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Form 990

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)

OMB No 1545-0047 2012

Open to Public Department of the Treasury Internal Revenue Service Inspection ► The organization may have to use a copy of this return to satisfy state reporting requirements. . 2012, and ending For the 2012 calendar year, or tax year beginning 10/01 2013 D Employer Identification Number Check if applicable WINE & SPIRITS WHOLESALERS OF INDIANA 35-0412515 Address change 135 N. PENNSYLVANIA STREET #1175 Telephone number Name change INDIANAPOLIS, IN 46204 (317) 916-4186 Initial return Terminated G Gross receipts \$ 258,000. Amended return H(a) Is this a group return for affiliates? XINO JAMES CALVERT F Name and address of principal officer Application pending Yes Are all affiliates included?

If No, attach a list (see instructions) SAME AS C ABOVE X 501(c) (6 4947(a)(1) or 527 Tax-exempt status 501(c)(3) (insert no) H(c) Group exemption number Website: ► Other -M State of legal domicile Corporation Association L Year of Formation Form of organization Part 1 Summary Briefly describe the organization's mission or most significant activities PROMOTE INTEREST OF INDIANA WHOLESALE LIQUOR MEMBERS. Governance if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 3 Activities & Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2012 (Part V. line 2a) 5 0 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7 a b Net unrelated business taxable income from Form 990-T, line 34 7 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) 258,000. 258,000. Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 258,000 258,000. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 58,875. 53,594. 13 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) ► Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 225,386 214,765. 8 284, 261 Total expenses Add lines 13-17 (must equal Part IX, column (A) 268,359. line FEB 1 8 20 Revenue less expenses Subtract line 18 from line 12 9 - 26,261-10.359. Beginning of Current Year **End of Year** 23,498 Total assets (Part X, line 16) 27,550 20 OGDEN 21 Total liabilities (Part X, line 26) 75,706 82,013. Net assets or fund balances Subtract line 21 from line 20 -48,156-58,515Part'll Signature Block Under penalties of pe , I declare that I have ex mined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and ficely is based on all information of which preparer has any knowledge Sian Here Type or print name and title Print/Type preparer's name 2/7/14 MICHAEL S. WINSLOW, CPA self-employed P00441080 Paid Preparer Firm's name ► R J PILE, LLC Use Only Firm's address ONE INDIANA SQ, SUITE 1200 Firm's EIN ► 35-0865680 Phone no (317) 269-3454 INDIANAPOLIS, IN 46204-2066 May the IRS discuss this return with the preparer shown above? (see instructions)

		504125.	<u>.5</u>		age Z
Par	t III Statement of Program Service Accomplishments				
	Check if Schedule O contains a response to any question in this Part III				_
1	Briefly describe the organization's mission				
	PROMOTE INTEREST OF INDIANA WHOLESALE LIQUOR MEMBERS.				
	INCHOIL INTIMEDI OF INDIMEN MICHENING BIRDON INTERPRINE				
					-
2	Did the organization undertake any significant program services during the year which were not listed on the j	orior			
	Form 990 or 990-EZ?		Yes	X	No
	If 'Yes,' describe these new services on Schedule O	_	ı	ت	
_	Did the organization cease conducting, or make significant changes in how it conducts, any program services	2 [l vac	X	No
3		·	Yes	Δ	NO
	If 'Yes,' describe these changes on Schedule O				
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measur	ed by e	xpense	es.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported	of grants a	na allo	cations	s to
	others, the total expenses, and revenue, if any, for each program service reported				
4 a	(Code) (Expenses \$ including grants of \$) (Rever	nue \$)
	INCREASE PUBLIC AWARENESS OF THE INTERESTS OF THE WINE AND SPIRITS	DEALERS	OF	INDI	ANA
	MUDOLICH CONFEDENCES AND DUDI IS DELATIONS CAMPAIGNS			==	
	THROUGH CONFERENCES AND PUBLIC RELATIONS CAMPAIGNS.				
		-			
4 b	(Code) (Expenses \$ including grants of \$) (Rever	nue \$)
			- -		
			- -		
			- -		-
4 0	: (Code) (Expenses \$ including grants of \$) (Reve	nue \$)
			-		
					- -
		-			
					- - -
4 0	Other program services (Describe in Schedule O)				
4 0	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	

Form 990 (2012) WINE & SPIRITS WHOLESALERS OF INDIANA 350412515 Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 X Schedule A 1 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 2 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 Х 3 **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 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 Х 5 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. Х 6 Part I 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 Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' X 8 complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV Х 9 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 VХ 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, 11 or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule X 11 a D, Part VI **b** Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII X 11 b 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 169 If 'Yes,' complete Schedule D, Part VIII Х 11 c 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 X in Part X, line 16? If 'Yes,' complete Schedule D, Part IX 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X Х 11 f

- 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII
 - b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - ${f b}$ 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 or more? If 'Yes,' complete Schedule F, Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV
- 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 16
- Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 lines 1c and 8a? If 'Yes,' complete Schedule G, Part II
- Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III
- 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H
 - b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Х

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X

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12a

12 b

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14a

14b

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20 20 b

Yes No

Part IV Checklist of Required Schedules (continued)

		1		
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		X
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	******	X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	, ",", ', ', ', ', ', ', ', ', ', ', ', ', ',	* 2 * (3)	
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
Ė	If 'Yes' to line 35a, 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,' complete Schedule R, Part V, line 2	35b		ii.
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
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Check if Schedule O contains a response to any question in this Part V				
	1 1		Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	_0	^ K	48
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b	_0	_	1
c Did the organization comply with backup withholding rules for reportable payments to vend (gambling) winnings to prize winners?	ors and reportable gaming	1 c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State	-			
ments, filed for the calendar year ending with or within the year covered by this return	2a	0		
b If at least one is reported on line 2a, did the organization file all required federal employments		2 b		ļ
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see		<u> </u>		,
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule (3 b		ļ
4a At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other	re or other authority over, a financial account)?	4 a		X
b If 'Yes,' enter the name of the foreign country.				3.
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and		~		1
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the t		5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax she	elter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		-
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, solicit any contributions that were not tax deductible as charitable contributions?	and did the organization	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such not tax deductible?	contributions or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).		15	,	~~ =
a 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?		7 a		<u> </u>
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided		7 b		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for Form 8282?	which it was required to file	7 c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d		* * * .	-
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personate	al benefit contract?	7 e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal be	enefit contract?	7 f		
g If the organization received a contribution of qualified intellectual property, did the organiza as required?	ation file Form 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did t	he organization file a	79		
Form 1098-C?	g	7 h		, .
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ing organizations. Did the have excess business	8		<u> </u>
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?		9Ь		<u></u>
10 Section 501(c)(7) organizations. Enter			*	F3*
a Initiation fees and capital contributions included on Part VIII, line 12	10 a		ľ	Ĭ.,
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ь		(,	
11 Section 501(c)(12) organizations. Enter				1
a Gross income from members or shareholders	11 a		, i	3
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 ь		.3	
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu	of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b		3-7-	38.
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		,/		ند مد
a 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 Sched	lule O			
b Enter the amount of reserves the organization is required to maintain by the states in	Land			*
which the organization is licensed to issue qualified health plans	13b		1	
c Enter the amount of reserves on hand	13c		<u> </u>	٠,
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	 	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation if	n Schedule O	14b		(00:
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Par	t VI	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and	d for		
		a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cha Schedule O. See instructions.	anges	111	_
		Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion	A. Governing Body and Management			
				Yes	No
1 a	If the	re are material differences in voting rights among members	<u>2</u>	v	*
1.		trity to an executive committee or similar committee, explain in Schedule O the number of voting members included in line 1a, above, who are independent 1 b	2	Ģ.	, 1
_		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other	<u> </u>		,
2	office	r, director, trustee or key employee?	2		X
3	of off	ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person?	3		X
4		ne organization make any significant changes to its governing documents the prior Form 990 was filed?	4		Х
5		ne organization become aware during the year of a significant diversion of the organization's assets?	5		X
6		ne organization have members or stockholders?	6		Х
7 a	Did the	ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body?	7 a		х
ŀ	Are a	ny governance decisions of the organization reserved to (or subject to approval by) members, holders, or other persons other than the governing body?	7 b		Х
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing.	1	~ 5	Î
ā	The o	governing body?	8 a	X	
ŀ		committee with authority to act on behalf of the governing body?	8 b	X	<u> </u>
9	orgar	ere any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		Х
Sec	tion E	3. Policies (This Section B requests information about policies not required by the Internal Re	venue		T
		to the first term to make an affiliate 2	10 -	Yes	No X
	-	ne organization have local chapters, branches, or affiliates?	10 a		Λ.
	operat	did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their ions are consistent with the organization's exempt purposes?	10 b	v	
		e organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11 a	X	<u> </u>
		ribe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE One organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	<u> </u>
	W ere	officers, directors or trustees, and key employees required to disclose annually interests that could give rise inflicts?	12 b		
	: Did tl	ne organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in			7
12		dule O how this is done ne organization have a written whistleblower policy?	12 c		X
13 14		ne organization have a written document retention and destruction policy?	14		X
15	Did tl	ne process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
		organization's CEO, Executive Director, or top management official	15 a		X
		r officers of key employees of the organization	15 b		X
-		s' to line 15a or 15b, describe the process in Schedule O (See instructions)	-		
16	a Did tl taxat	he organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ole entity during the year?	16 a		<u>X</u>
I	partic	es,' did the organization follow a written policy or procedure requiring the organization to evaluate its cipation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the nization's exempt status with respect to such arrangements?	16 b		*****
Sec		C. Disclosure			
17	List t	he states with which a copy of this Form 990 is required to be filed			
18	Sections	ion 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avection. Indicate how you make these available. Check all that apply.	aılable	for pu	blic
	\Box	Own website Another's website X Upon request Other (explain in Schedule O)			
19	the pu	be in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available during the tax year SEE SCHEDULE O			
		e the name, physical address, and telephone number of the person who possesses the books and records of the org			4000
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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

- 1 a 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 nor any related organization compensated any current officer, director, or trustee (C) Position (do not check more than one box, unless person is both an (B) (A) Reportable compensation from related organizations (W-2/1099-MISC) Name and Title Estimated amount of other Average hours per week (list Reportable compensation from the organization (W-2/1099-MISC) officer and a director/trustee) compensation from the organization Highest any hours for related organiza-tions Officer Individual employee nstitutional (ey employee r director and related organizations compensated below l trustee dotted line) l trustee (1) JAMES CALVERT 1 0 0. PRESIDENT 0 Х Х 0 JAMES PURUCKER 1 0. 0 X X 0 0 EXECUTIVE SEC (3) (4) (5) (6) (7) (8) (9) (10) (11) (12)(13)(14)

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)

Name and business address

Description of services

Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 0

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Form 990 (2012)

Par	t VI	Statement of Rev Check if Schedule O		esponse to	any questi	on in this Part VIII			
,				, Advance of	y *	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		Federated campaigns	<u> </u>	1 a	*		revenue		312, 313, 01 314
2 €		Membership dues	_	1 b		- *	À	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
A P		c Fundraising events 1c d Related organizations 1d				. *,	7	-	
양물		Related organizations Government grants (contribute	<u> </u>	1 e		-			
			· -	16					
SE	f	All other contributions, gifts, q similar amounts not included	grants, and above	1 f					
돌	g	Noncash contributions include	d in Ins 1a-1f	\$					
	h	Total. Add lines 1a-1f					3 4 2 1		
18	_				ness Code			- ٪ سڪندن ساند	
2		MEMBERSHIP_DUES_&_	<u>ASSESSMEN</u>	TS		258,000.	258,000.		
PROGRAM SERVICE REVENUE	Ь	?						1	<u> </u>
	4	, 							
	e							-	
ਲ	f	All other program service	e revenue						
<u>æ</u>	g	Total. Add lines 2a-2f			,	258,000.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 % % A	,7 :
	3	Investment income (inc	luding divide	ends, intere	est and				
		other similar amounts)							
	4	Income from investmen	t of tax-exer	npt bond p	roceeds .				
	5	Royalties	(i) Real	1 (ıı) Personal		* * * * * * * * * * * * * * * * * * *	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	6 2	Gross rents	() (10		ny i croondi				
		Less rental expenses							
		: Rental income or (loss)							
	d	Net rental income or (loss)			-	The second secon	A SACONA		
	7 a	Gross amount from sales of	(i) Securiti	es	(II) Other			7.	
		assets other than inventory						* * * * * * * * * * * * * * * * * * * *	
	b	Less cost or other basis							
		and sales expenses				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	5		• • •
		: Gaın or (loss) I Net gaın or (loss)						A STATE OF THE STA	and a second a second as the second
		_	•	. \Box		× 1. 1	* * * * * * * * * * * * * * * * * * *	\$ \$:	
빌	8 a	Gross income from fund (not including \$	draising ever	nts			, ,	- ',"	*
٦		of contributions reporte	d on line 1c)					- A	
R. 8		See Part IV, line 18		a					
OTHER REVENUE	b	Less direct expenses		b		istanistika itana a inini	- N	- &	20 mm m m m m
		: Net income or (loss) fro				<u> </u>	*		ļ
	9 a	Gross income from gan See Part IV, line 19	ning activitie	s a				,	*
		Less direct expenses				- · · ·	:		<u> </u>
		Net income or (loss) from	m gaming a	ctivities		-		n saidh a Berlann	hough to manufacture of manufacture.
		, ,	•						, , , , , ,
		 Gross sales of inventor and allowances 		a				-	
		Less: cost of goods sol		b				***************************************	
	_ (Net income or (loss) fro			· · · · ·	-			
		Miscellaneous Reven	iue	Bus	iness Code				
	11 a								
		,			<u>-</u>	 	·		
	,								
	_	Total. Add lines 11a-11	d			•			
	12	Total revenue. See inst	ructions			258,000	258,000	0.	0

	TIX Statement of Functional Expens		M -th-y argonizations	must complete solumn (· · · · · · · · · · · · · · · · · · ·
Sect	ion 501(c)(3) and 501(c)(4) organizations must of Check if Schedule O contains a re	enonse to any question	n in this Part IX	nust complete column (4)
	Crieck ii Scriedule O contains a re	(A)	(B)	(C)	(D)
Do r 7b, 8	ot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	53,594.			· · · · · · · · · · · · · · · · · · ·
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			\$\$	ا - د د د د د د د د د د د د د د د د د د
5	Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
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			_	
11	Fees for services (non-employees)				
а	Management	19,657.			
ь	Legal				
	Accounting	5,500.			
_	Lobbying	146,200.		<u> </u>	
	Professional fundraising services See Part IV, line 17	140,200.			
	Investment management fees			7	
	Other (If line 11g amt exceeds 10% of line 25, col-				
9	umn (A) amt, list line 11g expenses on Sch O).				
12	Advertising and promotion	3,631.			
13	Office expenses	196.			
14	Information technology				
15	Royalties				
16	Occupancy	2,269.			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	23,273.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	72.			
23	Insurance	569.			
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 O)	*	***	* > ¥	
á	TRAVEL AND ENTERTAINMENT	8,565.			
	DUES AND SUBSCRIPTIONS	1,719.			
	CONTRIBUTIONS	900.	 		
	PROFESSIONAL FEES REIMBURSED	687.			<u> </u>
	All other expenses	1,527.			
	' '	268, 359.		 	<u> </u>
25		200,339.			
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 \(\bigcup \square \text{if following} \)				

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response to any qu	estion in this Part X				
	_			(A) Beginning of year		(B) End of year	
	1	Cash - non-interest-bearing	···	11,514.	1	7,321.	
	2	Savings and temporary cash investments			2		
l	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		15,916.	4	16,141.	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated el Part II of Schedule L	officers, directors, mployees Complete	* ************************************	5		
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958 employers and sponsoring organizations of section 50 beneficiary organizations (see instructions) Complete	(c)(3)(B), and contributing 1(c)(9) voluntary employees		6		
AS	7	Notes and loans receivable, net					
A S S E T S	8	Inventories for sale or use			8		
T S	9	Prepaid expenses and deferred charges		12.	9		
J	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 4,703.		1.		
	b	Less accumulated depreciation	10b 4,667.	108.	10 c	36.	
	11	Investments – publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 11		12			
	13	Investments - program-related See Part IV, line 11		13			
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal line	34)	27,550.	16	23,498.	
	17	Accounts payable and accrued expenses			17		
	18	Grants payable			18		
	19	Deferred revenue			19		
ŀ	20	Tax-exempt bond liabilities			20		
A	21	Escrow or custodial account liability Complete Part I		3	21	,	
A I L I T	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, directors, trustees, d disqualified persons		22		
Ļ	23	Secured mortgages and notes payable to unrelated th	urd parties		23		
I E S	24	Unsecured notes and loans payable to unrelated third			24	,	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24) Company	s to related third parties, olete Part X of Schedule D	75,706.	25	82,013.	
	26	Total liabilities. Add lines 17 through 25		75,706 <u>.</u>	26	82,013.	
N E T		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	here ► X and complete		****		
A	27	Unrestricted net assets		-48,156.	27	-58,515.	
ASSETS	28	Temporarily restricted net assets			28		
ş	29	Permanently restricted net assets	_		29		
Q R		Organizations that do not follow SFAS 117 (ASC 958)	, check here ►			é, ,	
		and complete lines 30 through 34.	_			النسلائي	
PZD F	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building, or equipment			31		
Ĺ	32	Retained earnings, endowment, accumulated income	, or other funds		32		
B4L4素ひEの	33	Total net assets or fund balances		-48,156.	33	-58,515.	
Š	34	Total liabilities and net assets/fund balances		27,550.	34	23,498.	
BA	Α					Form 990 (2012)	

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Forr	n 990 (2012) WINE & SPIRITS WHOLESALERS OF INDIANA 3504125	515 Page 12
Pa	rt XI Reconciliation of Net Assets	_
	Check if Schedule O contains a response to any question in this Part XI	
1	Total revenue (must equal Part VIII, column (A), line 12).	258,000.
2	Total expenses (must equal Part IX, column (A), line 25)	268,359.
3	Revenue less expenses Subtract line 2 from line 1	-10,359.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	-48,156.
5	Net unrealized gains (losses) on investments 5	
6	Donated services and use of facilities 6	
7	Investment expenses 7	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O).	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	-58,515.
Pa	rt XII Financial Statements and Reporting	
	Check if Schedule O contains a response to any question in this Part XII	
	Check if Schedule O contains a response to any question in this rate Att	Yes No
1	Accounting method used to prepare the Form 990	
	ın Schedule O	
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both	السدقين بدر مدون المراجع
	Separate basis Consolidated basis Both consolidated and separate basis	
	b Were the organization's financial statements audited by an independent accountant?	2 b X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	
	Separate basis Consolidated basis Both consolidated and separate basis	ن گاند ا
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?	1it, 2 c
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a X
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udit 3b

BAA

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

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) or	ganizations Complete Part III				
Name	of organization				Employer iden	tification number	
			ALERS OF INDIANA		3504125		
Par	tઃl-્A ୃ Comple	ete if the or	ganization is exempt under section	501(c) or is a sect	ion 527 organiza	tion.	
1	Provide a desc	ription of the	organization's direct and indirect political ca	mpaign activities in P	art IV	SEE PART I	[V
2	Political expend	ditures			1	> \$	53,594.
3	Volunteer hours	s					
Par	t l₌̇̀Bٍँ Compl	ete if the o	rganization is exempt under secti	on 501(c)(3).			
1	Enter the amou	int of any exc	ise tax incurred by the organization under s	ection 4955	ı	► \$	
2	Enter the amou	unt of any exc	ise tax incurred by organization managers i	under section 4955		► \$	
3	If the organizat	ion incurred a	section 4955 tax, did it file Form 4720 for t	hıs year?		Y	res No
4 8	a Was a correction	on made?				Y	res No
	f 'Yes,' describ	oe in Part IV					
Pai			rganization is exempt under secti)(3).	
1	Enter the amou	unt directly ex	pended by the filing organization for section	527 exempt function	activities	►\$	
2	Enter the amou function activiti	unt of the filing es	g organization's funds contributed to other of	organizations for section	on 527 exempt	► \$	53,594.
3	Total exempt fu	unction expen	ditures. Add lines 1 and 2 Enter here and o	on Form 1120-POL,	ı	► \$	53,594.
4	Did the filing or	rganization file	e Form 1120-POL for this year?			<u> </u>	res X No
5	organization manual	ade payments	and employer identification number (EIN) of For each organization listed, enter the anons received that were promptly and directly action committee (PAC). If additional space	nount paid from the fill v delivered to a separ	ıng organızatıon's fu ate political organiz	ınds Also ente atıon, such as	r the
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from fill organization's funds i none, enter-0-	f contributions promptly delivered to	nt of political s received and and directly o a separate ganization If enter -0-
いり	WINE & SPIRIT		135 N PENNSYLVANIA STREET INDIANAPOLIS, IN 46204	35-1455043	53,59	94.	
(2)		<u> </u>					
(3)							
(4)							
(5)							
(6)							·

35		

Part II-A Complete if t section 501	he organization (h)).	is exempt under secti	on 501(c)(3) and fil	ed Form 5768 (electi	on under
		ngs 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 ► I if the filir	ng organization chec	ked box A and 'limited cor	trol' provisions apply		
(The term	Limits on Lobby	ing Expenditures	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditu	ires to influence pub	olic opinion (grass roots lot	obying)		· · · · · · · · · · · · · · · · · · ·
,	·	egislative body (direct lobb			
c Total lobbying expenditu			. .		
d Other exempt purpose e	*				
e Total exempt purpose e	xpenditures (add lin	es 1c and 1d)		***	
f Lobbying nontaxable and both columns	nount Enter the amo	ount from the following tab	le ın		
If the amount on line 1e, coli	ımn (a) or (b) ıs	The lobbying nontaxable	amount is	Widt A S	7 4 NAX
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	1x,2	
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 of	over \$1,500,000	, , , , ,	Ar. 34. %
Over \$17,000,000		\$1,000,000		1 41.5	- *,, , , , , , ,
g Grassroots nontaxable a	amount (enter 25% o	of line 1f)			
h Subtract line 1g from lin	e 1a If zero or less	, enter -0-			
i Subtract line 1f from line	e 1c If zero or less,	enter -0-			
j If there is an amount of section 4911 tax for this	her than zero on eith year?	ner line 1h or line 1i, did th	e organization file For	m 4720 reporting	Yes No
(So	me organizations th	4-Year Averaging Period at made a section 501(h) e		complete all of the five	
`	colum	ns below. See the instructi	ions for lines 2a throug	gh 2f.)	
	LODD	ying Expenditures buring	Treat Averaging ren		
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2 a Lobbying non-taxable amount					
1 1 - h.h			**************************************	1 1 2 Mg	
b Lobbying ceiling amount (150% of line					
2a, column (e))				*	
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	\$ 18. N	* ************************************			
f Grassroots lobbying expenditures					
BAA				Schedule C (For	m 990 or 990-EZ) 2012

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)).	led For	m 57	68
	(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	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			
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?			
i Total Add lines 1c through 1i	4.7	ž	
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?	1 12	<u> </u>	*
	01/01/5	\ ~~	P 15 X &
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	o i (c)(s), or	
section 501(c)(6).			V N-
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3 X
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	01(c)(5) Part), or III-A	section 501(c) , line 3, is
Dues, assessments and similar amounts from members		1	258,000.
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		8	
a Current year		2 a	116,694.
·		2 b	110,094.
b Carryover from last year		2 c	116 604
c Total			116,694.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3	136,740.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	SS	"\$	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli-	tical		
expenditure next year?		4	0.
5 Taxable amount of lobbying and political expenditures (see instructions)		5	0.
Part IV 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, line 2, and Part II-B, line 1 Also, complete this part for any additional information	art II-A (affiliat	ed group list),
PART J-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	-		
CONTRIBTUIONS TO POLITICAL ORGANIZATIONS - PAC			
ADDITIONAL INFORMATION			
FORM 1120-POL WAS NOT REQUIRED TO BE FILED			

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, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public

Inspection Employer identification number Name of the organization

WIN	NE & SPIRITS WHOLESALERS OF IN	DIANA	350412515
Par	t I Organizations Maintaining Donor A	dvised Funds or Other Similar Funds or A	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 don are the organization's property, subject to the	or advisors in writing that the assets held in doi organization's exclusive legal control?	nor advised funds Yes No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing that grant fund of the donor or donor advisor, or for any other	s can be used only purpose conferring Yes No
Par	t II Conservation Easements. Comp	olete if the organization answered 'Ye	s' to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., re	ecreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization last day of the tax year.	n held a qualified conservation contribution in t	the form of a conservation easement on the
			Held at the End of the Tax Year
ā	Total number of conservation easements.		2a
ı	Total acreage restricted by conservation easer	nents	2 b
	Number of conservation easements on a certif	ied historic structure included in (a)	2 c
•	Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/06, and not on a histor	1C 2 d
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, or terminat	ted by the organization during the
4	Number of states where property subject to co	nservation easement is located >	
5	Does the organization have a written policy regard enforcement of the conservation easemen	garding the periodic monitoring, inspection, han	ndling of violations,
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforcing conservation ease	ments during the year
7	Amount of expenses incurred in monitoring, in ►\$	specting, and enforcing conservation easement	ts during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of sec	ction 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its revenue and the organization's financial statements that de	d expense statement, and balance sheet, and escribes the organization's accounting for
Pai	Organizations Maintaining Collect Complete if the organization and	t <mark>ions of Art, Historical Treasures, or Ot</mark> swered 'Yes' to Form 990, Part IV, Inc	her Similar Assets. e 8.
1:	alf the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIII, the text of the footnote to its finan	s held for public exhibition, education, or resear	nue statement and balance sheet works of rch in furtherance of public service, provide,
1	b If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items	SFAS 116 (ASC 958), to report in its revenue of for public exhibition, education, or research in the second	statement and balance sheet works of art, n furtherance of public service, provide the
	(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 a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets for 116 (ASC 958) relating to these items	or financial gain, provide the following
i	a Revenues included in Form 990, Part VIII, line	1	▶ \$
	b Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2012 WINE Part III Organizations Maintain	& SPIRIT	S WHOLESALERS (OF INDIANA	350412 per Similar Assets (Page 2
3 Using the organization's acquisiti						
items (check all that apply)	on, accession,			illat are a significant us	s of its cone	Clion
a Public exhibition		—	or exchange programs			
b Scholarly research		e Other				
c Preservation for future gener		d a classificaci	Al			
4 Provide a description of the organ Part XIII					. In	
5 During the year, did the organiza to be sold to raise funds rather th	nan to be main	tained as part of the org	ganization's collection?		Yes	No
Part IV Escrow and Custodial Arra reported an amount o	ingements. Co on Form 990	mplete if the organizat), Part X, line 21.	ion answered 'Yes' to	Form 990, Part IV, line	9, or	
1 a Is the organization an agent, trus	 -	·	for contributions or othe	er assets not included		
on Form 990, Part X?					Yes	No
b if 'Yes,' explain the arrangement	ın Part XIII an	d complete the following	g table			
					Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		-
f Ending balance2 a Did the organization include an a	mount on Forn	n 000 Part Y line 212			Yes	No
b If 'Yes,' explain the arrangement			ion has been provided i	n Part XIII		H
bit res, explain the arrangement	iii ait xiii o	neek here it the explant	ion nas soon provided i	Tri Git 7till		
Part V Endowment Funds. Co	mplete if th	e organization ansv	wered 'Yes' to Form	n 990, Part IV, line	10.	
	(a) Current			(d) Three years	(e) Four	years
1 a Beginning of year balance						
b Contributions						
c Net investment earnings, gains, and losses						
d Grants or scholarships						
Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						,
2 Provide the estimated percentage	e of the curren	it year end balance (line	g, column (a)) held a	S		
a Board designated or quasi-endov	vment ►	96				
b Permanent endowment	90	 				
c Temporarily restricted endowmer	nt ►	%				
The percentages in lines 2a, 2b,	and 2c should	equal 100%				
3 a Are there endowment funds not a organization by:	n the possessi	on of the organization t	hat are held and admin	stered for the	Ye	s No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	organizations li	sted as required on Sch	nedule R?		3b	
4 Describe in Part XIII the intended	d uses of the o	rganization's endowmei	nt funds			
Part VI Land, Buildings, and	Equipmen [*]	t. See Form 990, P	art X, line 10.			
Description of property		(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	∢ value
1 a Land				` .		
b Buildings						
c Leasehold improvements						
d Equipment			2,316.	2,280.		36.
e Other			2,387.	2,387.		0.
Total. Add lines 1a through 1e (Colum	ın (d) must eqi	ual Form 990, Part X, co	olumn (B), line 10(c))	<u> </u>	11.5.5	36.
BAA				Sched	dule D (Form	1 99 0) 2012

Schedule'D (Form 990) 2012 WINE & SPIRITS WE	OLESALERS OF IN	DIANA 350412	2515 Page 3
Part VII Investments - Other Securities. See Fo	orm 990, Part X, line	12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation end-of-year market	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(A) (B) (C) (D) (E)			
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
~	•		* * * * * * * * * * * * * * * * * * *
Part VIII Investments - Program Related. Se	e Form 990, Part X	, line 13. N/A	
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		end-of-year market	value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total (Column (b) mast equal remit coo, fart x, column (b) mic to.	<u> </u>	* * * · · · · · · · · · · · · · · · · ·	
Part IX Other Assets. See Form 990, Part X			
	escription		(b) Book value
(1)	-···-		
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
(10)			·
Total. (Column (b) must equal Form 990, Part X, column (
Part X: Other Liabilities. See Form 990, Par			
(a) Description of liability	(b) Book value		e_
(1) Federal income taxes		* ******	, , ,
(2) DUE TO IWLDCS	82,01	<u>.3.</u>	
(3)			,
(4)			,
(5)			~
(6)			*
(7)			
(8)			,
(9)			•
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	▶ 82,0		
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote	to the organization's financial	statements that reports the organization's liability	for uncertain tax positions
under FIN 48 (ASC 740) Check here if the text of the footnote has been pro-	lyided in Part XIII		

Page 3

Sch <u>edule Ì</u>		50412	2515	Page 4
Part XI	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	<u>m</u>	N/A	
1 Tota	I revenue, gains, and other support per audited financial statements	1		
2 Amo	ounts included on line 1 but not on Form 990, Part VIII, line 12	A		
a Net i	unrealized gains on investments 2 a	\$		
b Dona	ated services and use of facilities 2b	7		
c Reco	overies of prior year grants.	7		
d Othe	er (Describe in Part XIII.)	٦٠		
e Add	lines 2a through 2d	2 e		
3 Subt	tract line 2e from line 1	3		
4 Amo	ounts included on Form 990, Part VIII, line 12, but not on line 1	* * *		
a Inve	stment expenses not included on Form 990, Part VIII, line 7b		1	
	er (Describe in Part XIII)	, i).		
c Add	lines 4a and 4b	4 c		
5 Tota	Il revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5		
	Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn	N/A	
	I expenses and losses per audited financial statements	1		
	bunts included on line 1 but not on Form 990, Part IX, line 25	*		
	ated services and use of facilities 2a	5 %		
-	r year adjustments 2 b	- 1		
	er losses 2c			
_	er (Describe in Part XIII.)			
	lines 2a through 2d	2 e		
	tract line 2e from line 1	3		
	ounts included on Form 990, Part IX, line 25, but not on line 1:	- L ist ,		
	stment expenses not included on Form 990, Part VIII, line 7b	anagate ta		
	er (Describe in Part XIII)	٦٠. <i>•</i>		
-	lines 4a and 4b	4 c		
5 Tota	al expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5		
Part XII	Supplemental Information			
	this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV rt X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any		nal information	
	·			
BAA		Sched	dule D (Form 9	90) 2012

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

OMB No 1545-0047 2012

Open to Public. Inspection

Employer identification number

350412515

Department of the Treasury Internal Revenue Service Name of the organization

Part I General Information on Grants and Assistance WINE & SPIRITS WHOLESALERS OF INDIANA

° U X Yes

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

SEE PART IV

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to

	-			•		•	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WINE & SPIRITS WHOLESALERS PA 135 N PENNSYLVANIA SUITE 1175 INDIANAPOLIS, IN 46204	35-1455043		53,594.	0.			LOBBYING PURPOSES
(2)							
(3)							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•				•		
(b)							
<u>(</u> 6)							
<u>- (9)</u>							
<u></u>							
(8)							
	1.7						
2 Enter total number of section 501(c)(3) and government organizations list	and government orga	anizations listed in	ted in the line 1 table			•	0
3 Enter total number of other organizations listed in the line 1 table	s listed in the line 1	table				A]	1

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

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

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Schedule I (Form 990) (2012)

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.

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

350412515 WINE & SPIRITS WHOLESALERS OF INDIANA FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS A COPY OF THE 990 DRAFT IS PROVIDED TO THE PRESIDENT (SOLE BOARD MEMBER) WHO HAS THE OPPORTUNITY TO REVIEW AND REQUEST REVISIONS AS NECESSARY PRIOR TO FINAL FILING. FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE DOCUMENTS ARE PROVIDED UPON REQUEST.