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- 990 Form

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

TME No 1545 3041

Department of the Treil sur, internal Royonus Service ► The organization may have to use a copy of this return to satisfy state reporting requirements Open to Public Inspection

A	For the	e 2011 calendar year, or tax year beginning UUL 1, 2011 and er	nding J	UN 30, 2012						
B	Check 1	MIDWEST DISTRICT PROMOTIONAL		D Employer identific	cation number					
<u> </u>	cund									
1	u.u.i u.u.u	Doing Business As		39-1	706666					
=	irita ireturi emii uten		oom/sulte	E Telephone number 574-	273-9314					
=	Ameri —rcturn			G Gros i recepto \$	136,346.					
-	App :	GREENWOOD, IN 46143-6899		H(a) is this a group return						
	pend r	F Name and address of principal officer MICHAEL JACKSON		for affiliates?	Yes X No					
		3800 WOODWARD AVE SUITE 1200, DETROIT, I	MI 4	H(b) Are an affinates inc						
$\overline{}$	Tax ex	empt status501(a)(3) X501(a)(5) <_ (nsertino4947(a)(1) ar		· '-'	list (see instructions)					
		te: ► N/A		H(c) Group exemption	•					
		organization: X Corporation	L Veur		State of legal domicite: WI					
	art I	Summary								
		Briefly describe the organization is mission or most significant activities. BETTE	RMENT	OF CONSTRU	CTION AND					
Activities & Governance		INDUSTRIAL WORKERS								
ern	1	Check this box 🕨 🔛 if the organization discontinued its operations or dispose	d of mare	than 25% of its net as						
ò	3	Number of voting members of the governing body (Part VI, line 1a)		3	8					
•6	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	8					
es	5	Total number of individuals employed in calendar year 2011 (Part V. line 2a)		5	0					
Ŧ	6	Total number of volunteers (estimate if necessary)		6	0					
ᅙ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
_	Ь	Net unrelated business taxable income from Form 990-T. line 34		7ъ	0.					
				Prior Year	Current Year					
٠	8	Contributions and grants (Part VIII line 1h)		0.	0.					
Revenue	9	Program service revenue (Part VIII, line 2g)		141,495.	134,688.					
ě	10	Investment income (Part VIII. column (A), lines 3, 4, and 7d)	L.	1,148.	1,658.					
-}	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11c)		0.	0.					
_	12	Total revenue - add Imes 8 through 11 (must equal Part Vill, column (A), line 12)		142,643.	136,346.					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1 3)	<u> </u>	0.	0.					
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
83	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5.10)	<u> </u>	0.	0.					
eus	16a	Professional fundraising fees (Part IX, co'umn iA), line 11e)	。 ⊢	0.	0.					
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>0 · _ </u>	454 666						
ш	1 17	Other expenses (Part IX, column (A), lines 11a-11d, 11f 24e)	ļ	451,029.	3,949.					
	18	Total expenses Add lines 13 17 (must equal Part IX, column IA) Ino 251	,	451,029.	3,949.					
	19	Revenue less expenses Subtract line 18 from line 12	} 	-308,386.	132,397.					
SEIS OF			Beg	inning of Current Year	End of Year					
SSE	20	Total assets (Part X. line 16, RDV 2 5 2013		660,845.	793,242.					
Wet As	21	Total liabilities (Part X, line 26)	"	0.	0.					
		Net assets or fund balances Subtract line 21 from the Strategy Communication of the Communica		660,845.	793,242.					
	art II	Signature Block								
		ities of perjury, I declare that I have examined this refurn, including accompanying schedules a			knowledge and belief, it is					
,176	, Jorrec	t, and complete. Declaration of preparer tother than officers is based with all information of which	n preparer	has any knowledge.						
		Signature of officer		Date						
Sig	n			Jate						
He	re	MICHAEL JACKSON, PRESIDENT Type or print name and "it e								
			77	ate I	, 59m					
٥.		Print/Type preparer's name Preparer's signatura		1:	PTN					
	ROBIN LUTZ, CPA, MT ROBIN LUTZ, CPA, MT 10/25/12 P00002811									
	parer	Firm s name WIPFLI LLP	<u> </u>	Frm s EIN	39-0758449					
USE	Only	Frm s address 2901 E. ENTERPRISE AVE. SUITE 500	J		220 5500					
_		APPLETON, WI 54913		Phone no. (5	920) 739-6500					
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No					
351	19. O1 5	2 12 LHA For Paperwork Reduction Act Notice, see the separate instruction.	5.		Form 990 (2017)					

COMMITTEE, INC. orm 990 (2011) 39-1706666 Page 2 Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: NONE Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O. Yes X No 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. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.) (Expenses \$ including grants of \$) (Revenue \$ PROMOTE THE BETTERMENT OF INDUSTRIAL AND CONSTRUCTION WORKERS BY SUPPORTING THE ACTIVITIES OF THE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA INCLUDING IDENTIFYING GOALS AND PROGRAMS, AND COMMUNICATING THE GOALS, AIMS, AND CAUSES OF THE UBC AND GENERAL EDUCATION OF THE CONSTRUCTION AND INDUSTRIAL WORKERS. Including grants of \$) (Expenses \$ (Code ___ (Code _____) (Expenses \$ ____ 4d Other program services (Describe in Schedule O.) including grants of \$

MIDWEST DISTRICT PROMOTIONAL

Total program service expenses ▶

Form 990 (2011) COMMITTEE, INC.
Part IV Checklist of Required Schedules

-	*		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		х
	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		Х
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		
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	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	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, XII, and XIII is optional	12b	L	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			١.,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	۱		J
40	or entity located outside the United States? 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 assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40		x
47	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16	 	
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	 	^
10	1c and 8a? If "Yes," complete Schedule G, Part II	40		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	├	 ^``
	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	 	†
			990	2011)

	•	MIDWEST DISTRICT PROMOTIONAL			
			<u> 39-1706666</u>	P	age 4
Pa	t IV	Checklist of Required Schedules (continued)			
•		4		Yes	No
21'	Did 1	the organization report more than \$5,000 of grants and other assistance to any government or organization in	the		
	Unit	ed States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did 1	the organization report more than \$5,000 of grants and other assistance to individuals in the United States on	Part IX,		
	colu	ımn (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did 1	the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's c	urrent		
	and	former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Sch	edule J	23		X
24a	Did '	the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 a	s of the		
	last	day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and comple	ete		
	Sch	edule K If "No", go to line 25	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 defi	ease		
	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	Sec	tion 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with	a		
	dısq	jualified person during the year? If "Yes," complete Schedule L, Part I	25a	L	
b	Is th	ne 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," comp	lete		
	Sch	edule L, Part I	25b		
26	Was	s a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	disqualified		
	pers	son outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did	the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	con	tributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family mem	ıber		
	of a	ny of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was	s the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	ınstı	ructions for applicable filing thresholds, conditions, and exceptions):			
а	Αcι	urrent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A fa	mily member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, I	Part IV 28b		X
C	An e	entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was a	an officer,		
	-	ctor, trustee, or direct or indirect owner? If "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	Dıd	the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservat	ion l		
	- con	tributions? If "Yes," complete Schedule M	30		X
31	Dıd	the organization liquidate, terminate, or dissolve and cease operations?			
	If "Y	es, " complete Schedule N, Part I	31		X
32	Dıd	the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Sch	edule N, Part II	32	<u> </u>	X
33	Dıd	the organization own 100% of an entity disregarded as separate from the organization under Regulations			
		tions 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34		s the organization related to any tax-exempt or taxable entity?			l
		es," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
		the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ		the organization receive any payment from or engage in any transaction with a controlled entity within the mea	aning of		
	sec	tion 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

> Х Form **990** (2011)

X

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36

37

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

	, Check if Schedule O contains a response to any question in this Part V					
		Т	Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0					
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
	(gambling) winnings to prize winners?	1c		X		
2 a	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 0					
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	ľ				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X		
b	If "Yes," enter the name of the foreign country:					
F-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			v		
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?						
6a		5c				
	any contributions that were not tax deductible?	6a		х		
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				
þ	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				
	If "Yes," indicate the number of Forms 8282 filed during the year			-		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f				
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h				
8 .	A CONTRACT OF THE CONTRACT OF	''' 				
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12					
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b					
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		i			
a b	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against					
_	amounts due or received from them.)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1.20				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	13a				
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans 13b					
С	Enter the amount of reserves on hand					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х		
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	004 **		
		rorm	330 ((2011)		

MIDWEST DISTRICT PROMOTIONAL

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39-1706666

COMMITTEE, INC. 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 in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 8 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? X Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? $\overline{\mathbf{x}}$ b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? $\overline{\mathbf{X}}$ 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c -Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 arrangement with a X taxable entity during the year? 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. W Upon request Own website Another's website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: DAVE THARP - 317-807-8722

46225

2635 MADISON AVE, INDIANAPOLIS, IN

MIDWEST DISTRICT PROMOTIONAL

Form 990 (2011) COMMITTEE, INC.

39-1706666

<u> Page</u> **7**

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

Check if Schedule O contains a response to any question 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.

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

X Check this box if neither the organization ne	or any related	orga	<u>niz</u> a	ation	oo r	mpe	nsa	ted any current officer, o	director, or trustee.			
(A)	(B)		(C)					(D)	(E)	(F)		
Name and Title	Average	(do			ntion	than	one	Reportable	Reportable	Estimated		
	hours per	box	, unle:	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of		
	week (describe			Γ	Γ	Γ	Ė	from the	from related organizations	other compensation		
	(describe hours for related organizations in Schedule O)	direct				Ē		organization	(W-2/1099-MISC)	from the		
	related	te o	ıstee			nsate	l	(W-2/1099-MISC)	,	organization		
	organızations	L Eus	nal tru		oyee	d E S				and related		
	ın Schedule	Mgr	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1)	(O)	르	Ins	8	ã	운동	호					
(1) DAVID THARP TREASURER	0.00	x						0.	0.	0.		
(2) FRANK LIBBY	0.00	^	_		⊢	├	├	· · ·	0.	<u> </u>		
TRUSTEE	0.00	x						0.	0.	0.		
(3) TERRY NELSON	0.00	₽		\vdash	\vdash	\vdash	\vdash	 	0.	<u></u>		
VICE CHAIRMAN	0.00	x			ļ			0.	0.	0.		
(4) BOBBY YEGGY			 			\vdash	\vdash	 				
VICE PRESIDENT	0.00	x					l	0.	0.	0.		
(5) DANIEL O'DONNELL					T		Г	1				
TRUSTEE	0.00	Х						0.	0.	0.		
(6) MICHAEL JACKSON										144.		
CHAIRMAN	0.00	X						0.	0.	0.		
(7) STEPHEN HECKWINE												
SECRETARY	0.00	X						0.	0.	0.		
(8) JOHN RAINES						[
TRUSTEE	0.00	X		<u> </u>		L	$oxed{oxed}$	0.	0.	0.		
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Page 8

r at	Section A. Officers, Directors, Tru		mple	oyee			High	est		ees (continued)				
•	·, (A)	l . I Beaties			(D)	(E)			(F)					
	Name and title	Average	(do				than	one	Reportable	Reportable		Es	timate	ed
		hours per	box	, unle	ss pe	rson	s bot	h an	compensation	compensation		ar	nount	of
		week (describe	├─	JG 21		0010	aus	.00)	from	from related			other	
		(describe hours for	Individual trustee or director						the	organization			pensa	
		related	5	82			zated		organization	(W-2/1099-MIS	SC)	C) from the organization		
		organizations	l age	trust	١.,	ę,	ubeu		(W-2/1099-MISC)			_	anızat d relat	
		ın Schedule	를	E E	١.,	e di	is as	ا					anızatı	
		O)	ğ	Institutional trustee	Officer	Key employee	Highest compensated employee	orme				U.g.		00
			=	=	٦	¥	1	_						
	·													
														
					_		-			·				
			L.											
														-
												·		
			_	_	_				<u> </u>					
1b	Sub-total	L	1		L	<u> </u>	├	L	0.	7.00	0.			0.
С	Total from continuation sheets to Part VI	I, Section A					•		0.		0.			0.
	Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wh	no re	eceived more than \$100	0,000 of reportab	le			,
	compensation from the organization									•				0
3	Did the organization list any former officer,	director or tri	ieta	o ka	av er	mnic	nvee	or	highest compensated e	molovee on			Yes	No
	line 1a? If "Yes," complete Schedule J for s			C, N	.y C	пріс	Jycc	, 01	riigilest compensated e	inployee on		3		х
4	For any individual listed on line 1a, is the su			 ama	ensa	atior	 n and	to b	her compensation from	the organization		_		_==
	and related organizations greater than \$150									ino organization		4		Х
5	Did any person listed on line 1a receive or a					-		elat	ted organization or indiv	idual for services	;			
Sec	rendered to the organization? If "Yes," cometion B. Independent Contractors	plete Schedul	le J i	for s	uch	pers	son		···		-	5		Х
1	Complete this table for your five highest co	mpensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of cor	npens	ation	from	
	the organization. Report compensation for								n the organization's tax					
	(A) Name and business	address	N	ONI	E				(B) Description of s	services	c		C) nsatio	n
		-												
					 -	-		\dashv		 -				
								_						
														
	Table with a standard							-	<u> </u>					· .
2	Total number of independent contractors (i \$100,000 of compensation from the organic	_	not l	ımite	ed to		se l: 0	stec	d above) who received n	nore than				
	Tourist Home or game						-						990 /	0044

MIDWEST DISTRICT PROMOTIONAL COMMITTEE, INC. Form 990 (2011) 39-1706666 Page 9 Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns b Membership dues 1b c Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f **Business Code** 134,688. 2 a MEMBERSHIP DUES 900099 134,688. Program Service Revenue All other program service revenue 134,688. Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,658 other similar amounts) 4 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross rents Less: rental expenses Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19

1,658. b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue Total. Add lines 11a-11d 136,346. Total revenue. See instructions. 134,688. 1,658. 132009 01-23-12 Form 990 (2011)

39-1706666 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a response to any question in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and								
	organizations in the United States. See Part IV, line 21								
2	Grants and other assistance to individuals in								
	the United States. See Part IV, line 22			'					
3	Grants and other assistance to governments,								
	organizations, and individuals outside the								
	United States. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,			İ					
	trustees, and key employees								
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan accruals and contributions (include								
	section 401(k) and section 403(b) employer contributions)				-				
9	Other employee benefits								
10	Payroll taxes				<u> </u>				
11	Fees for services (non-employees).								
а	Management								
b	Legal .	2,500.		<u> </u>					
C	Accounting	2,300.							
d	Lobbying Professional fundraising services. See Part IV, line 17								
e f		······································							
g	Investment management fees Other	10.							
12	Advertising and promotion								
13	Office expenses	1,439.			 				
14	Information technology								
15	Royalties								
16	Occupancy	······································							
17	Travel		· · · · · · · · · · · · · · · · · · ·						
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	_							
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization		<u>-</u>						
23	Insurance								
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)								
а	,								
b									
C									
d									
	All other expenses	· · ·							
25	Total functional expenses. Add lines 1 through 24e	3,949.							
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 rf following SOP 98-2 (ASC 958-720)								

	•	MIDWEST DISTRI		MOTIONAL			
	990 (2011) COMMITTEE, INC	:-			<u> 39-</u>	1706666 Page 1
Par	t X	Balance Sheet					
·		·			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			113,804.	1	244,543
	2	Savings and temporary cash investments			547,041.	2	548,699
I	3	Pledges and grants receivable, net				3	
l	4	Accounts receivable, net	_			4	
	5	Receivables from current and former officers, d	rectors, trus	tees, key			
		employees, and highest compensated employe			1 1 8		
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	defined und	ler section	The state of the s		
		4958(f)(1)), persons described in section 4958(c	contributing	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instru	Address And a former when the total and a former was a former when the total and the former was a former was	6	-		
Assets	7	Notes and loans receivable, net				7	
Ass	8	Inventories for sale or use				8	
`	9	Prepaid expenses and deferred charges		·		9	
	10a	Land, buildings, and equipment: cost or other					
		basis Complete Part VI of Schedule D	10a	86,184.			
	ь	Less. accumulated depreciation	10b	86,184.	0.	10c	0
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets	•		14		
	15	Other assets. See Part IV, line 11	•	·		15	
	16	Total assets. Add lines 1 through 15 (must equ	ıal line 34)		660,845.	16	793,242
	17	Accounts payable and accrued expenses				17	
	18	Grants payable	• •	•		18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
က္က	21	Escrow or custodial account liability. Complete	Part IV of Sc	hedule D		21	
<u>iti</u>	22	Payables to current and former officers, director	rs, trustees,	key employees,	,		
Liabilities	١٠	highest compensated employees, and disqualit			1		
ן כ		of Schedule L	·		**************************************	22	
	23	Secured mortgages and notes payable to unrel	ated third pa	nties		23	
	24	Unsecured notes and loans payable to unrelate	ed third partie	es		24	
	25	Other liabilities (including federal income tax, pa	ayables to re	lated third			
		parties, and other liabilities not included on line	s 17-24). Coi	mplete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			0.	26	0
		Organizations that follow SFAS 117, check h	ere 🕨 🗀	and complete			
es	l	lines 27 through 29, and lines 33 and 34.				1	
anc	27	Unrestricted net assets				27	
3al	28	Temporarily restricted net assets				28	ļ <u>-</u>
힏	29	Permanently restricted net assets .			<u> </u>	29	
Ξ.	1	Organizations that do not follow SFAS 117, or	check here	▶ X and	Water the same of		
P		complete lines 30 through 34.			,		
ets	30	Capital stock or trust principal, or current funds	s		0.	30	0
SS	31	Paid-in or capital surplus, or land, building, or e	quipment fui	nd	0.	31	0
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or ot	her funds	660,845.		793,242
Ž	33	Total net assets or fund balances			660,845.		793,242
	34	Total liabilities and net assets/fund balances			660,845.	34	793,242

MIDWEST DISTRICT PROMOTIONAL 39-1706666 Page 12 COMMITTEE, INC. Form 990 (2011) Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 136,346. 1 Total revenue (must equal Part VIII, column (A), line 12) 3,949. 2 Total expenses (must equal Part IX, column (A), line 25) 2 132,397. 3 Revenue less expenses. Subtract line 2 from line 1 3 660,845. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 0. Other changes in net assets or fund balances (explain in Schedule O) 5 793,242. Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes No 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 O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 2b Were the organization's financial statements audited by an independent accountant? c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, 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 in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both. Consolidated basis Both consolidated and separate basis Separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

X

За

3b

Form 990 (2011)

Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

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

	e organization answered "Yes" to l Section 501(c)(4), (5), or (6) organizat		ky Tax), or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ne of organization MIDWEST COMMITT	DISTRICT PROMOTEE, INC.			oyer identification number 39-1706666
Pa	rt I-A Complete if the org	anization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political expenditures Volunteer hours			ın Part IV.	0.
Pa	rt I-B Complete if the org	anization is exempt un	der section 501(c)	(3).	
	Enter the amount of any excise tax	· -		▶\$	
	Enter the amount of any excise tax		•	5 ▶\$	
	If the organization incurred a section Was a correction made?	n 4955 tax, did it file Form 472	0 for this year?		Yes No
	If "Yes," describe in Part IV.		••		└─ Yes └─ No
	rt I-C Complete if the org	anization is exempt un	der section 501(c)	, except section 501(c)(3).
4	exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were pri political action committee (PAC). If a	1120-POL for this year? nployer identification number (lition listed, enter the amount particularly and directly delivered to	 EIN) of all section 527 po aid from the filing organi o a separate political org	olitical organizations to whici ization's funds. Also enter the ganization, such as a separa	e amount of political
	(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.

Schedule C (Form 990 or 990-EZ) 2011

MIDWEST DISTRICT PROMOTIONAL

Schedule C (Form 990 or 990 EZ) 2011	COMMI	TEE,	INC.			1706666 Page 2			
Part II-A Complete if the org			mpt under sectio	n 501(c)(3) and fil	ed Form 5768				
, (election under sec	tion 501	(h)).							
	Check 🕨 📖 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,								
expenses, and share of excess lobbying expenditures).									
B Check 🕨 📖 if the filing organizat	tion check	ed box A ar	nd "limited control" pro	visions apply.					
		ying Expe eans amou	nditures unts paid or incurred.)	1	(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influ	ence publ	ic opinion (grass roots lobbying)						
b Total lobbying expenditures to influ	•			•		 			
c Total lobbying expenditures (add li	•								
d Other exempt purpose expenditure									
e Total exempt purpose expenditure		 s 1c and 1c	(t	•	=	1			
f Lobbying nontaxable amount. Enter				h columns.					
	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:					†			
Not over \$500,000 20% of the amount on line 1e.									
	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 \$1,5	ess over \$1,000,000.								
Over \$1,500,000 but not over \$17,			00 plus 5% of the exce						
	Over \$17,000,000 \$1,000,000.								
		 							
g Grassroots nontaxable amount (en	ter 25% of	fline 1f)		· · · · · · · · · · · · · · · · · · ·					
h Subtract line 1g from line 1a. If zero or less, enter -0-									
i Subtract line 1f from line 1c. If zero						 			
j If there is an amount other than ze			line 1i, did the organiza	tion file Form 4720					
reporting section 4911 tax for this						Yes No			
(Some organiz	ations tha	t made a s	eraging Period Under section 501(h) election e instructions for line	do not have to comp					
	Lobb	ying Expe	ndıtures During 4-Yea	r Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total			
2a Lobbying nontaxable amount	-								
b Lobbying ceiling amount			ι,						
(150% of line 2a, column(e))			·						
c Total lobbying expenditures									
d O									
d Grassroots nontaxable amount					<u> </u>	 			
e Grassroots ceiling amount				1					
(150% of line 2d, column (e))		د, `				 			
f Grassroots lobbying expenditures									

MIDWEST DISTRICT PROMOTIONAL Schedule C (Form 990 or 990-EZ) 2011 COMMITTEE, INC. 39-1706666 Page 3 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 each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description (a) (b) of the lobbying activity. Yes No **Amount** 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)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total, Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 X Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a **b** Carryover from last year 2b c Total 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A; and Part II-B, line 1, Also, complete this part for any additional information.

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

MIDWEST DISTRICT PROMOTIONAL

COMMITTEE, INC.

Employer identification number 39-1706666

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund:	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		· · · · · · · · · · · · · · · · · · ·
4	Aggregate value at end of year	-	· · · · · · · · · · · · · · · · · · ·
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
_	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		•
	impermissible private benefit?	advisor, or for any other purpose	Yes No
Par		anization answered "Yes" to Form 990. I	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space	Treservation of a cen	tined historic structure
2	Complete lines 2a through 2d if the organization held a qualif	ued conseniation contribution in the form	of a conservation ecoment on the last
_		led conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
_	Total number of conservation easements		
a	Total acreage restricted by conservation easements		2a 2b
0	Number of conservation easements on a certified historic stri	voture included in (a)	2c 2c
ر م	Number of conservation easements included in (c) acquired a	• •	
d	• • •	arter 6/17/06, and not on a historic struct	i I
3	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the tax
4	year ▶	coment is legated	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) above	-	
Ū	and section 170(h)(4)(B)(ii)?	c satisfy the requirements of section 170	Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expens	
•	include, if applicable, the text of the footnote to the organization		
	conservation easements.	norts marcial statements that describes	the organization's accounting for
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures. or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	section, or recognition in faction and or pe	solid dol vide, provide the following arribants
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X	•	
2	If the organization received or held works of art, historical tre	asures or other similar assets for financia	al gain, provide
-	the following amounts required to be reported under SFAS 1		ai gaiii, piovide
•	Revenues included in Form 990, Part VIII, line 1	10 page stells.	• •
a h	Assets included in Form 990, Part X	•	\$
U	rasets included in Fulli 330, Fall A		. ~ 9

MIDWEST DISTRICT PROMOTIONAL COMMITTEE, INC.

	dule D (Form 990) 2011 COMMITTE		_							Page 2
Par	t III Organizations Maintaining C	ollections of A	Art, His	torical Tr	easures, d	or Other	Simila	r Asse	ts (contu	nued)
3	Using the organization's acquisition, accession	on, and other reco	rds, chec	k any of the	following tha	it are a sig	nificant u	se of its	collection	items
	(check all that apply):									
а	Public exhibition		d 🖳	Loan or exc	hange progra	ams				
b	Scholarly research		е 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and expl	ain how th	ney further t	he organizatı	on's exem	pt purpos	se in Par	t XIV.	
5	During the year, did the organization solicit or	receive donation	s of art, hi	istorical trea	sures, or oth	er similar a	assets		_	
	to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or									
	reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included									
	on Form 990, Part X?								J Yes	L No
b	If "Yes," explain the arrangement in Part XIV a	and complete the	following	table.			, ,			
									Amount	
С	Beginning balance						1c			
d	Additions during the year			•			1d			
е	Distributions during the year			•			1e			
f	Ending balance	•					1f			
	Did the organization include an amount on Fo	orm 990, Part X, lır	ne 21?						∀es	└─ No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete if									
		(a) Current year	(b) P	rior year	(c) Two year	rs back (c	1) Three ye	ars back	(e) Four	years back
1a	Beginning of year balance		+							
b	Contributions		 							
C	Net investment earnings, gains, and losses		 		ļ					
đ	Grants or scholarships		+							
е	Other expenditures for facilities									
	and programs		 		<u> </u>					
T	Administrative expenses		+							
g	End of year balance		() 1		-\\				<u> </u>	
2	Provide the estimated percentage of the curre	ent year end bala		g, column (a	aj) neid as.					
a	Board designated or quasi-endowment	%	%							
b	Permanent endowment	% %								
ر	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should be a s									
32			ization the	at are held s	and administs	arad for the	o organiza	ation		
Ja	Are there endowment funds not in the possession of the organization that are held and administered for the organization							Yes No		
	by: (i) unrelated organizations								3a(i)	165 140
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	listed as required	 Lon Scher	dule R2					3b	
4	Describe in Part XIV the intended uses of the	•		•						
_	t VI Land, Buildings, and Equipm					-				
	Description of property	(a) Cost or		† .	or other	(c) Acc	cumulated	<u>, </u>	(d) Book	value
	property (basis (investment)		basis (other)		depreciation			(5) 2551 14140	
1a	Land		-			4 a 1				
	Buildings			8	6,184.		86,18	4.		0.
	Leasehold improvements		-						-	
	Equipment				. :					
	Other			ĺ						
	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Pa	art X, colui	nn (B), line	10(c))			ightharpoonup		0.

, (a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: Cost or end-of-year market value		
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)			<u></u> -	···	
(H)					
<u>(I)</u>					
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)					
Part VIII Investments - Program Related.	See Form 990, Part X, line	e 13.			
(a) Description of investment type	(b) Book value	Co	(c) Method of valuation: Cost or end-of-year market value		
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)				· · · · · · · · · · · · · · · · · · ·	
(9)				70 AA	
(10)					
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)		 			
Part IX Other Assets. See Form 990, Part X, III				T	
	a) Description			(b) Book value	
(1)					
(2)		· · · · ·			
(3)					
<u>(4)</u>		······		· · · · · · · · · · · · · · · · · · ·	
				<u> </u>	
(7)					
(8)			•		
(9)				<u></u>	
(10)			•		
Total. (Column (b) must equal Form 990, Part X, col (B) I	line 15)				
Part X Other Liabilities. See Form 990, Part	Y line 25	·	<u></u>	<u></u>	
1. (a) Description of liability	Λ, πιε 25.	(b) Book value	7		
(1) Federal income taxes	· · · · · · · · · · · · · · · · · · ·	(2) 2001 14.00	-		
(2)		 -·	1		
(3)			,		
(4)			1		
(5)	· · · · · · · · · · · · · · · · · · ·	-			
			1		
(6)			1		
			,		
		-	1		
<u>(9)</u> (10)			.		
	<u>.</u>		,		
(11)	l== 05 \				
Total. (Column (b) must equal Form 990, Part X, col (B) I	e to the organization's financial sta	atements that reports the organ	ization s liability for uncerta	HARY MASHIANS MANAGE	

MIDWEST DISTRICT PROMOTIONAL COMMITTEE, INC.

Sche	dule D (Form 990) 2011 COMMITTEE, INC.		39-1	706666 Page 4			
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements							
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		136,346.			
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		3,949.			
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		132,397.			
4	Net unrealized gains (losses) on investments	4					
5	Donated services and use of facilities	5	•				
6	Investment expenses	6					
7	Prior period adjustments	7					
8	Other (Describe in Part XIV.)	8					
9	Total adjustments (net). Add lines 4 through 8	9					
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		132,397.			
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Re	evenue p	er Return				
1	Total revenue, gains, and other support per audited financial statements		1				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments 2a						
b	Donated services and use of facilities						
С	Recoveries of prior year grants						
d	Other (Describe in Part XIV.)						
е	Add lines 2a through 2d		2e				
3	Subtract line 2e from line 1		3				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b						
b	Other (Describe in Part XIV.)						
С	Add lines 4a and 4b		4c				
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5				
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With E	xpenses	per Retur	n			
1	Total expenses and losses per audited financial statements		1				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities						
b	Prior year adjustments 2b						
С	Other losses						
d	Other (Describe in Part XiV.)						
е	Add lines 2a through 2d		2e				
3	Subtract line 2e from line 1		. 3				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 1				
	Investment expenses not included on Form 990, Part VIII, line 7b						
	Other (Describe in Part XIV.)		.				
_	Add lines 4a and 4b		4c				
5 Da	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIV Supplemental Information		5				
		4. Dod N/ I		b. Dank W. Erra A. Dank			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and						
Α, (1)	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to	o provide a	ny additional i	ntormation.			
			-	· · · · · · · · · · · · · · · · · · ·			
			·				
							
			·				
			<u> </u>				

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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.

2011
Open to Public Inspection

Internal Revenue Service MIDWEST DISTRICT PROMOTIONAL Name of the organization **Employer identification number** 39-1706666 COMMITTEE, INC. FORM 990, PART VI, SECTION A, LINE 6: THIS ORGANIZATION HAS MEMBERS. FORM 990, PART VI, SECTION B, LINE 11: AN OFFICER WILL REVIEW THE FORM 990 PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 15: FORM 990, PART VI, SECTION B, LINE 15: THIS ORGANIZATION DOES NOT HAVE ANY EMPLOYEES. FORM 990, PART VI, SECTION C, LINE 19: THIS ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

Fórm **8868** (Rev: January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

OMB No. 1545-1709

ightharpoons

Form 8868 (Rev. 1-2012)

• II you a	ire ming for an Additional (Not Adtomatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	tnis torm).				
Do not co	mplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868.			
	c filing (e-file) . You can electronically file Form 8868 if y							
required t	o file Form 990-T), or an additional (not automatic) 3-mor	nth extens	sion of time. You can electronically f	ile Form 88	368 to request a	an extension		
	file any of the forms listed in Part I or Part II with the exc							
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details	on the elec	ctronic filing of the	his form,		
	irs.gov/efile and click on e-file for Charities & Nonprofits							
Part I	<u> </u>							
A corpora	ition required to file Form 990-T and requesting an auton	matic 6-mo	onth extension - check this box and	complete				
Part I only						>		
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time			
Type or					identification n	umber (EIN) or		
print	MIDWEST DISTRICT PROMOTIONAL							
File by the	COMMITTEE, INC.			X	X 39-1706666			
due date for filing your return See	e for Number, street, and room or suite no. If a P.O. box, see instructions.				ocial security number (SSN)			
instructions	566							
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			01		
Application	on	Return	Application	-	<u></u>	Return		
ls For		Code	Is For					
Form 990		01	Form 990-T (corporation)	Code 07				
Form 990	-BL	02	Form 1041-A	08				
Form 990	-EZ	01	Form 4720	09				
Form 990	-PF	04	Form 5227	10				
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11				
Form 990	-T (trust other than above)	06	Form 8870			12		
	DAVE THARP							
	poks are in the care of 2635 MADISON AV	VE - :						
	none No. ► 317-807-8722		FAX No. ► 574-273-93	14				
	organization does not have an office or place of business							
	is for a Group Return, enter the organization's four digit							
box ▶ L	. If it is for part of the group, check this box				ers the extension	n is for.		
1 ire	quest an automatic 3-month (6 months for a corporation							
ue fe	FEBRUARY 15, 2013 , to file the exemptor the organization's return for.	t organiza	tion return for the organization name	ed above.	The extension			
S	calendar year or							
Z i	X tax year beginning JUL 1, 2011	an	id ending JUN 30, 2012					
	as tax year beginning	, an	defiding		<u> </u>			
2 If th	If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period							
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
nonrefundable credits. See instructions.					\$	0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$					0.		
	ance due. Subtract line 3b from line 3a. Include your pa	-	·			^		
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.		
Caution.	If you are going to make an electronic fund withdrawal v	with this Fo	orm 8868, see Form 8453-FO and F	om 8879-	FO for payment	instructions		

LHA