Form 990 (Rev. January 2020)
Department of the Treasury Internal Revenue Service

0040

Return of Organization Exempt From Income Tax

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



Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

ΑF	or the	and 2019 calendar year, or tax year beginning and	ending		
B C	heck if oplicabl	e: C Name of organization		D Employer identified	cation number
X	Addre chang	TIC COUNCIL AMERICAS INC.			
X	Name Chang	e Doing business as	54-19743	94	
	Initial return		Room/suite	E Telephone number	
	Final return	2021 L STREET, NW, SUITE 101-268		240-507-3	
	termir ated			G Gross receipts \$	260,963.
	Amen return	WASHINGTON, DC 20036		H(a) Is this a group re	turn
	Applic distance	F Name and address of principal officer: RODERIA IELLES		for subordinates	? Yes X No
	pendi	¹⁹ SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No
ΙT	ax-ex	empt status: 501(c)(3) 🛛 501(c) (6)◀ (insert no.) 4947(a)(1) d	or 🗌 527	If "No," attach a	list. (see instructions)
JV	Vebsi	te: ► HTTPS://WWW.TIC-COUNCIL.ORG/		H(c) Group exemption	n number 🕨
κF	orm of	organization: 🚺 Corporation 🔄 Trust 🔄 Association 📄 Other 🕨	L Year	of formation: 1999 N	State of legal domicile: NY
Pa	rt I	Summary			
	1	Briefly describe the organization's mission or most significant activities: \underline{TOPI}	ROMOTE	COMMON BUSI	INESS
Governance		INTERESTS BETWEEN TESTING, INSPECTION & C			
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	ets.
INC	3	Number of voting members of the governing body (Part VI, line 1a)		3	4
ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	4	
Activities &		Total number of individuals employed in calendar year 2019 (Part V, line 2a)		2	
		Total number of volunteers (estimate if necessary)		4	
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12			0.
A		Net unrelated business taxable income from Form 990-T, line 39			0.
				Prior Year	Current Year
a	8	Contributions and grants (Part VIII, line 1h)		264,316.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	260,963.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
ж	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		264,316.	260,963.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		223,081.	222,862.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)	0.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		47,788.	38,526.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		270,869.	261,388.
	19	Revenue less expenses. Subtract line 18 from line 12		-6,553.	-425.
or			Ве	ginning of Current Year	End of Year
Assets or d Balances	20	Total assets (Part X, line 16)		28,481.	28,056.
d Ba	21	Total liabilities (Part X, line 26)		0.	0.
Fund		Net assets or fund balances. Subtract line 21 from line 20		28,481.	28,056.
Pa	rt II	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. Declaration of preparer (other the best) of ficer) is based on all information of which preparer has any knowledge.

	Of Madalh_		03.16.2020					
Sign	Signature of officer		Date					
Here		IVE DIRECTOR						
	Type or print name and title							
	Print/Type preparer's name	Date Check PTIN						
Paid	FRANK H. SMITH	Frank H. Smith	02/25/20 self-employed P00639053					
Preparer	Firm's name 🕒 MARCUM LLP		Firm's EIN 🕨 11-1986323					
Use Only	Firm's address 🕨 1899 L STREET, N	W, SUITE 850						
	WASHINGTON, DC 2	Phone no. (202) 227-4000						
May the If	May the IRS discuss this return with the preparer shown above? (see instructions)							
932001 01-2	Discoul 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)							

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Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
•	PROMOTE COMMON BUSINESS INTERESTS BETWEEN INSPECTIO	N AGENCIES
	WORLDWIDE IN ORDER TO MAINTAIN AND ENHANCE THE QUAL	
		ITY AND SERVICES
	PROVIDED INCLUDING INSPECTION CERTIFICATIONS.	
2	Did the organization undertake any significant program services during the year which were not listed	on the
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	services?
3		
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program se	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ns to others, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	PROMOTE COMMON BUSINESS INTERESTS BETWEEN INSPECTIO	N AGENCIES WORLDWIDE
	IN ORDER TO MAINTAIN AND ENHANCE THE QUALITY AND SE	
	INCLUDING INSPECTION CERTIFICATIONS.	
	INCLODING INSTRCTION CERTIFICATIONS.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Bevenue \$
4d	Other program services (Describe on Schedule O.)	
_	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses	· · ·
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 TIC COUNCIL AMERICAS INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
-	Schedule D, Part III	8		<u> </u>
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?			v
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
	or in 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, VII, VII, 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,	44-		x
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	<u>11a</u>		
b		11b		х
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
u		11d		х
۵	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
124	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17		X
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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		Х
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			Yes	NO
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
Ŭ	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
50	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization requidate, terminate, or dissolve and cease operations? <i>If "yes," complete Schedule N, Part I</i>	31		
32		32		x
22	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33		33		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		- 23
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		x
05-	Part V, line 1	34		X
	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	0.5%		
20	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?	0		
07	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	07		x
~~	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		x	
Pa	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
	Check if Schedule O contains a response or note to any line in this Part V		V	
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1a 0			
b				
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	<u>1c</u>	000	(2019)
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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?	<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
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:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<u>12a</u>		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>		
	Note: See the instructions for additional information the organization must report on Schedule O.			
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans 13b			
C 140	Enter the amount of reserves on hand 13c	44-		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
. –	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x
	excess parachute payment(s) during the year?	15		
16	If "Yes," see instructions and file Form 4720, Schedule N.	16		x
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
_	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2019)

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Form 990 (2019)
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TIC COUNCIL AMERICAS INC.

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

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X

			. —	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4		
	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 on Schedule 0.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	4		
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	2	X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?				X
4	Did the organization make any significant changes to its governing documents since the prior Form 99			X	
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	5		X
6	Did the organization have members or stockholders?			Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	•	-	X	
L	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, st		7	1 1	+
D		-	-		x
~	persons other than the governing body?		7)	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	5		v	
a	The governing body?		8		
b	Each committee with authority to act on behalf of the governing body?		8	<u>, v</u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read				
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O		9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re-	venue Code.)			1
				Yes	_
10a	Did the organization have local chapters, branches, or affiliates?		10	а	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha				
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before filing the forr	n? 11	a X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12	ьX	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," describe			
	in Schedule O how this was done		12		
13	Did the organization have a written whistleblower policy?		1:		
14	Did the organization have a written document retention and destruction policy?		1	4 X	
15	Did the process for determining compensation of the following persons include a review and approval	l by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15	a X	
	Other officers or key employees of the organization			ьX	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent with a			
	taxable entity during the year?		16	а	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's			
	exempt status with respect to such arrangements?		16	b	
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed NONE				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, an	nd 990-T (Section 50 ⁻	1(c)(3)s on	ly) availa	able
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website Upon request Other (explain)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, col	on Schedule O)	w and fin	ancial	
13	statements available to the public during the tax year.	inner of interest polic	y, and ini	anolal	
		ke and records			
20	State the name, address, and telephone number of the person who possesses the organization's boo ROBERTA TELLES $-240-507-3392$	iks and records			
20					
20		0036		orm 990	

Form	990	(2019)
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Part VII	Со	ompensation	of Officers,	, Directors,	, Trustees,	Key Employees	, Highest	Compensate	d
-	En	nployees, ar	nd Independ	ent Contra	ctors				

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do		Pos heck	itior		ane	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	ndàd I	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		66	npens		(W-2/1099-MISC)		organization and related
	below	lual tr	tional		nploy	st con yee	_			organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) ARTHUR KAY	0.10				-					
CHAIRMAN		x		x				0.	0.	0.
(2) JOAN STERLING	0.10									
VICE CHAIR		х		x				0.	0.	0.
(3) ANN WEEKS	0.10									
TREASURER		Х		Х				0.	0.	0.
(4) HANANE TAIDI	0.10									
DIRECTOR GENERAL		Х						0.	0.	0.
(5) ROBERTA TELLES	25.00									
EXECUTIVE DIRECTOR				Х				122,695.	0.	0.
		<u> </u>			<u> </u>					
		1								
		1								
		1								
		1								
932007 01-20-20										Form 990 (2019)

932007 01-20-20

	990 (2019) TIC COUNC	CIL AMER	IC	AS	I	NC	•			54-19	9743	94	Pa	age 8
Par	t VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	Average Position (do not check more than one box, unless person is both an officer and a director/trustee)			ı an	(D) Reportable compensation from	(E) Reportable compensation from related		Est am	(F) imate ount o other	of		
		(list any hours for related organizations below line)	In dividual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		orga and	oensa om the inizati relate nizatio	e on ed
	Subtotal								122,695.		0.			0.
	Total from continuation sheets to Part VII Total (add lines 1b and 1c)								0. 122,695.		0.			0.
2	Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	•			1
3	Did the organization list any former officer,	diractor truct			mol	01/01	0 0r	hia	best componented omp				Yes	No
3	line 1a? If "Yes," complete Schedule J for su	uch individual										3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150			-						-		4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." <i>com</i>											5		х
	tion B. Independent Contractors													
1	Complete this table for your five highest con the organization. Report compensation for t		•							, 1	ensau			
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	Co	(C) mpen		า
2	Total number of independent contractors (ir	ncluding but no	ot lin	nitec	d to f			ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	zation 🕨				0)				F	orm 9	990 (2	2019)

932008 01-20-20

			2019) TIC COUNCIL A	AMERICAS	S INC.		54-1974	394 Page 9
Pa	rt V		Statement of Revenue					
			Check if Schedule O contains a response	e or note to any		(5)		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s s	1 :	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues 1b					
s, G		с	Fundraising events 1c					
Gift: lar /		d	Related organizations 1d		_			
ns, (Government grants (contributions) 1e		_			
utior er S	1	f	All other contributions, gifts, grants, and					
Oth		_	similar amounts not included above 1f		_			
but	2	-	Noncash contributions included in lines 1a-1f 1g \$ Total. Add lines 1a-1f					
0 0				Business Co	de			
Ð	2	а	PROGRAM REVENUE	900099		260,963.		
vic		b						
Ser		с						
am		d						
Program Service Revenue		е						
Ā	1		All other program service revenue	-				
		g	Total. Add lines 2a-2f		▶ 260,963.			
	3		Investment income (including dividends, inter					
	4		other similar amounts) Income from investment of tax-exempt bond					
	4 5		Royalties	-				
	Ŭ		(i) Real	(ii) Persona	al			
	6 8	а	Gross rents 6a		_			
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)		►			
	7 :	а	Gross amount from sales of (i) Securities	(ii) Other	_			
			assets other than inventory 7a		_			
•		b	Less: cost or other basis					
venue		~	and sales expenses 7b Gain or (loss) 7c		_			
			Net gain or (loss)					
Other Re			Gross income from fundraising events (not					
Oth		-	including \$ of					
•			contributions reported on line 1c). See					
			Part IV, line 18	a				
	1		Less: direct expenses8	b				
			Net income or (loss) from fundraising events)	►			
	9 8	а	Gross income from gaming activities. See					
	.	L	Part IV, line 19		_			
			Less: direct expenses 9 Net income or (loss) from gaming activities					
			Gross sales of inventory, less returns					
		-	and allowances <u>10</u>	a				
		b	Less: cost of goods sold 10					
			Net income or (loss) from sales of inventory					
s				Business Co	de			
e	11 :	а						
sellaneo evenue		b						
Miscellaneous Revenue		C						
Mi			All other revenue		•			
	12	6	Total revenue. See instructions		260,963.	260,963.	0.	0.
93200	9 01-2	20-:						Form 990 (2019)

13320225 150872 TICCA

Form 990 (2	2019)	TIC	COU	NCIL	А
Part IX	Statement	of Function	onal E	Expense	es

TIC COUNCIL AMERICAS INC.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses **(D)** Fundraising (B) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 122,695. trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 78,750. Other salaries and wages 7 8 Pension plan accruals and contributions (include 2,756. section 401(k) and 403(b) employer contributions) 718. Other employee benefits 9 17,943. 10 Payroll taxes 11 Fees for services (nonemployees): Management а b Legal 750. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 4,505. Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 9,967. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 385. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 4,524. 23 Insurance Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 14,195. TRAININGS а MEMBERSHIP/SUBSCRIPTION 2,291. b 1,909. PAYROLL FEES С d All other expenses е 261,388. Total functional expenses. Add lines 1 through 24e 25 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)

10

932010 01-20-20

Form 990 (2019)

11 2019.03000 TIC COUNCIL AMERICAS INC. TICCA__1

4 Accounts receivable, net 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 49580)(11), and persons described in section 4958(c)(3)(8) 6 7 Notes and other receivables from other disqualified persons (as defined basis, Complete Part V of Schedule D 7 9 Prepaid expenses and deferred charges 9 10a 10a 10a 11 Investments - publicly traded securities 111 11 Investments - publicly traded securities 111 11 Investments - publicly traded securities 111 12 Investments - publicly traded securities 111 13 Investments - publicly traded securities 114 14 15 16 16 15 Total assets. Add lines 1 through 15 (must equal line 33) 28 , 481. 16 28, 056. 16 Total assets. Add lines 1 through 15 (must equal line 33) 28 , 481. 16 28 20 Tax-exempt bond liabilitie 20		3	Pledges and grants receivable, net				3	
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(c)(3)(8) 6 7 Notes and come receivables, net 8 9 Prepard expenses and defered charges 9 10 Land, buildings, and equipment: cost or other basis. Complete Part V of Schedule D 100 11 Investments - other securities. See Part IV, line 11 12 12 Investments - other securities. See Part IV, line 11 13 14 Intangible assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 13 Investments - other securities. See Part IV, line 11 13 14 14 Intangible assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 14 Comer securities. See Part IV, line 11 13 16 15 Total assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 19 Deterred revenue 19 12 13 10 Total assets. Add lines 1 through 15 (must equal line 32 21		4					4	
controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined under sectina 4956(c)(5)) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepaid expenses and defered charges 9 10a 10a 10a b Less: accumulated depreciation 10a 11 Investments - other securities. See Part IV, line 11 112 11 Investments - other securities. See Part IV, line 11 13 14 Intragible assets 114 15 Other assets. See Part IV, line 11 13 16 Total assets. Add lines 1 through 15 (must equal line 33) 28 , 481. 16 16 Total assets. Add lines 1 through 15 (Complete Part IV of Schedule D 20 21 21 Less and other paybable to any current of forms officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secure Mortageas and notes payable to any current of forms officer, director, trustee, key employee, creator or founder, substantial contribu		5						
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gr T Notes and lears receivable, net T 8 Nivertories for sale or use 8			controlled entity or family member of any of the	se persons			5	
7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 Prepard expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10 b Less: accumulated depreciation 10b 11 Investments - publicly traded securities 11 12 11 Investments - publicly traded securities 11 12 13 Investments - publicly traded securities 14 15 14 Intragible assets 14 15 15 Other assets. See Part IV, line 11 15 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 28, 056. 17 Accounts payable and accured expenses 17 17 18 18 19 20 Tax-exempt bond liabilities 20 21 22 22 22 21 Earce or or tounder, substantial contributor, or 35% controlider Hity or fanily member of any of these persons 22 22 22 22 Secured motigages and notes payable to unrelated third parti		6	Loans and other receivables from other disqual	fied persons (as def	ined			
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9 Freplate Spinor Section Control Charges 10a Land, buildings, and equipment: cost or other b Less: accumulated depreciation 10a Land, buildings, and equipment: cost or other 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 16 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Image: Second liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-24). Complete Part X 26 Total liabilities. Add lines 17	ŝŝel	8					8	
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11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 0ther assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 28, 056. 17 Accounts payable and acrued expenses 17 18 Grants payable 18 19 20 Tax-exempt bond liabilities 200 21 22 20 assets. Add lines 1 through 15 (must equal line 37) 20 21 21 21 Lass and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 26 Other liabilities income tax, payables to related third parties 24 25 26 Total liabilities. Add lines 17 through 25 0 · 26 0 · 26 27 Net assets without donor restrictions 28 · 481 · 27 28 · 056 · 28 </td <th></th> <th></th> <td>basis. Complete Part VI of Schedule D</td> <td>10a</td> <td></td> <td></td> <td></td> <td></td>			basis. Complete Part VI of Schedule D	10a				
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14 Intangible assets 14 15 0ther assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 28, 481. 16 28, 056. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 18 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured morts agaes and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 26 Total liabilities. Add lines 17 through 25 0 . 26 0. 26 Total liabilities. Add lines 17 through 25 0 . 26 0. 27 Net assets with donor restrictions 28 , 481. 27 28 , 056 . 28 Net assets with donor restrictions </td <th>12</th> <td>Investments - other securities. See Part IV, line</td> <td>11</td> <td></td> <td></td> <td>12</td> <td></td>		12	Investments - other securities. See Part IV, line	11			12	
15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 11 through 15 (must equal line 33) 28,481. 16 28,056. 17 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 19 Deferred revenue 19 20 21 Escrow or custodia account liability. Complete Part IV of Schedule D 21 22 Loars and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D 26 0. 26 Total liabilities. Add lines 17 through 25 0. 26 0. 27 Net assets with donor restrictions 28,481. 27 28,056. 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 28 29		13	Investments - program-related. See Part IV, line	11			13	
16 Total assets. Add lines 1 through 15 (must equal line 33) 28,481. 16 28,056. 17 Accounts payable and accrued expenses 17 18 17 18 Grants payable and accrued expenses 18 18 18 19 Deferred revenue 19 20 20 Tax exempt bond liabilities 20 21 20 Tax exempt bond liabilities 20 21 21 Escrow or custodial account iiability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities not included on lines 17:24). Complete Part X of Schedule D 25 0. 27 Net assets withod onor restrictions 28, 481. 27 28, 056. 28 Organizations that do not follow FASB ASC 958, check here 28 28 29 2		14					14	
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 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0. 26 0. 27 Net assets without donor restrictions 28, 481. 27 28, 056. 28 Organizations that do Iof low FASB ASC 958, check here ▶ 28 29 30 30 Paich or capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 31 31 32 Total liabilities and		15	Other assets. See Part IV, line 11					
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 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24). Complete Part X of Schedule D 26 26 Total liabilities. Add lines 17 through 25 0 · 26 0 · 26 27 Net assets without donor restrictions 28 · 481 · 27 28 · 056 · 28 28 Organizations that do not follow FASB ASC 958, check here 28 28 29 Capital stock or trust principal, or current funds 29 29 30 Paich no capital surplus, or land, building, or equipment fund 30 31 31 Retained earnings, endowment, accumulated income, or other funds 28		16				28,481.	16	28,056.
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		აა	TOTAL HADHITIES AND NET ASSETS/TUND DAIANCES			40,40I.	ত্র	Form 990 (2019)

TIC COUNCIL AMERICAS INC.

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

Cash - non-interest-bearing

Savings and temporary cash investments

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(B) End of year

28,056.

1

2

(A) Beginning of year

28,481.

Form 990 (2019) Part X Balance Sheet

1

2

Form	1990 (2019) TIC COUNCIL AMERICAS INC.	54-1974	394	Pag	_{ye} 12
Pa	rt 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	260		
2	Total expenses (must equal Part IX, column (A), line 25)	2	261	, 38	88.
3	Revenue less expenses. Subtract line 2 from line 1	3		-42	25.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	28	,48	81.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	28	, 05	56.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
-	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			v
-	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2019)

932012 01-20-20

SCHEDULE C	Political Campaign and Lobbying Activities	l	OMB No. 1545-0047
(Form 990 or 990-EZ)	For Organizations Exempt From Income Tax Under section 501(c) and section 5	27	2019
Department of the Treasury	Complete if the organization is described below. Attach to Form 990 or Form	990-EZ.	Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection	
If the organization answ	vered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Camp	aign Activi	ties), then
 Section 501(c)(3) org 	anizations: 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 Par	t I-B.	
 Section 527 organiza 	ations: Complete Part I-A only.		
If the organization answ	vered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Acti	ivities), the	n
 Section 501(c)(3) org 	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do r	not complet	e Part II-B.
 Section 501(c)(3) org 	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B	. Do not cor	nplete Part II-A.
If the organization answ	vered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form	990-EZ, P	art V, line 35c (Proxy
Tax) (see separate instr	ructions), then		
 Section 501(c)(4), (5) 	, or (6) organizations: Complete Part III.		
Name of organization		Employer	identification number
	TIC COUNCIL AMERICAS INC.	5.	4-1974394
Part I-A Comple	ete if the organization is exempt under section 501(c) or is a section 52	27 organi	zation.
1 Provide a description	on of the organization's direct and indirect political campaign activities in Part IV.		

2	Political campaign activity expenditures	▶\$		
3	Volunteer hours for political campaign activities			
Pa	art I-B Complete if the organization is exempt under section 501(c)(3).			
1	Enter the amount of any excise tax incurred by the organization under section 4955	► \$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		Yes	No
4a	a Was a correction made?		Yes	No
k	b If "Yes," describe in Part IV.			
Pa	art I-C Complete if the organization is exempt under section 501(c), except sect	ion 501(c)(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	► \$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527			
	exempt function activities	► \$		
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,			
	line 17b	► \$		
4	Did the filing organization file Form 1120-POL for this year?		Yes	No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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

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

Schedule C (Form 990 or 990-EZ) 2019

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019 TI					974394 Page 2	
Part II-A Complete if the organ	ization is exer	mpt under section	n 501(c)(3) and file	d Form 5768 (ele	ection under	
section 501(h)).						
			Part IV each affiliated	group member's nam	e, address, EIN,	
expenses, and share o	, ,	• •				
B Check b if the filing organization	h checked box A a	nd "limited control" pro	ovisions apply.			
	on Lobbying Expe res" means amo	nditures unts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals	
1a Total lobbying expenditures to influen	ce public opinion (grassroots lobbying)				
b Total lobbying expenditures to influen	ce a legislative bo	dy (direct lobbying)				
d Other exempt purpose expenditures						
e Total exempt purpose expenditures (a	dd lines 1c and 1c	(k				
f Lobbying nontaxable amount. Enter the	ne amount from th	e following table in bot	h columns.			
If the amount on line 1e, column (a) or (b) is: The lot	obying nontaxable am	ount is:			
Not over \$500,000		the amount on line 1e.				
Over \$500,000 but not over \$1,000,00	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000.					
Over \$1,000,000 but not over \$1,500,	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000.					
Over \$1,500,000 but not over \$17,000	,000 \$225,0	00 plus 5% of the exce	ss over \$1,500,000.			
Over \$17,000,000 \$1,000,000.						
g Grassroots nontaxable amount (enter	25% of line 1f)					
h Subtract line 1g from line 1a. If zero o	less, enter -0-					
i Subtract line 1f from line 1c. If zero or	less, enter -0-					
j If there is an amount other than zero o			•••••••••••••••••••••••••••••••••••••••			
reporting section 4911 tax for this yea	-			[Yes No	
		eraging Period Under				
(Some organizations that		01(h) election do not rate instructions for li		f the five columns be	elow.	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		F	
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(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						

Schedule C (Form 990 or 990-EZ) 2019

932042 11-26-19

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

54-1974394 Page 3

Schedule C (Form 990 or 990-EZ) 2019 TIC COUNCIL AMERICAS INC. 54-19743 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
	lobbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	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?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
	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				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5)	, or sec	tion	
	501(c)(6).				
				Yes	Νο
1	Were substantially all (90% or more) dues received nondeductible by members?		. 1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		. 2	X	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		3		Х
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."	'No" OR (b) Part I	II-A, line	3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).		-		
а	Current year		2a		
	Carryover from last year				
	Total				
3					
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A,	lines 1 a	nd 2 (see	

Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



Employer identification number 54 - 1974394

FORM 990, PART VI, SECTION A, LINE 4:

TIC COUNCIL AMERICAS INC. AMENDED ITS ARTICLES OF INCORPORATION IN 2019 TO

REFLECT THE ORGANIZATION'S NAME CHANGE. THE ORGANIZATION CHANGED ITS NAME

FROM IFIA AMERICAS COMMITTEE TO TIC COUNCIL AMERICAS INC.

TIC COUNCIL AMERICAS INC.

FORM 990, PART VI, SECTION A, LINE 6:

MEMBERS SHALL CONSIST OF ANY CORPORATION, FIRM, OR ANY OTHER LEGAL ENTITY

(A) WHO IS A MEMBER WITH FULL VOTING RIGHTS OF TIC COUNCIL (TIC), (B) WHO

IS IN GOOD STANDING, (C) WHO IS CURRENTLY MAINTAINING AN ACTIVE BUSINESS

PRESENCE IN THE AMERICAS, (D) WHO IS A MEMBER OF AN TIC SECTOR COMMITTEE'S

REGIONAL COMMITTEE ACTIVE IN THE AMERICAS, AND (E) WHO ELECTS TO

PARTICIPATE IN THE CORPORATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE PROPERTY, AFFAIRS, ACTIVITIES, AND CONCERNS OF THE CORPORATION SHALL BE VESTED IN A BOARD OF DIRECTORS. THIS SHALL CONSIST OF:

- TWO PERSONS DESIGNATED BY EACH REGIONAL COMMITTEE OF THE TIC SECTOR

COMMITTEE WHICH IS ACTIVE IN THE AMERICAS FROM AMONG THE REPRESENTATIVES OF

THE MEMBERS WHO ARE MEMBERS OF THE CORPORATION,

- ONE PERSON DESIGNATED BY THE TIC COUNCIL GLOBAL BOARD.

THERE SHALL BE A MINIMUM OF THREE DIRECTORS.

THE MEMBERS OF THE BOARD SHALL UPON SELECTION, IMMEDIATELY ENTER UPON THE

PERFORMANCE OF THEIR DUTIES AND SHALL CONTINUE IN OFFICE UNTIL THEIR

SUCCESSORS SHALL BE DULY ELECTED AND QUALIFIED.

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Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization

FORM 990, PART VI, SECTION B, LINE 11B:

AFTER THE FORM 990 IS PREPARED BY AN ACCOUNTING FIRM, THE EXECUTIVE

DIRECTOR SUBMITS THE FORM TO ALL MEMBERS OF THE GOVERNING BODY VIA EMAIL

FOR REVIEW. IT IS REQUESTED THAT ANY QUESTIONS OR COMMENTS ARE RAISED BY A STIPULATED DEADLINE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL MEMBERS OF THE TIC COUNCIL AMERICAS ARE MEMBERS WITH FULL VOTING RIGHTS OF THE TIC COUNCIL, AND MUST THEREFORE COMPLY WITH TIC COUNCIL COMPETITION COMPLIANCE POLICY. THE COMPLIANCE PRINCIPLES ADDRESS TECHNICAL AND BUSINESS PROFESSIONAL CONDUCT AND ETHICS IN RELATION TO THE FOLLOWING AREAS: INTEGRITY, CONFLICTS OF INTEREST, CONFIDENTIALITY, ANTI-BRIBERY, AND FAIR MARKETING. IT IS A CONDITION OF TIC MEMBERSHIP THAT MEMBERS IMPLEMENT AND ABODE BY THE COMPLIANCE CODE.

FORM 990, PART VI, SECTION B, LINE 15:

EXECUTIVE DIRECTOR (ED) COMPENSATION IS REVIEWED ON AN ANNUAL BASIS AND MAYBE ADJUSTED AT THE DISCRETION OF THE TIC DIRECTOR GENERAL (DG), EXCEPT THAT EXECUTIVE WILL RECEIVE, AT A MINIMUM, AN ADJUSTMENT TO MATCH ANY CHANGE IN THE COST OF LIVING IN THE PRECEDING YEAR. THE ED IS ELIGIBLE TO RECEIVE AN ANNUAL BONUS OF UP TO 20% OF ANNUAL BASE SALARY, FOR SERVICES RENDERED DURING EACH CALENDAR YEAR OR PART THEREOF WHILE EMPLOYED. BOTH THE FACT OF PAYMENT, AS WELL AS AMOUNT OF PAYMENT, WILL BE AT THE SOLE DISCRETION OF THE ASSOCIATION. IN THE EXERCISE OF ITS DISCRETION, IN DETERMINING WHETHER TO PAY A BONUS AND THE AMOUNT OF THE BONUS, THE TIC DG WILL TAKE INTO THE ACCOUNT THE ACTIVITIES OF THE ED IN REACHING AND/OR EXCEEDING GOALS TO BE ESTABLISHED BY THE TIC DG. 92212 08-06-19

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2019.03000 TIC COUNCIL AMERICAS INC. TICCA 1

Schedule O	(Form 990 or 990-EZ) (2019)	
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TIC COUNCIL AMERICAS INC.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS OF THE TIC COUNCIL AMERICAS INC ARE AVAILABLE ON THE

ORGANIZATION'S WEBSITE.

Schedule O (Form 990 or 990-EZ) (2019)

932212 09-06-19

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of TIC COUNCIL AMERICAS INC. was filed on 06/10/1999, under the name of IFIA AMERICAS COMMITTEE INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment IFIA AMERICAS COMMITTEE INC., changing its name to TIC COUNCIL AMERICAS INC. , was filed 12/03/2019.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 10th day of December two thousand and nineteen.

Brendon C. Hughes

Brendan C Hughes Executive Deputy Secretary of State



Division of Corporations, State Records and Uniform Commercial Code New York State Department of State DIVISION OF CORPORATIONS, STATE RECORDS AND UNIFORM COMMERCIAL CODE One Commerce Plaza 99 Washington Ave. Albany, NY 12231-0001 www.dos.ny.gov

CERTIFICATE OF AMENDMENT OF THE CERTIFICATE OF INCORPORATION OF

IFIA Americas Committee Inc.

(Name of Domestic Corporation)

Under Section 803 of the Not-for-Profit Corporation Law

FIRST: The name of the corporation is:

IFIA Americas Committee Inc.

If the name of the corporation has been changed, the name under which it was formed is:

SECOND: The certificate of incorporation was filed by the Department of State on:

June 10, 1999

THIRD: The law the corporation was formed under is:

New York Not-for-Profit Corporation Law

FOURTH: The corporation is a corporation as defined in subparagraph (5) of paragraph (a) of Section 102 of the Not-for-Profit Corporation Law.

FIFTH: The certificate of incorporation is amended as follows:

Paragraph ______ of the Certificate of Incorporation regarding

the name of the corporation

is hereby [check the appropriate box] added amended to read in its entirety as follows:

First: The name of the corporation is TIC Council Americas Inc. (the "Corporation").

	of the Certificate of Incorporation regarding	
corporation's purposes		
is hereby [check the appropriate box]	added	amended to read in its entirety as follows:
Fourth: The Corporation is formed for	the following	purposes, in accordance with Section 501(c)(6) of the Internal

(Remove this page if not needed)

SIXTH: The Secretary of State is designated as agent of the corporation upon whom process against it may be served. The address to which the Secretary of State shall forward copies of process accepted on behalf of the corporation is:

SEVENTH: The certificate of amendment was authorized by: (Check the appropriate box)

a vote of a majority of the members at a meeting.

the unanimous written consent of the members entitled to vote thereon.

a vote of a majority of the entire board of directors. The corporation has no members.

х

Executive Director

(Capacity of Signer)

Roberta Telles

(Print or Type Signer's Name)

CERTIFICATE OF AMENDMENT OF THE CERTIFICATE OF INCORPORATION OF

IFIA Americas Committee Inc.

(Name of Domestic Corporation)

Under Section 803 of the Not-for-Profit Corporation Law

Filer's Name James M. Goldberg

Address 1909 K Street, N.W., Suite 500

City, State and Zip Code Washington, DC 20006

NOTES:

- The name of the corporation and its date of incorporation provided on this certificate must exactly match the records
 of the Department of State. This information should be verified on the Department of State's website at <u>www.dos.nv.gov</u>.
- 2. The certificate must be submitted with a \$30 filing fee.
- This form was prepared by the New York State Department of State. It does not contain all optional provisions
 under the law. You are not required to use this form. You may draft your own form or use forms available at legal
 stationery stores.
- 4. The Department of State recommends that all documents be prepared under the guidance of an attorney.
- Please be sure to review Section 804 and Section 404 of the Not-for-Profit Corporation Law to determine if any consents or approvals are required to be attached to this certificate of amendment.

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