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**Short Form  
Return of Organization Exempt From Income Tax**

**2009**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury  
Internal Revenue Service

**Open to Public  
Inspection**

**A For the 2009 calendar year, or tax year beginning , 2009, and ending ,**

<b>B</b> Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	<b>C</b> MRCA FOUNDATION, INC 4700 W LAKE AVENUE GLENVIEW, IL 60025-1485	<b>D</b> Employer identification number 43-1495286
			<b>E</b> Telephone number 847-375-4700
			<b>F</b> Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting method:  Cash  Accrual  
Other (specify) ▶

**I** Website: ▶ N/A

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

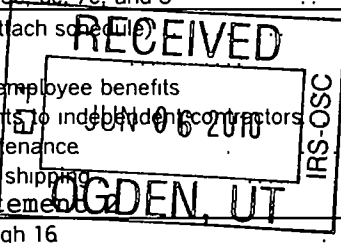
**J** Tax-exempt status (check only one) —  501(c) ( 3 ) ◀ (insert no)  4947(a)(1) or  527

**K** Check  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 102,543.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

<b>REVENUE</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	26,703.
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	
	<b>3</b> Membership dues and assessments	<b>3</b>	
	<b>4</b> Investment income	<b>4</b>	75,840.
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>5b</b> Less: cost or other basis and sales expenses	<b>5b</b>	
	<b>5c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	<b>6a</b> Gross revenue (not including \$ 3,813. of contributions reported on line 1)	<b>6a</b>	
<b>6b</b> Less: direct expenses other than fundraising expenses.	<b>6b</b>		
<b>6c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	<b>6c</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>7b</b> Less: cost of goods sold	<b>7b</b>		
<b>7c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b> Other revenue (describe ▶ )	<b>8</b>		
<b>9 Total revenue</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	<b>9</b>	102,543.	
<b>EXPENSES</b>	<b>10</b> Grants and similar amounts paid (attach schedule) See Statement 1	<b>10</b>	20,000.
	<b>11</b> Benefits paid to or for members	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	8,260.
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	
	<b>16</b> Other expenses (describe ▶ See Statement 2)	<b>16</b>	2,496.
	<b>17 Total expenses.</b> Add lines 10 through 16	<b>17</b>	30,756.
<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	71,787.	
<b>NET ASSETS</b>	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . .	<b>19</b>	276,909.
	<b>20</b> Other changes in net assets or fund balances (attach explanation) . . .	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year Combine lines 18 through 20	<b>21</b>	348,696.



**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments	266,171.	347,963.
<b>23</b> Land and buildings		
<b>24</b> Other assets (describe ▶ See Statement 3 )	10,754.	750.
<b>25 Total assets</b>	276,925.	348,713.
<b>26 Total liabilities</b> (describe ▶ See Statement 4 )	16.	17.
<b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	276,909.	348,696.

**BAA** For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

SCANNED AUG 04 2010

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**Part V Other Information** (Note the statement requirements in the instrs for Part V.) See Statement 7

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
35 a	a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
35 b	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37 a 0.		
37 b	b Did the organization file Form 1120-POL for this year?		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
38 b	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved N/A		
39	Section 501(c)(7) organizations Enter.		
39 a	a Initiation fees and capital contributions included on line 9 N/A		
39 b	b Gross receipts, included on line 9, for public use of club facilities N/A		
40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0., section 4912 ▶ 0.; section 4955 ▶ 0.		
40 b	b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 X		X
40 c	c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
40 d	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
40 e	e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T X		X
41	List the states with which a copy of this return is filed ▶ KS MO		

42 a The organization's books are in care of ▶ Association Management Center Telephone no. ▶ 847-375-4700  
 Located at ▶ 4800 W Lake Avenue Glenview IL ZIP + 4 ▶ 60025

		Yes	No
42 b	b 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)? If 'Yes,' enter the name of the foreign country: ▶ _____		X
42 c	c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country. ▶ _____		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here  N/A  
 and enter the amount of tax-exempt interest received or accrued during the tax year ..... ▶ 43 N/A

		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If 'Yes,' was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ▶ \_\_\_\_\_

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶ \_\_\_\_\_

**Sign Here**

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 than officer) is based on all information of which preparer has any knowledge.

Signature of officer: Thomas Drake Date: 6/20/10

Type or print name and title: THOMAS DRAKE Executive Director

**Paid Preparer's Use Only**

Preparer's signature: William J. Barnes, Jr. Date: 6-30-10 Check if self-employed:  Preparer's Identifying Number (See instructions): N/A

Firm's name (or yours if self-employed), address, and ZIP + 4: Givens & Barnes  
1655 N. Arlington Heights Road  
Arlington Heights, IL 60004-3978 EIN: N/A  
 Phone no: 847-506-1070

May the IRS discuss this return with the preparer shown above? See instructions ▶  Yes  No



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	16,501.	22,080.	19,993.	46,310.	26,703.	131,587.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
<b>3</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
<b>4 Total.</b> Add lines 1-through 3	16,501.	22,080.	19,993.	46,310.	26,703.	131,587.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
<b>6 Public support.</b> Subtract line 5 from line 4						131,587.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4	16,501.	22,080.	19,993.	46,310.	26,703.	131,587.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	21,474.	21,966.	27,936.	33,210.	75,840.	180,426.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						0.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
<b>11 Total support.</b> Add lines 7 through 10						312,013.
<b>12</b> Gross receipts from related activities, etc (see instructions)					12	0.

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	42.2 %
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	15	50.5 %

**16a 33-1/3 support test – 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**b 33-1/3 support test – 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.

**17a 10%-facts-and-circumstances test – 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

**b 10%-facts-and-circumstances test – 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

**18 Private foundation.** If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I )

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants')						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (add lns 9, 10c, 11, and 12)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33-1/3 support tests – 2009.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**b 33-1/3 support tests – 2008.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



MRCA FOUNDATION, INC

43-1495286

**Statement 1**  
**Form 990-EZ, Part I, Line 10**  
**Grants and Similar Amounts Paid**

Donee's Name: SEE ATTACHED  
 Cash Amount Given: \$ 20,000.

**Statement 2**  
**Form 990-EZ, Part I, Line 16**  
**Other Expenses**

Bank fees	\$ 120.
Postage	637.
Printing & Reproduction	667.
Professional & Corp fees	1,040.
Supplies	32.
<b>Total</b>	<b>\$ 2,496.</b>

**Statement 3**  
**Form 990-EZ, Part II, Line 24**  
**Other Assets**

	<u>Beginning</u>	<u>Ending</u>
Accounts Receivable	\$ 10,754.	\$ 750.
<b>Total</b>	<b>\$ 10,754.</b>	<b>\$ 750.</b>

**Statement 4**  
**Form 990-EZ, Part II, Line 26**  
**Total Liabilities**

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 16.	\$ 17.
<b>Total</b>	<b>\$ 16.</b>	<b>\$ 17.</b>

**Statement 5**  
**Form 990-EZ, Part III**  
**Organization's Primary Exempt Purpose**

The Foundation's purpose is to provide financial assistance to students pursuing a curriculum at an accredited university, college, community college, vocation or trade school, which will lead to a career in the construction industry. One or more awards are made available annually. The number and amount of scholarships awarded is determined by the Foundation's directors.

**Statement 6  
Form 990-EZ, Part III, Line 28  
Statement of Program Service Accomplishments**

Scholarships - The recipients of the Foundation's scholarships are determined based on information submitted to the Foundation by students interested in careers in the construction industry. The students complete a scholarship award application providing the foundation with relevant information used to make the selection.

Scholarship recipients are selected on the basis of academic performance, employment experience, financial need, letters of recommendation, and a demonstrated desire to persue a career in the construction industry. All persons, irrespective of race, gender, creed or national origin, who satisfy the eligibility requirement and make a timely application, are considered for a scholarship award.

**Statement 7  
Form 990-EZ, Part V  
Regarding Transfers Associated with Personal Benefit Contracts**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No

APP TYPE	Awarded	FIRST	MIDDLE	LAST	SSN	ADDRESS	CITY	ST	ZIP	SCHOOL	3 YEAR SCHOOL	4 YEAR SCHOOL	GRADE LEVEL	DEGREE PURSUED	# YEARS ELIGIBLE	OPA	ANTEP ATED	Household Income	OTHER SCHOLARSHIPS	MARITAL STATUS	NOTES	Amount Awarded
New	\$2,000.00	Jeffrey	Wayne	English	432-88-9610	1108 East Woodluff	Stamwood	AR	72120	University of Arkansas - Little Rock			Senior	Construction Management	1	2.85	May 2010	57,324	\$0.00	Single	Yes	
New	\$500.00	Thomas	Owen	Hall	255-77-3170	5222 Rebel Rd	Merrietta	GA	30068	University of Tennessee Century Community College			Junior	Business Management	2	3.0	May 2011	17,845	\$0,350.00	Single	Yes	Father and Uncle works for MRCA
New	\$2,000.00	Hillary	Lynn	Hoffman	470-21-7921	2287 Oak Glen Dr	Blaine	MIN	55984	College of St. Scholastica			Senior	Ultrasound Technician	1	3.72	May 2010	74,000	\$2,000.00	Single	Yes	Father and Uncle works for MRCA
New	\$2,000.00	Mina	Amour	Jenkins II	438-61-5069	1404 Cambridge Dr	Lafayette	LA	70008	Delgado Community College			Senior	Construction Technology	4	3.76	May 2013	38,797	\$1,700.00	Single	Yes	Grandfather owns father in trade for MRCA Mr. HES Roofing
New	\$500.00	Joshua	Allen	Lee	518-39-6788	1102 S. Campbell Box 203	Avista	IA	50518	College of St. Scholastica			Senior	Construction Management	4	2.687	May 2013	8,000	\$1,000.00	Single	Yes	
Renew	\$500.00	Matthew	Thomas	Nachbaur I	880-610-4375	154 Fairview Dr	Berth	CT	06037	Texas Community College			Senior	Construction Management	3	3.25	May 2012	39,000	\$0.00	Single	Yes	Father is a teacher at MRCA Mr. HES Roofing
Renew	\$500.00	Carly	L	Mason	455-69-8409	2819 Elm John	San Antonio	TX	78224	University of the Incarnate Word			Senior	Marketing	1	3.2	May 2010	49,000	\$5,000.00	Single	Yes	Works for MRCA Mr. Phillips
New	\$2,000.00	James	L	Mason	388-83-9938	275 Blaine Ln	Cameron	MI	48829	University of Wisconsin - Stout			Senior	Construction	2	3.470	May 2011	40,000	\$0.00	Married	Yes	Father in sales and estimating at MRCA Mr. FJA Christiansen
Renew	\$2,000.00	Teresa		Rudinger	396-02-1887	4217 N Woodburn St	Stonewood	WI	53211	University of Wisconsin - Stout			Senior	Sociology	1	3.5	May 2010	108,813	\$1,000.00	Single	Yes	Father and Grandmother works for MRCA Mr. B Four Plus, Inc
New	\$4,000.00	Ernest	Charles	Shelby III	521-79-7437	12027 Mason Rd	Coltsville	IN	46017	University of North Carolina			Senior	Bio-Chemistry	4	2.83	May 2013	57,825	\$3,308.00	Single	Yes	Step-father is a journeyman for MRCA Mr. HES Roofing
Renew	\$500.00	Christina	Mar	Edwards	531-23-0295	4671 Towne Bl	Pilot Lake	IL	60174	Normanville Community College			Senior	Social Work	4	3.894	May 2013	78,100	\$500.00	Single	Yes	Father works for MRCA Mr. HES Roofing, is a board member
Renew	\$500.00	Edward	Edward	Sparks II	348-80-6253	4385 Halmesdale Ct	Barnes	OH	45103	University of Cincinnati			Senior	Construction Management	1	3.0	May 2011	80,000	\$0.00	Single	Yes	

\$5,000.00 This was given to MRCA for the T & P committee

\$20,000.00

First	Last	Title	Company	Address 1	Address 2	City	State	ZIP	Office	Fax	Cell	E-mail
Bob	Swanda	President	Independent Roofing Co.	6102 Arbor #5		Omaha	NE	68106	402.348.0909	402.348.0101	402.681.2320	bob@independentroofing.net
Jim	Gentry	Member	Kirberg Company	1400 South Third St		St. Louis	MO	63104	314.534.4444	314.534.2626		jim.gentry@kirberg.com
Rick	Gwaltney	Member	Diamond Roofing	2720 Amherst		Manhattan	KS	66502	785.537.8008	785.537.9899		rick@diamonddroofingdck.com
Rod	Petrick	Member	Ridgeworth Roofing Co. Inc	9720 S Industrial Dr		Bridgeview	IL	60455	708.598.0039	708.598.8781	708.878.0673	rod@ridgeworthroofing.com
		Member										
		Member										
		Member										