
		and sales expenses .	ļ	4			
	C	Gain or (loss)		ļ		-	
	d	Net gain or (loss)	· · · · >				
venue	8a	Gross income from fundraising events (not including \$					
Other Reve		of contributions reported on line 1c). See Part IV, line 18	а				
5	b		b	ļ			
		Net income or (loss) from fundraising		ļ			
	9a	Gross income from gaming activities.		1			
		See Part IV, line 19		4			
	b		b	<u></u>			
	100	Net income or (loss) from gaming ac Gross sales of inventory, less		 			
	Iva	returns and allowances		İ			
	_		b	-			
	Ь	Net income or (loss) from sales of in		· ·			
	ـ ـ ـ	Miscellaneous Revenue	Business Code				
	11a	ADVERTISING	541800	12,000.	0.	12,000.	0.
	''a	ADMINISTRATIVE SERVICES	561000	12,000.	0.	12,000.	0.
	0		-			,,	
	d	All other revenue					
	e	Total. Add lines 11a-11d	>	24,000.			
	12	Total revenue See instructions	▶	1 676 916	484 248	24 000	1 168 668

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must cor				
	Check if Schedule O contains a respor	ise or note to any li	ne in this Part IX		🗆
	t include amounts reported on lines 6b, 7b, o, 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	15,000.			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
_				341 4	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	380,040.			
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	255,078.			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				l
9	Other employee benefits	31,609.			
10	Payroll taxes	19,504.			
11	Fees for services (non-employees):				
а	Management				
b	Legal	96,479.			
С	Accounting	9,500.			
d	Lobbying	168,000.			
е	Professional fundraising services. See Part IV, line 17		1 -1 h h .	4.5	
f	Investment management fees				<u> </u>
g	Other. (If line 11g amount exceeds 10% of line 25, column				<u></u>
-	(A) amount, list line 11g expenses on Schedule O.)				-
12	Advertising and promotion	72,000.			
13	Office expenses	55,971.			
14	Information technology				-
15	Royalties				
16	Occupancy	44,876.			
17	Travel	5,301.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	23,692.			
20	Interest	23,522.			
21	Payments to affiliates	· · · · · · · · · · · · · · · · · · ·			
22	Depreciation, depletion, and amortization .				
23 .	Insurance	3,924.			
24	Other expenses. Itemize expenses not covered	· · · · · · · · · · · · · · · · · · ·	490° , july 10° °	3 5 6 4 3	• • • • • • • • • • • • • • • • • • • •
	above (List miscellaneous expenses in line 24e If	the second second		4	
	line 24e amount exceeds 10% of line 25, column		رد مورية خدادا	~ 1	
	(A) amount, list line 24e expenses on Schedule O.)	* **			
а	TCA PAC ADMIN EXPENSES	54,165.			
b					
c					
d			-		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,258,661.			
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 \blacktriangleright \Box if				•
	following SOP 98-2 (ASC 958-720)				

P	art X		V		
		Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year	<u> </u>	(B) End of year
	1	Cash-non-interest-bearing	5,667.	1	8,325.
	2	Savings and temporary cash investments	660,062.	2	505,355.
	3	Pledges and grants receivable, net	,	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.	, J,	,	
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ets	_			7	
Assets	7	Notes and loans receivable, net			
٩	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 923, 082.			1,324
	b	Less: accumulated depreciation 10b	923,082.	10c	923,082.
	11	Investments—publicly traded securities	550,000.	11	1,000,000.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,138,811.	16	2,436,762.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and	· Marketin	• •	
jab		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	612,226.	23	491,922.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		05	,
			610 006	25	401 000
	26	Total liabilities. Add lines 17 through 25	612,226.	26	491,922.
ces		complete lines 27 through 29, and lines 33 and 34.	· 4 · 4	· - '	
an	27	Unrestricted net assets	1,526,585.	27	1,944,840.
Ва	28	Temporarily restricted net assets		28	
פַ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.		<i>,</i> ; •	1
ts	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
det	33	Total net assets or fund balances	1,526,585.	33	1,944,840.
_	34	Total liabilities and net assets/fund balances	2,138,811.	34	2,436,762.

Page	12

	()				-9
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,6	76,9	16.
2	Total expenses (must equal Part IX, column (A), line 25)	2			61.
3	Revenue less expenses. Subtract line 2 from line 1	3	4:	18,2	255.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,5	26,5	85.
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	1,9	44,8	340.
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	· <u>· · · · · · · · · · · · · · · · · · </u>		• •	\sqcup
				Yes	No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🔲 Accrual 📗 Other		1 4	- 4	1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	piain in			19.3
_	Schedule O.		15.	<u>:</u>	
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 com-	pilea or	0.		3
	reviewed on a separate basis, consolidated basis, or both:		7.3	r y	1.5
	Separate basis Consolidated basis Both consolidated and separate basis		2b	کت	1.21
D	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audit	· · ·	20	X	20
	separate basis, consolidated basis, or both:	ed on a	17.04	£ 61	7
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1213		44 A.
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versiaht			n i
U	of the audit, review, or compilation of its financial statements and selection of an independent according to the selection of the selection of an independent according to the selection of the		2c	×	
	If the organization changed either its oversight process or selection process during the tax year, ex		1	- 	h 1
	Schedule O.		* 4	ان در	200
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		<u></u>	الاعتساقا
Vu	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	ergo the	 	$\neg \uparrow$	
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			Form	990	(2017)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

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

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

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

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

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

• Se	ection 501(c)(4), (5), or (6) orga	anizations Complete Part III.			
	of organization	Employer ider	ntification number		
TEXA	AS CONSTRUCTION AS	SOCIATION		74-28856	594
Part	I-A Complete if the	e organization is exempt un	der section 501	(c) or is a section 527	organization.
1	Provide a description of definition of "political car	f the organization's direct and impaign activities")	ndirect political c	ampaign activities in Part	IV. (see instructions for
2		y expenditures (see instructions)			0.
3		cal campaign activities (see instru			
Part		e organization is exempt un			
1		excise tax incurred by the organiz	zation under section	on 4955 ▶ \$)
2	Enter the amount of any	excise tax incurred by organization	on managers unde	er section 4955 🕨 💲)
3		ed a section 4955 tax, did it file Fe			
4a	Was a correction made?				🗌 Yes 🔲 No
b	If "Yes," describe in Part			<u></u>	
Part		e organization is exempt une			(c)(3).
1		ly expended by the filing organ			
					0.
2		filing organization's funds contri			
		vities			
3		expenditures. Add lines 1 and			,
					0. Yes × No
4	• •	n file Form 1120-POL for this yea			
5		ses and employer identification ni ents. For each organization listed			
		ontributions received that were pr			
		fund or a political action committ			
	(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)					

. .

∓ •

Pa		Complete if the organization section 501(h)).	is exempt ι	ınder section 5	01(c)(3) and file	d Form 5768 (ele	ection under
A		If the filing organization belong address, EIN, expenses, and s				liated group memb	per's name,
В	Check ► [if the filing organization checke	ed box A and "	'limited control" p	rovisions apply.		
		Limits on Lobby				(a) Filing	(b) Affiliated
		(The term "expenditures" me	ans amounts	paid or incurred	.)	organization's totals	group totals
1	a Total lob	bying expenditures to influence	oublic opinion	(grass roots lobb	yıng)		
	b Total lob	bying expenditures to influence a	a legislative bo	dy (direct lobbyin	g)		
	c Total lob	bying expenditures (add lines 1a	and 1b) .				
	d Other ex	empt purpose expenditures					
		empt purpose expenditures (add		•			
	f Lobbying columns.	g nontaxable amount. Enter the	ne amount fr	om the following	g table in both		
	If the amo	ount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amour	nt is:		
	Not over \$	500,000	20% of the am	nount on line 1e.		1	
	Over \$500	,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.	'	
	Over \$1,00	00,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.	'	
	Over \$1,50	00,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	over \$1,500,000.	1 30 5 .	
	Over \$17,0	000,000	\$1,000,000				
	g Grassroc	ots nontaxable amount (enter 25%	% of line 1f)				
	h Subtract	line 1g from line 1a. If zero or les	s, enter -0-				
		line 1f from line 1c. If zero or less					<u>. </u>
		is an amount other than zero o					¬ ¬
	reporting	section 4911 tax for this year?	· · · ·	<u> </u>		<u> </u>	_ Yes No
	(Some	organizations that made a sect	tion 501(h) ele	Period Under sec ection do not hav uctions for lines	e to complete all	of the five column	ns below.
		Lobbying	Expenditures	During 4-Year A	veraging Period		
	Calend	lar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total ;
2	a Lobbying	nontaxable amount					
		r ceiling amount f line 2a, column (e))	3 * .		2,,-		
,	Total lobi	bying expenditures					
-	d Grassroo	ets nontaxable amount	,				
		ts ceiling amount line 2d, column (e))	6,				
1	Grassroo	ts lobbying expenditures					
В	AA			REV 10/16/18 PRO		Schedule C (Form	1 990 or 990-EZ) 2011

	(election under section 501(h)).		(a)		(b)	
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	A	mount	-
1	During the year, did the filing organization attempt to influence foreign, national, state or local					Ī
•	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 1i)?			<u>,</u>	<u> </u>	
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?					-
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			ļ		-
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			 		-
į :	Other activities?		•			-
j 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	' —		· ·		ī
b	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		1			-
d	The second se			";	-1	Ì
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)((5), c	or se	ction		
	501(c)(6).					_
					Yes No	
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	_
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	×	-
3 Dord	Did the organization agree to carry over lobbying and political campaign activity expenditures from the pull-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6)				×	-
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OF answered "Yes."				line 3, is	
1	Dues, assessments and similar amounts from members		1	4	65,824.	
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		71,332.	-
b	Carryover from last year		2b		92,705.	
С	Total	•	2c	1	64,037.	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	1	<u>.80,000.</u>	-
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of t excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbyi					
	and political expenditure next year?		4		84,037.	
5	Taxable amount of lobbying and political expenditures (see instructions)		5		04,037.	7
Par	and the same of th			<u> </u>		-
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	p list	t), Pai	rt II-A, I	ines 1 and	-
	instructions), and Part II-B, line 1. Also, complete this part for any additional information.					
Pt I	-A Line 1: THE ASSOCIATION HAS A SEPARATE POLITICAL ACTION COMMITTEE	E WI	HICH	i		
HAND	LES ALL POLITICAL CAMPAIGN ACTIVITY. MEMBERS MAKE CONTRIBUTIONS DIRE	CTI	-Y			-
	WE DIG THE DIGIT DIRECTORS MAKE ALL DESCRIPTIONS ON DOLLETS ALL SAMPATON	T 00	רושואר	TDIITT	ONG	
10 1	HE PAC. THE PAC'S DIRECTORS MAKE ALL DECISIONS ON POLITICAL CAMPAIGN			16011	.0105 .	
						•
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	m 990 or 990-EZ) 2017	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDULE D (Form 990)

Department of the Treasury

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 201

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization 74-2885694 TEXAS CONSTRUCTION ASSOCIATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. a Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Par	t III Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or Ot	her Similar A	ssets (contin	iued)
3	Using the organization's acquisition, collection items (check all that apply)		her reco	ds, chec	k any of th	ne follov	ving that are a	significant use	of its
а	Public exhibition		d	🗌 Loan	or exchan	ge prog	rams		
b	Scholarly research		e	☐ Othe	r 				
C	☐ Preservation for future generation								
4	Provide a description of the organiza XIII.	tion's collections a	and expla	un how t	hey further	the org	janization's exe	mpt purpose i	n Part
5	During the year, did the organization assets to be sold to raise funds rathe								⊒ No
Par	IV Escrow and Custodial Arra			·					
	Complete if the organization 990, Part X, line 21.								r m
	Is the organization an agent, trustee included on Form 990, Part X?								□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the fo	llowing ta	able:	Γ		Amount	
С	Beginning balance					10	- 		
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amou					ustodial	account liability	y? Yes	□No
b	If "Yes," explain the arrangement in P								Ī
	t V Endowment Funds.								
	Complete if the organization	answered "Yes"	" on Fori	n 990, F					
		(a) Current year	(b) Pric	r year	(c) Two yea	rs back	(d) Three years bac	k (e) Four years	back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs		i						
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of	_	d balanc	e (line 1g	, column (a	a)) held a	as:		
а	Board designated or quasi-endowme		%						
b	Permanent endowment ▶	%							
C	Temporarily restricted endowment ▶		000/						
3a	The percentages on lines 2a, 2b, and Are there endowment funds not in the			ation the	at are hold	and adi	ministered for th	10	
Va	organization by:	e possession or th	ie organiz	auon une	at are rieid	and adi	Third stored for th	Yes	No
	(i) unrelated organizations							3a(i)	+**
	(ii) related organizations							3a(ii)	\vdash
b	If "Yes" on line 3a(ii), are the related of							3b	+
4	Describe in Part XIII the intended uses								
Part	VI Land, Buildings, and Equip	ment.							
	Complete if the organization	answered "Yes"	on Forr	n 990, F	Part IV, line	<u>e 11</u> a. S	See Form 990,	Part X, line	10.
	Description of property	(a) Cost or oth (investme			r other basis ther)		Accumulated preciation	(d) Book valu	e
1a	Land						م ۱ م		
b	Buildings			9:	23,082.			923,0	J82.
c	Leasehold improvements								
d	Equipment								
e	Other]						
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90. Part X	. column	(B), line 10)c)	▶	923,0	J82.

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Part VII	Complete if the organization ar		rm 990, Part IV, lir	ne 11b. See Form	n 990, Part X, line 12.
	(a) Description of security or categ (including name of security)		(b) Book value	(c) Me	thod of valuation d-of-year market value
(1) Financial (2) Closely-l	derivatives				
(3) Other					
(A)					
(B)	•••••			ļ	
(C) ,					
(D)	·				
(E) (F)					
(H)					
	b) must equal Form 990, Part X, col. (B) line 12)	•		[14] (14] (14]	347999 24556等。路
Part VIII	Investments—Program Relat Complete if the organization ar	ed.	rm 000 Part IV li	no 11c. Soo Form	2000 Part V line 13
	(a) Description of investment	iswered res on For	(b) Book value		thod of valuation
	(a) Description of investment		(b) Book value		d-of-year market value
(1)					
(2)				-	
(3)				· · · · · · · · · · · · · · · · · · ·	
(4) (5)					
(6)					
(7)					
(8)					•
(9)					
	(b) must equal Form 990, Part X, col (B) line 13.)	<u></u>	<u> </u>	THE PROPERTY.	THE WHAT WENT
Part IX	Other Assets. Complete if the organization ar	noward "Vas" on Ea	rm 000 Part IV lu	na 11d Saa Forn	n 000 Part Y line 15
	Complete if the organization at	(a) Description	7111 330, 1 art 14, 111	ile i i u. oce i oiii	(b) Book value
(1)	-				
(2)	-				
(3)		··			
(4)					
(5)				···-	
(6)					
(7)					
(8)					
(9) Total, (Colu	mn (b) must equal Form 990, Part X,	col (B) line 15.)	<u> </u>		
Part X	Other Liabilities.		······································		
	Complete if the organization ar	nswered "Yes" on Fo	rm 990, Part IV, lii	ne 11e or 11f. Se	e Form 990, Part X,
	line 25.		202 3 4 245 1940 W	MAINT OF THE TOP WELL MY THE	AND THE PARTY OF THE PARTY OF THE
1. (1) Foderal !!	(a) Description of liability	(b) Book value			
(1) Federal II	ncome taxes				
(2)					The second second
(4)					
(5)					the property of the party of th
(6)					
(7)					
(8)					
(9)		. ,		The state of the s	
	(b) must equal Form 990, Part X, col (B) line 25)		F-Press - 4	建筑的建筑性的地位	を持たい。本語で、本語では、
2. Liability fo	r uncertain tax positions. In Part XIII, pre	ovide the text of the footr	ote to the organization	on's financial statem	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Retur	n.
1	Total revenue, gains, and other support per audited financial statements	1	1,676,916.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	100.5	2/0/0/2
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,676,916.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3.6	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,676,916.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Retu	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,258,661.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	343	
а	Donated services and use of facilities		•
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,258,661.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	240	A.
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	3	4
b	Other (Describe in Part XIII.)		•.
С	Add lines 4a and 4b	4c	<i>±</i>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,258,661.
Part	XIII Supplemental Information.		
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional ir	nformatı	on.
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Schedule D (Fo		Page 5
Part XIII	Supplemental Information (continued)	
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SCHEDULE I (Form 990)

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

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

OMB No 1545-0047 2017

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

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

Open to Public Inspection Employer identification number 74-2885694

TEXAS CONSTRUCTION ASSOCIA	TION					74	-2885694
Part I General Information on							
 Does the organization maintain re the selection criteria used to awai 						r the grants or assista	
2 Describe in Part IV the organization	•					• • •	· MYes INO
Part II Grants and Other Assist						the organization an	swered "Yes" on Form
990, Part IV, line 21, for a							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TERAS CONSTRUCTIVE CORLITION RESERVE INSTRUTE PO BOX 2659 AUSTIN TX 78768 74-	-2763191 5	01 (C) 3	7,500				DONATION
(2)			•				,
(3)							
.(4)							
(5)							
(6)		- 		· 			
.(7)				·-···			
(8)							
(9)			·	·			
(10)						,, - -	
(11)				<u>–</u>			
(12)		` 		· 		· · · · · · · · · · · · · · · · · · ·	
2 Enter total number of section 5013 Enter total number of other organi			ons listed in the lii	ne 1 table			• 0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

REV 10/18/18 PRO

Schedule I (Form 990) (2017)

8AA

Schedule I	(Form 990) (2017)					Page 2
Part III				ne organization answ	vered "Yes" on Form 990,	Part IV, line 22.
	Part III can be duplicated if additi	ional space is needed	<u>. </u>	, <u> </u>		
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2	·					· -
3						
4						
_ 5						
_6						
7				<u> </u>	<u> </u>	
Part IV	Supplemental Information. Prov	vide the information re	equired in Part I, I	ine 2, Part III, columi	n (b), and any other additi	onal information.
Pt I	Line 2 THE ASSOCIATION MAKE	ES CONTRIBUTIONS	TO CHARITABL	E ORGANIZATIONS	BASED ON BOARD DIS	CRETION
						3
		•				
	,					
,	4					•••••••••••••••••••••••••••••••••••••••
			••••••	***************************************		
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SCHEDULE J (Form 990)

Compensation Information

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990.
➤ Go to www.irs.gov/Form990 for instructions and the latest information.

TEXAS CONSTRUCTION ASSOCIATION

Employer identification number

74-2885694

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a, Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b . . Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. □ Compensation committee ☐ Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a × × 4b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? × 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? 5a **b** Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 7. 4 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2017

BAA

Page 2

Schedule J (Form 990) 2017

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

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

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

(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (E) Total of columns (B)(I)-(D) (D) Nontaxable benefits (F) Compensation other deferred compensation in column (B) reported as deferred on prior (i) Base (ii) Bonus & incentive (A) Name and Title compensation reportable compensation Form 990 (i) 0 RAYMOND RISK 270,036 100,000 83,845 4,400 458,281 (11) 1 PRESIDENT/CEO (i) (ii) (i) (11) (ī) (ii) (i) (ii) (i) (ii) (i) (ii) (i) (ii) (i) (ii) (i) (ii) 10 (i) (ii) 11 (i) (ii) 12 (1) (11) 13 (i) (11) 14 (i) (ii) 15 (i) (h) 16

REV 10/16/18 PRO

	Form 990) 2017		Page 3
Part III	Supplemental Information		
or any a	the information, explanation, or descriptions redditional information.	required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part	I Also complete this part
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BAA		REV 10/16/18 PRO	Schedule J (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.

► Attach to Form 990 or 990-EZ. Department of the Treasury ▶ Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service

OMB No. 1545-0047 2017 Open to Public

Inspection Name of the organization Employer identification number TEXAS CONSTRUCTION ASSOCIATION 74-2885694 Pt VI, Line 6: THE ASSOCIATION IS COMPOSED OF 17 MEMBER TRADE ASSOCIATIONS. THESE ASSOCIATIONS HAVE OVER 1,200 SUBCONTRACTORS AND SUPPLIERS AS THEIR MEMBERS REPRESENT OVER 175,000 EMPLOYEES. AN ADDITIONAL APPROXIMATELY 1,200 COMPANIES ARE DIRECT MEMBERS OF THE ASSOCIATION THROUGH ITS MEMBER BENEFIT PROGRAMS. Pt VI, Line 7a: THE MEMBER ASSOCIATIONS ELECT REPRESENTATIVES TO THE BOARD OF DIRECTORS. Pt VI, Line 7b: ANY CHANGES TO THE BYLAWS MUST BE APPROVED BY A VOTE OF THE MEMBER ASSOCIATIONS. Pt VI, Line 11b: THE TREASURER IS PROVIDED A COPY OF THE FORM 990 FOR REVIEW PRIOR TO ITS FILING Pt VI, Line 12c: THE PRESIDENT AND THE BOARD ARE REQUIRED TO DISCLOSE ANY CONFLICTS OF INTEREST. Pt VI, Line 15a: THE EXECUTIVE COMMITTEE SERVES AS THE COMPENSATION COMMITTEE AND IS MADE UP OF INDEPENDENT PERSONS. THEY REVIEW AND DETERMINE THE COMPENSATION OF THE PRESIDENT/CEO. Pt VI, Line 19: THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO MEMBERS UPON REQUEST. Pt VI, Line 4: THE BYLAWS WERE AMENDED TO ADD SECTION 2A.- AFFILIATED ASSOCIATION REPRESENTATION - WITHOUT EXTINGUISHING THE RIGHT TO HAVE A PERSON REPRESENT THE ASSOCIATION UNDER SECTION 2 AS PROVIDED IN THE FOLLOWING PARAGRAPH, IF 3 OR MORE ASSOCIATIONS CLASSIFIED UNDER ARTICLE III, SECTION 3, CONSIDER THEIR ASSOCIATIONS TO BE AFFILIATED WITH EACH OTHER, THE AFFILIATED ASSOCIATIONS MAY ELECT TO HAVE ONE PERSON REPRESENT ALL OF THOSE AFFILIATED ASSOCIATIONS.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

TEXAS CONSTRUCTION ASSOCIATION

Employer Identification number 74 - 2885694

OMB No 1545-0047

2017

Part I	Identification of Disregarded Entities. Complete if the orga	lentification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity							
(1)													
(2)													
(3)					 								
(4)													
(5)					-								
(6)					 								

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II (c) Legal domicile (state or foreign country) (d) Exempt Code section (e) Public charity status (if section 501(c)(3)) (f) Oirect controlling (g) ction 512(b)(13) controlled entity? (b) Primary activity (a)
Name, address and EIN of related organization entity Yes No (1) TEXAS CONSTRUCTION ASSOCIATION PAC 05-0634633 × 527 POLITICAL ACTION COMMITTEE TX 1011 SAN JACINTO BLVD, #330 AUSTIN TX 78701 (3) (6)

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REV 10/18/18 PRO

Schedule R (Form 990) 2017

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end-of- year assets	Disprop	h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing partner?		General or managing		(k) Percentage ownership
							Yes	No		Yes	No																			
.(1)							ĺ			ĺ	ĺ																			
(2)												_																		
(3)		_																												
(4)						<u> </u>			,																					
(5)	<u> </u>																													
(6)								,																						
.(7)									1																					

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

(a) Name address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp S corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	Section 5 contr enti	olled
							Yes	No
.(1)		- "						
(2)								
(3)			-					
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Schedule R (Form 990) 2017

Part	Transactions With Related Organizations. Complete if the organization answ	vered "Yes" on Form	990, Part IV, line 3	4, 35b, or 36			
Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one	or more related organ	izations listed in Part	s II-IV?	12.2	1	
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		×
b	Gift, grant, or capital contribution to related organization(s)				1b		×
c	Gift, grant, or capital contribution from related organization(s)				1c		×
d	Loans or loan guarantees to or for related organization(s) .				1d		×
е	Loans or loan guarantees by related organization(s)				1e		×
	, , , , , , , , , , , , ,						585
f	Dividends from related organization(s)				11		×
g	Sale of assets to related organization(s)				19		×
ĥ	Purchase of assets from related organization(s)				1h		×
i	Exchange of assets with related organization(s)				11		×
i	Lease of facilities, equipment, or other assets to related organization(s)				11		×
•	, , , , , , , , , , , , , , , , , , ,				250	173-2	党道
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		×
ï	Performance of services or membership or fundraising solicitations for related organization(s)				11	<u> </u>	×
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	_	×
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	×	
0	Sharing of paid employees with related organization(s)				10		×
	g at part amprey cook man amount at game (4)				107		
р	Reimbursement paid to related organization(s) for expenses				1p		×
q	Reimbursement paid by related organization(s) for expenses	, ,			1q		×
7	The state of the state of games and the state of the stat	•	•	•	24		a Tar
r	Other transfer of cash or property to related organization(s)			_	1r		×
s	Other transfer of cash or property from related organization(s)				1s		×
2	If the answer to any of the above is "Yes," see the instructions for information on who must c	omplete this line, incli	iding covered relation	ships and transacti	on thr	esho	ds
	(a)	(b)	(c)	(d)			
	Name of related organization	Transaction	Amount involved	Method of determinin		nt invo	lved
		type (a – s)		ł			
(1)				I			
(2)]		1			
(3)				L			
(4)				I			
	<u> </u>						
(5)				L			
`(6)				L			
2 A A	REV 10/16/18 PRO			Schedule I	R (For	n 990	2017

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Page 4

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

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

(a) Name address and EIN of entity	(b) Primary activity	(c) Legal domicite (state or foreign country)	income (related, unrelated, excluded from tax under	Are all sec	tion (c)(3)	(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate itions?	rtionate Code V—UBI		i) eral or aging ner?	(k) Percentage ownership	
			sections 512-514)	Yes	No			Yes No			Yes No		1	
(1)													, ~	
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(3)								· ·				<u> </u>	 	
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Schedule R (F	Schedule R (Form 990) 2017 Page 5								
Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.								

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