

Private Sector Firms

The annual ARTBA dues investment for a private sector firm is based on the value of your firm's sales or work volume in the U.S. transportation construction market during the previous year:

Primary Membership

< \$5 Million in Annual Volume—Firms with an annual volume less than \$5 million are asked to make a **\$665** annual dues investment in ARTBA.

\$5 Million+ in Annual Volume—For firms with an annual volume of \$5 million or more, the dues investment rate is **\$150 for each \$1 million in volume**.

(For example, a firm with \$10 million in annual sales to the U.S. transportation construction market is asked to invest \$1,500 annually to support ARTBA programs and activities—\$150 x 10 = \$1,500).

Service Memberships

The dues investment above enrolls a Primary Member in ARTBA. Additional executives from the same firm may be enrolled as ARTBA Service Members at an additional cost of **\$220** per executive. Both Primary and Service Members enjoy full ARTBA member benefits and privileges.

Public Agencies & Educational/Research Institutions

Public Officials

The 2012 ARTBA dues investment for a single executive from a government agency is **\$195**.

ARTBA offers a discounted 2012 group rate for enrollment of 10 or more executives from a government agency that is calculated at **\$170** per executive.

Education & Research Institution Personnel

The 2012 ARTBA dues investment for a single employee of an educational or research institution is **\$195**.

ARTBA offers a discounted 2012 group rate for enrollment of 3 or more employees from an educational or research institution that is calculated at **\$170** per executive.

Please call 202.289.4434 for information on membership through ARTBA-affiliated state contractor associations.

Membership & Cancellation

ARTBA Member Dues are payable on receipt of invoice and due within 30 days of billing. Payment of dues indicates agreement in full with the terms and conditions of ARTBA membership as expressed in the ARTBA Bylaws. ARTBA membership is effective until cancelled per Article VII, Section 5 of the ARTBA Bylaws, which states "Membership cancellations shall be effective on the first day of the month following the date on which the Association receives written notice of such cancellation. Members are responsible for their pro-rata share of annual membership dues up to the effective date of membership cancellation."

ARTBA Dues & Tax Issues

ARTBA dues are not deductible as charitable contributions but may be deductible as business expenses for federal tax purposes. ARTBA assumes any federal lobbying tax liability respecting member dues. ARTBA Industry Advancement Fund (ARTBA-IAF) and Transportation Makes America Work (TMAW) contributions are used for lobbying purposes and are not deductible as business expenses nor as charitable contributions. The ARTBA Transportation Development Foundation (ARTBA-TDF) is a tax-exempt organization under section 501(c)(3) of the Internal Revenue Service Code, which supports research, education, awards and scholarship programs. All or portions of contributions to the ARTBA-TDF may be deductible as charitable contributions for federal income tax purposes to the extent provided by law. You are advised to consult your attorney or tax advisor for specific tax guidance regarding the foregoing.

2012 MEMBERSHIP ENROLLMENT FORM

Name: _____ Title: _____

Firm/Agency: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-mail: _____ Website: _____

Primary Membership Division Preference - Please check one:

- | | |
|--|--|
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Traffic Safety Industry |
| <input type="checkbox"/> Material and Services | <input type="checkbox"/> Transportation Officials |
| <input type="checkbox"/> Planning and Design | <input type="checkbox"/> Construction Equipment Manufacturer |
| <input type="checkbox"/> Public-Private Partnerships | <input type="checkbox"/> Research and Education |

PAYMENT OPTIONS

- Primary Member Service Member Group Member

Your Dues Investment Total: \$ _____

- Check Enclosed Bill my credit card: MasterCard Visa AMEX

Name on Credit Card: _____

Card number: _____

Exp. Date: _____

Signature & Date: _____

Mail to: 1219 28th Street N.W., Washington D.C. 20007 or Fax to: 202.289.4435