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# SCANNED NOV 0 4 2013.

Form **990-EZ** 

# Short 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)

2012

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file. Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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.

Open to Public Inspection

B	Fort	the 2012 calendar year, or tax year beginning 6/01 , 2012, and ending 5/31		· 2013
<u> </u>	Addre	and applicable C	) Employe	r identification number
<u> </u>	1	change INDIANA MORTGAGE BANKERS, INC.	23-7	345226
F	Initial		E Telephon	e number
Г	Termii	FISHERS, IN 46038	317-	773-7344
F	Amen	ded return		Exemption
	Applic	ation pending	Numbe	
G	Acco	ounting Method X Cash Accrual Other (specify) ► H Check	► X if th	e organization is <b>not</b>
Ī	Web	·		h Schedule B (Form
J	Tax-e	xempt status (check only one) — $\boxed{}$ 501(c)(3) $\boxed{\overline{X}}$ 501(c) (6) $\boxed{}$ (insert no) $\boxed{}$ 4947(a)(1) or $\boxed{}$ 527 990, 99	0-EZ, or 9	990-PF)
K	Chec		ion <b>and</b> i	ts gross receipts are
		nally <b>not</b> more than \$50,000  A Form 990-EZ or Form 990 return is not required though Form 990-N (e-puctions). But if the organization chooses to file a return, be sure to file a complete return.	oostcard)	may be required (see
$\overline{}$		lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if	total	
_	asse	ts (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	<b>▶</b> \$	
Pa	rt I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the insti	ructions	
	1 4	Check if the organization used Schedule O to respond to any question in this Part I		<u> </u>
	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	105,530.
	3	Membership dues and assessments	3	88,308.
	4	Investment income	4	87.
		Gross amount from sale of assets other than inventory		
		Less cost or other basis and sales expenses 5 b		
	_	Gain or (loss) from sale of assets other-than inventory (Subtract line 5b from line 5a)	5 c	<u></u>
R	6	Gaming and fundraising events  Gross income from gaming (attach-Schedule-G if greater than \$15,000)  6a		
Ê				
Ė	0	Gross income from fundraising events (not including \$ of contributions		
RE>E2UE		from fundraising events reported on line 1) (attachr schedule G if the sum of such gross income and contributions exceeds \$15,000)		
_	c	Less direct expenses from gaming and fundraising events 6c		
	, ا	Net income or (loss) from gaming-and-fundraising-events (add lines 6a and		
	١	6b and subtract line 6c)	6 d	
	7 a	Gross sales of inventory, less returns and allowances 7 a		
	b	Less cost of goods sold 7b		
	с	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7 c	1
	8	Other revenue (describe in Schedule O)  SEE SCHEDULE O	8	156.
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶ 9	194,081.
	10	Grants and similar amounts paid (list in Schedule O)	10	5,565.
	11	Benefits paid to or for members	11	
E	12	Salaries, other compensation, and employee benefits	12	
P	13	Professional fees and other payments to independent contractors	13	87,348.
EXPENSES	14	Occupancy, rent, utilities, and maintenance	14	<u> </u>
Ĕ	15	Printing, publications, postage, and shipping	15	1,214.
•	16	Other expenses (describe in Schedule O)  SEE SCHEDULE O	16	94,831.
	17	Total expenses. Add lines 10 through 16	▶ 17	188,958.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	5,123.
ASSET S	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	ear	
ΕÈ		figure reported on prior year's return)	19	90,146.
S	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	▶ 21	95,269. (
BA	A For	Paperwork Reduction Act Notice, see the separate instructions.		Form <b>990-EZ</b> (2012)

	Check if the organization used Sche	tructions for Part II.)	estion in this Part II			X
	,	`		) Beginning of yea	r	(B) End of year
22	Cash, savings, and investments			92,719.	22	97,842.
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25 26	Total assets Total liabilities (describe in Schedule O)	SEE SCHEDUL	E O ⊢	92,719.	25	97,842.
27	Net assets or fund balances (line 27 of			2,573.		2,573.
	t III Statement of Program Service Ac			90,146	27	95,269. Expenses
rai	Check if the organization used Sci	hedule O to respond to any c	uestion in this Part III	X	(Req	urred for section 501
What	is the organization's primary exempt purpose? SEI	E SCHEDULE O			(c)(3)	) and 501(c)(4)
Desc	cribe the organization's program service ac	ccomplishments for each of i	ts three largest program	services, as	019a1 4947	nizations and section (a)(1) trusts, optional
bene	cribe the organization's program service as sured by expenses. In a clear and concise fited, and other relevant information for e	ach program title.	es provided, the numbe	er of persons	for of	thers)
28	APPROXIMATELY 150 MEMBER					
	PRESENTED BY THE ORGANIZA	TION FOR THEIR ED	JCATION AND MUT	UAL GOALS.		
				]		
	(Grants \$ ) If th	is amount includes foreign gi	rants, check here	<u> </u>	28 a	52,448.
29						
	(Grants \$ ) If th	is amount includes foreign g	rants chack here	╌╌╌╌	29 a	
30	(Grants 5) in this	is amount includes loreigh g	ants, theth here		29 a	10.0
50						
				~		
	(Grants \$ ) If th	is amount includes foreign gi	rants, check here		30 a	
31	Other program services (describe in Scho	edule O)	<u>-</u> <u>-</u>			
	(Grants \$ ) if the	is amount includes foreign gi	rants, check here	▶ □	31 a	
32	Total program service expenses (add lir	nes 28a through 31a)		•	32	52,448.
Par	<u>t Ⅳઃ</u> List of Officers, Directors,	Trustees, and Key Em	ployees. List each one eve	en if not compensated (	see th	e instructions for Part IV )
	Check if the organization used Sch		T	(d) Health benefits		
	(a) Name and Title	<ul><li>(b) Average hours per week devoted to</li></ul>	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to emplo benefit plans, and defe	yee	(e) Estimated amount of other compensation
		position	(If not paid, enter -0-)	compensation		outer compensation
	NET_JOHNSON_		_			
I DAN	ST PRESIDENT	1	0.		0.	0.
	/ID GEDDE	1			_	
PRE	/ID_GEDDE SIDENT	1	0.		0.	0.
PRE PAI	VID GEDDE SSIDENT MER MILES	1	0.		0.	0.
PRE PAI DIF	VID GEDDE ESIDENT MER MILES RECTOR	1			_	
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PRE PAI DIF TOM DIF JOE DIR AND	ZID GEDDE ESIDENT MER MILES MECTOR MEDDERICH MECTOR HUNTZINGER MECTOR MECTOR MECTOR MECTOR MECTOR MECTOR	1	0. 0. 0.		0. 0. 0.	0. 0. 0.
PRE PAI DIF TOM DIF JOE DIR AND	ZID GEDDE ESIDENT MER MILES RECTOR MEDDERICH RECTOR HUNTZINGER RECTOR MY YERGLER RECTOR		0. 0.		0. 0.	0. 0.
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PRE PAI DIF TOM DIF DIF AND DIR PAT SEC	ZID GEDDE ESIDENT  MER MILES RECTOR M HEDDERICH RECTOR E HUNTZINGER RECTOR DY YERGLER RECTOR RICIA SPRINKLE RETARY/TREAS	1	0. 0. 0.		0. 0. 0.	0. 0. 0.
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PRE PAI DIF TOM DIF AND DIR PAT SEC KIM DIR	ZID GEDDE ESIDENT EMER MILES RECTOR M HEDDERICH RECTOR E HUNTZINGER RECTOR EY YERGLER RECTOR RICIA SPRINKLE RETARY/TREAS I HARRIS ECTOR	1	0. 0. 0.		0. 0. 0.	0. 0. 0. 0.
PREPAIR	ZID GEDDE ZSIDENT  MER MILES RECTOR  M HEDDERICH RECTOR  Z HUNTZINGER RECTOR  ZY YERGLER RECTOR  RICIA SPRINKLE RETARY/TREAS MARRIS ECTOR  LE AVERY	1	0. 0. 0. 0. 0.		0. 0. 0. 0.	0. 0. 0. 0. 0.
PREPAIL PAIL DIFF TOM DIFF AND DIFF AND PAT SEC KIM DIR SUS VIC	ZID GEDDE ZSIDENT  MER MILES MECTOR MEDDERICH MECTOR MECTO	1 1 1	0. 0. 0. 0.		0. 0. 0. 0.	0. 0. 0. 0.
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PRE PAI DIF TOM DIF TOM DIF AND DIF AND DIF SEC VICE THO DIF THE DIF T	ZID GEDDE ZSIDENT  MER MILES RECTOR  MEDDERICH RECTOR  HUNTZINGER RECTOR  PY YERGLER RECTOR  RICIA SPRINKLE RETARY/TREAS  HARRIS ECTOR  ELE AVERY ELE AVERY ELE PRESIDENT  MAS W. DINWIDDIE FAL COUNCIL INE ARCHER ECTOR  EXY MINIX	1 1 1 1 1 1	0. 0. 0. 0. 0. 0.		0. 0. 0. 0. 0.	0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.
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Pa	irt V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V			П
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O	33	103	X
34				
	a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		Х
35	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	25		7,
	<b>b</b> If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 a		<u> X</u>
		33.0		
	c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c	X	
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	25		<u> </u>
37	a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0.	36		X
<i>3,</i>	b Did the organization file <b>Form 1120-POL</b> for this year?	37 b		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 tax year covered by this return?  b If 'Yes,' complete Schedule L, Part II and enter the total	38 a		Х
	amount involved  38b		-	
39	Section 501(c)(7) organizations Enter			
	a Initiation fees and capital contributions included on line 9  N/A	ļ		
	b Gross receipts, included on line 9, for public use of club facilities  N/A			1
40	a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 N/A, section 4912 N/A, section 4955 N/A			
	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 did it engage in an excess benefit transaction in a prior year that has not been reported			
	on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	40 b		
	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.			
	d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed			,
	by the organization •0.			i
	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	40 e		X
41	List the states with which a copy of this return is filed \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	a The organization's books are in care of ► ALAN W THORUP  Located at ► PO BOX 596 FISHERS IN  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. ►		3 <u>4</u> 4_ Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 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	42 c		X
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> — Check here and enter the amount of tax-exempt interest received or accrued during the tax year	-	Yes	N/A N/A No
	a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a		<u>X</u>
	<b>b</b> Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ.	44 b		
	c Did the organization receive any payments for indoor tanning services during the year?	44 c		X
	d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?			
45	If 'No,' provide an explanation in Schedule O  a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	44 d 45 a		<del></del>
	b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,'	+3 a	Mr. 1.2	X
	be the and organization receive any payment from or organe in any transaction with a controlled citaty within the meaning of Section 512(D)(13)/ If Tes,	45 -		X
	Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)  TEEA0812L 103/14/13  FO	<b>45 b</b> m <b>990</b>		

Form <b>990</b>	-EZ (2012) INDIANA MORTGAGE BA	<u>ANKERS, INC.</u>		23-73	345226	Р	age 4
						Yes	No
	the organization engage, directly or indired didates for public office? If 'Yes,' complete		paign activities on bef	alf of or in opposition to	46	<del> </del>	X
Part VI	Section 501(c)(3) organizations		<u></u>		40	1	
I alt VI	All section 501(c)(3) organizations for lines 50 and 51.		r questions 47-49	b and 52, and comple	te the table	es	
	Check if the organization used Schedul	e O to respond to a	ny question in this Par	t VI			П
		· · · · · · · · · · · · · · · · · · ·		<del></del>		Yes	No
	the organization engage in lobbying activities plete Schedule C, Part II	or have a section 50	1(h) election in effect di	uring the tax year? If 'Yes,'	47		
<b>48</b> Is th	e organization a school as described in se	ection 170(b)(1)(A)(i	i)? If 'Yes,' complete S	Schedule E	48		
	the organization make any transfers to an		ble related organization	on?	49 a		
	es,' was the related organization a section	_			49 b		<u> </u>
	plete this table for the organization's five high loyees) who each received more than \$100,0				key		
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours	(c) Reportable compen	(d) Health benefits, sation contributions to employee	(e) Estimate	d amour	nt of
	paid more than \$100,000	to position	(Forms W-2/1099-MIS	benefit plans, and deferred compensation	other com	pensatio	nc
	·				<del> </del>		<del></del>
					Ì		
					<del> </del>	-	
<del> </del>					<del> </del>		
f Tota	I number of other employees paid over \$1	00.000					
<b>51</b> Com	plete this table for the organization's five high	nest compensated inc	dependent contractors w	rho each received more than	\$100,000 of		
com	pensation from the organization. If there is	s none, enter 'None		P.1.2			
(a)	Name and address of each independent contractor paid	more than \$100,000	(b)	Type of service	(c) Comp	ensation	1
		- <b></b>					
		· · ·		· · · · · · · · · · · · · · · · · · ·	<del> </del>		
	I number of other independent contractors	•		1	<b>-</b>		
	he organization complete Schedule A? No table trusts must attach a completed Sche		c)(3) organizations an	d 4947(a)(1) nonexempt	► ∏ <sub>Yes</sub>	. Г	No
	es of perjury, I declare that Thave examined this return, and complete Declaration of preparer (other than office		chedules and statements, and	d to the best of my knowledge and b		<u> </u>	
rue, correct,	and complete Declaration of preparer (other than office	based on all informati	on of which preparer has any	knowledge			
P!	Signature of officer	2	2	Date 7/13			
Sign Here	ALAN W THORUP	Wilh	·	EXECUTIVE DIR	EC		
	Type or print name and title	District and the			DTM		
	Print/Type preparer's name	Preparer's signature	2/1/ Date	Check I if	PTIN		
Paid	DEBORAH L. KELB	Seyorano).	1 elb 10/2	self-employed	P0017554	7	
Preparer	Firm's name DEBORAH L. KELB	CPA, PC	· · · · · · · · · · · · · · · · · · ·		00 0000	F 4 2	
Jse Only	Firm's address ► 819 E. 64TH STRI INDIANAPOLIS, II	EET STE 104 N 46220		Phone no (3)	20-0852	_	
Aay tha IS	S discuss this return with the preparer shi		tructions		17) 466-1		
ay ule ir		OWIT ADDVE: SEE ITS	ou uctions		► X Yes		No
					Form <b>990</b>	J-CZ (2	ZU (2)

### **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** 

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. Inspection

If the organization answered '	'Yes,' to Form 990,	Part IV, line 3, or Form 9	90-EZ, Part V, line 46 (P	Political Campaign Activities),	then
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- 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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

	section 501(c)(4), (5), or (6) 0	rganizations Complete Fart III			
Name	of organization			Employer identific	ation number
INI	DIANA MORTGAGE BANK	ERS, INC.		23-734522	
Pai	rt I-A   Complete if the o	rganization is exempt under secti	on 501(c) or is a :	section 527 organi	zation.
1	Provide a description of the	organization's direct and indirect political ca	ampaign activities in l	Part IV	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pai	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under s	section 4955	<b>▶</b> \$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	<b>►</b> \$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 :	Was a correction made?				Yes No
ŧ	If 'Yes,' describe in Part IV				
Pai	t I-C Complete if the o	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3)	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	activities > \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other organ	iizations for section 527	<sup>7</sup> exempt ► \$	· !
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	<b>►</b> \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	organization made payments amount of political contribution	and employer identification number (EIN) of Signal For each organization listed, enter the ansirectived that were promptly and directly delal action committee (PAC) If additional spa	nount paid from the fi ivered to a separate po	ling organization's fund ditical organization, such	s Also enter the
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

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

Schedule C (Form 990 or 990-EZ) 2012

•					
Schedule C (Form 990 or 990-EZ) 201	<sup>2</sup> INDIANA MOR	TGAGE BANKERS, I	NC.	23-734	
Part II-A Complete if section 501(	the organizatio (h)).	n is exempt under se	ction 501(c)(3) a	nd filed Form 5768 (e	lection under
	· · · · · · · · · · · · · · · · · · ·	gs to an affiliated group (and	l list in Part IV each af	filiated group member's name	
address,	EIN, expenses, and	share of excess lobbying	expenditures)		
B Check ► ☐ If the filling	ng organization che	cked box A and 'limited coi	ntrol' provisions apply	<i>1</i> .	
(The term	Limits on Lobby 'expenditures' mea	ing Expenditures ins amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditi	ures to influence pu	blic opinion (grass roots lo	bbying)		
<b>b</b> Total lobbying expendition	ures to influence a l	egislative body (direct lobb	yıng)		
c Total lobbying expenditi	ures (add lines 1a a	nd 1b)			
d Other exempt purpose of	expenditures				
e Total exempt purpose e	xpenditures (add lin	es 1c and 1d)			
f Lobbying nontaxable an both columns	nount Enter the am	ount from the following tab	ole in		· · · · · · · · · · · · · · · · · · ·
If the amount on line 1e, col	umn (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 \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess	over \$1,500,000		
Over \$17,000,000		\$1,000,000		_	
g Grassroots nontaxable a					
h Subtract line 1g from lin	ne 1a If zero or less	, enter -0-			
i Subtract line 1f from lin	e 1c. If zero or less	enter -0-			
j If there is an amount othe section 4911 tax for this	er than zero on either s year?	line 1h or line 1i, did the org	ganization file Form 47	20 reporting	Yes No
(Som	e organizations tha	4-Year Averaging Period l t made a section 501(h) el s below. See the instructi	ection do not have to	complete all of the five	
<del></del>		ying Expenditures During			<del></del> -
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	(e) Total
2 a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					- "
c Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					- <u></u> -

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule **C** (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 INDIANA MORTGAGE BANKERS, INC.		-73452		Р	age :
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	T file	d Form	5768		
5 1 No. 1 2 2 1 1 1 2 2 1 1 1 1 2 2 1 2 1 2 1	(a	1)	(	(b)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount	
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					
a 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 1i					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
<b>b</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	L				
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 50	1(c)(5)	, or			
section 501(c)(6).				Yes	No
Section 501(C)(6).					X
Were substantially all (90% or more) dues received nondeductible by members?			1		
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ul>			2		Х
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> </ul>			3	X	Х
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> </ul>	1(c)(5) Part I	II-A, lin	2 3 ction 5	01(c)	Х
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B   Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b)</li> </ul>	1(c)(5) Part I	, or sec II-A, lin	2 3 ction 5		Х
<ul> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> </ul>	1(c)(5) Part I	II-A, lin	2 3 ction 5	01(c)	Х
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B   Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political</li> </ol>	1(c)(5) Part II	II-A, lin	2 3 ction 5	01(c)	272
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> </ol>	1(c)(5) Part I	II-A, lin	2 3 ction 5	<b>01(c)</b> 63,2	X 272.
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> </ol>	1(c)(5) Part I	II-A, lin	2 3 ction 5	<b>01(c)</b> 63,2	272.
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'</li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> </ol>	1(c)(5) Part I	1 2 a 2 b	2 3 ction 5	63,2	272 395
<ol> <li>Were substantially all (90% or more) dues received nondeductible by members?</li> <li>Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> <li>Did the organization agree to carry over lobbying and political expenditures from the prior year?</li> <li>Part III-B         Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'     </li> <li>Dues, assessments and similar amounts from members</li> <li>Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).</li> <li>a Current year</li> <li>b Carryover from last year</li> <li>c Total</li> </ol>	1(c)(5) Part I	1 2a 2b 2c	2 3 ction 5	01(c) 63,2 14,8 14,8	272 395

	ouppremental information
Complete t Part II-A, li	his 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 (affiliated group list), ne 2, and Part II-B, line 1. Also, complete this part for any additional information
<b>-</b>	

BAA

### **SCHEDULE O** (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

INDIANA MORTGAGE BANKERS, INC.	23-7345226
FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE	·
EDUCATION OF MEMBERS:	·
THE ASSOCIATION SERVES APPROXIMATELY 150 MEMBERS, BELONGING TO	VARIOUS CHAPTERS
ACROSS THE STATE OF INDIANA, WHO BENEFIT FROM THE PROGRAMS PRES	SENTED BY THE
ASSOCIATION. THE ASSOCIATION HOLDS TWO MAIN EVENTS EACH YEAR,	A CONVENTION AND A
PRODUCTION AND SERVICING CONFERENCE. ALONG WITH SMALLER MONTHL	Y AND SPECIAL
MEETINGS, THESE EVENTS ARE DESIGNED TO EDUCATE AND UPDATE THE M	MEMBERS AND THE
MORTGAGE COMMUNITY ON VARIOUS TOPICS RELEVANT TO THE RESIDENTIA	AL MORTGAGE BANKING
INDUSTRY.	
	. <b>.</b>
	· <b></b>
	·
	·- <b></b>

CLIENT 02INMORT  INDIANA MORTGAGE BANKE  10/04/13  FORM 990-EZ, PART I, LINE 8 OTHER REVENUE  BANKRUPTCY PAY OFF  FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES  AWARDS & GIFTS BANK CHARGES	TOTAL \$\frac{\\$}{\\$}	23-7345226 12 11PM 156. 156.
FORM 990-EZ, PART I, LINE 8 OTHER REVENUE  BANKRUPTCY PAY OFF  FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES  AWARDS & GIFTS		156. 156.
FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES  AWARDS & GIFTS		156.
OTHER EXPENSES  AWARDS & GIFTS	\$	
	\$	
BOARD EXPENSES CONFERENCES, CONVENTIONS, AND MEETINGS DUES & SUBSCRIPTIONS INFORMATION TECHNOLOGY INSURANCE MISCELLANEOUS OFFICE EXPENSES		100. 2,260. 4,505. 74,397. 1,909. 2,946. 1,760. 500. 1,116.
TELEPHONE TRAVEL	TOTAL \$	2,709. 2,629. 94,831.
FORM 990-EZ, PART II, LINE 26 TOTAL LIABILITIES	PROTENTIA	TVD TVQ
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	BEGINNING  \$ 2,573. \$  TOTAL \$ 2,573. \$	2,573. 2,573.
•		