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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www irs.gov/form990.

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning and e	ndıng					
_ В с	heck if policable	MECHANICAL CONTRACTORS ASSOCIATION		D Employer identif	ication number			
늗	change Name change	OF AMERICA, INC		13-0	831270			
	_instial _return		Room/suite	E Telephone number				
	Termin	· ·		•)869-5800			
	Ameno			G Gross receipts \$	13,727,769.			
	Applic tion pendir	L KOCK VIDDE, MD 20030		H(a) Is this a group i				
	beiton	for subordinate						
		SAME AS C ABOVE		H(b) Are all subordinates				
		empt status	r <u>527</u>	1	a list (see instructions)			
		e:	I Vear	of formation 1889	M State of legal domicile: NY			
	ert I	Summary	L teai	Unformation 1009	VI State of legal domicile, IV I			
		Briefly describe the organization's mission or most significant activities SEE P	ART I	II, LINE 1.				
Activities & Governance	'	<u>515.</u>			<u> </u>			
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net a	ssets			
ove.	3	Number of voting members of the governing body (Part VI, line 1a)	ا 4 ناسب و	3. <u>3</u>	27			
Ø		Number of independent voting members of the governing body (Part VI ₃ line 1b)			25			
les		Total number of individuals employed in calendar year 2013 (Part V, line 2a) NOV	1 % 5 L		25			
ΕΙΝΊ	-	Total number of volunteers (estimate if necessary)	معدادین بردر د	6	250			
Acl	l	Q -	アンドラ !	7a	 			
₹7		Net unrelated business taxable income from Form 990-T, line 34		7b	Current Year			
FEBERSESINED DE Revenus OM	8	Contributions and grants (Part VIII, line 1h)	-	805,200.				
, on	9	Program service revenue (Part VIII, line 2g)	<u> </u>	11,222,779				
୍ଦ୍ର ଚ୍ଚ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	305,656.				
تق	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		241,468				
吕	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		12,575,103.				
$\overline{\mathbb{Q}}$	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,026,924.				
ij.	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
(S)	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,930,253	4,115,004.			
O CO	16a	Professional fundraising fees (Part IX, column (A), line 11e)	ļ	0.	0.			
	b	Total fundraising expenses (Part IX, column (D), line 25)	<u>0. </u>					
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	8,227,511.				
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	_	13,184,688.				
_ <u>s</u>	19	Revenue less expenses Subtract line 18 from line 12		-609,585.				
ance	00	Total assets (Part X, line 16)	Ве	eginning of Current Year 14,582,599				
Asse	20 21	Total liabilities (Part X, line 16)		3,073,139				
Net Assets or Fund Balances	22	Net assets or fund/balances Subtract line 21 from line 20		11,509,460				
Pa	art II	Signature Block	<u>_</u> _					
Und	er pena	Ities of pergry declare that have examined this return, including accompanying schedules	and statem	nents, and to the best of r	my knowledge and belief, it is			
true	, correc	t, and complyte declarated of preparer (other than officer) is based on all information of whi	ich preparei	r has any knowledge.	<i></i>			
		NILMUM /		<i>[I] / า/</i>	14			
Sign Sign Date Date								
Her	е	JOHN GENTILLE, CEO/EXECUTIVE V.P.						
	Type or print name and title Print/Type preparer's name Preparer's stangature Date Check PTIN							
Paid		Print/Type preparer's name DAVID F. 6RALING CPA Preparer's sonature		// /// /Y f	- D 00211995			
	oarer Jarer	Firm's name GELMAN, ROSENBERG & FREEDMAN	4/1	Firm's EIN	52-1392008			
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N		1 1111 3 411	32 1332000			
	BETHESDA, MD 20814-2930 Phone no. (301) 951-9090							
May	<u>the</u> If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
3320	01 10-2	9-13 LHA For Paperwork Reduction Act Notice, see the separate instructio	ns.		Form 990 (2013)			

NATIONAL EDUCATION INITIATIVE - A SERIES OF HALF-DAY, ONE-DAY, AND
TWO-DAY COURSES WHICH DELIVER INDUSTRY-CRITICAL CONTENT ON A NUMBER OF
TOPICS. THESE COURSES ARE OFFERED ON THE LOCAL LEVEL THROUGH MCAA
AFFILIATE ASSOCIATIONS OR INDIVIDUAL MEMBER COMPANIES. COURSES INCLUDE
ADVANCED SUPERVISORY EDUCATION, FUNDAMENTALS OF PROJECT MANAGEMENT,
CLAIMS AVOIDANCE, GREEN 101, JOB OPERATIONS, PROJECT PROFITABILITY
SEMINARS, STRATEGIC MANAGEMENT AND BUILDING INFORMATION MODELING (BIM)
SEMINARS.

Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

332002 10-29-13

4e

Form **990** (2013)

Total program service expenses

Form 990 (2013) OF AMERICA, INC
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	<u>X</u> _	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		37 /	~
_	during the tax year? If "Yes," complete Schedule C, Part II	4	_N/	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ì		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X_
9	Did the organization report an amount in Part X, line 21, 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?	_		3.7
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	40		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
• •	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	х	
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	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u>X</u> _	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<u>11f</u>	<u>X</u> _	——
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	10-		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	_15		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<u>16</u>	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-		v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10	-	- <u>^</u>
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

MECHANICAL CONTRACTORS ASSOCIATION

OF AMERICA, INC

13-0831270 Page 4

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or 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		X
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? If "Yes," complete			
	Schedule J	23	X	
24a	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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ŀ		1
	Schedule K If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to 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		<u> </u>
25a	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? If "Yes," complete Schedule L, Part I	25a	N/	A
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	N/	Α
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	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
28	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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u> X</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	<u> </u>
С	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		X
29 22	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
24	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
20	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
33	Schedule N, Part II	32		X
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	00		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	-	X
-	Part V, line 1		v	Í
352	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34	X	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	2Eh		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
J Q	If "Yes," complete Schedule R, Part V, line 2	36	N/	Δ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		1.3
	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 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	х	
			990 ((2013)
			(,

Form 990 (2013) OF AMERICA, INC
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable 1b 0	ŀ						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c	_x					
2a	Enter the number of employees reported on Form W 3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 25	.		Į				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	_X					
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	_X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l				
	any contributions that were not tax deductible as charitable contributions?	6a	X					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b	X					
7	Organizations that may receive deductible contributions under section 170(c). N/A	, ,		ı				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		 				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_						
	to file Form 8282?	7c		·				
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			İ				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		 				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g						
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h						
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A							
-	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		l				
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966? N/A	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b						
10	Section 501(c)(7) organizations. Enter							
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			İ				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter			l				
а	Gross income from members or shareholders N/A 11a			l				
b	Gross income from other sources (Do not net amounts due or paid to other sources against			l				
	amounts due or received from them)			l				
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 N/A 12b			1				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a						
	Note. See the instructions for additional information the organization must report on Schedule O							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
	Enter the amount of reserves on hand			17				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	aan	(0040)				

Form 990 (2013)

OF AMERICA, INC

13-0831270

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 27			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 25			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	l		
2	officer, director, trustee, or key employee?			x
_		2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?			
		3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	77	X
6	Did the organization have members or stockholders?	6_	_X_	
7a				
	more members of the governing body?	7a	_X_	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			ļ
	persons other than the governing body?	7b	_X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	<u>X</u> _	
b	Each committee with authority to act on behalf of the governing body?	8b	_X_	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		Х
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	·- -		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	i		1
9	The organization's CEO, Executive Director, or top management official	15a	х	1
b	Other officers or key employees of the organization		-21	Х
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b	-	A
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
···a	taxable entity during the year?	46-		v
L	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	-	X
D				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	١		
200	exempt status with respect to such arrangements?	16b	L	
				_
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and the section of the sectio	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨		
	DONALD MAY - (301)869-5800			
	1385 PICCARD DRIVE, ROCKVILLE, MD 20850			

332006 10-29-13

OF AMERICA, INC

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average	(do		(C Posi heck	ition	l than	one	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	offic				s bot or/trus		compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) MICHAEL R. CABLES	10.00									
PRESIDENT		X		X				63,042.	0.	0.
(2) CHUCK FELL	5.00	-					ļ		_	_
PRESIDENT-ELECT		X		X	<u> </u>	-		3,051.	0.	0,
(3) STEPHEN R. DAWSON	5.00	ļ							_	
SR. V.P./TREASURER	F 00	X	<u> </u>	X	_			1,579.	0.	0.
(4) TOM J. STONE	5.00			,,					_	
V.P./ ASSIS. TREASURER	<u> </u>	Х	 	X	<u> </u>	┼—		0.	0.	0.
(5) WILLIAM J. LYNCH	5.00	x		X				10 043	0.	_
IMMEDIATE PAST PRESIDENT	1.00	^	├─	Δ				18,243.		0.
(6) KEITH ATTEBERRY	1.00	x						0.	0.	0.
DIRECTOR	1.00	Δ	-			-		<u></u> .	<u> </u>	
(7) SCOTT BERGER DIRECTOR	1.00	x						0.	0.	0.
(8) MICHAEL BRANDT	1.00	2.	_				 	``		
DIRECTOR		\mathbf{x}						ο.	٥.	0.
(9) DON BROWN	1.00	1								
DIRECTOR		X						770.	0.	0.
(10) BRETT W. CHRISTIANSEN	1.00									,
DIRECTOR		X		ļ.,,	i			0.	0.	0
(11) PETER COMEAU	1.00									
DIRECTOR		X	L	L.,			<u>L.</u>	694.	0.	0
(12) ROBERT DURR. JR.	1.00									
DIRECTOR		X	<u> </u>	<u> </u>		1	ļ.,	0.	0.	0.
(13) MIKE FARRINGTON	1.00				1					_
DIRECTOR		X	<u> </u>	<u> </u>	<u> </u>		<u> </u>	0.	0.	0.
(14) CHRISTOPHER W. FITZGERALD	1.00	┨								
DIRECTOR	1 00	X	├—	-	}	-	<u> </u>	0.	0.	0
(15) GREG FULLER	1.00	١,,								
DIRECTOR	1 00	X	├	\vdash		+-	-	0.	0.	0
(16) BRIAN HELM	1.00	┨┰			1					_
DIRECTOR	1.00	X	├	1	\vdash	+	\vdash	0.	0.	0
(17) ARMAND KILIJIAN	1.00	X						0.	0.	0.
DIRECTOR 332007 10-29-13		1 1		<u> </u>		1		<u> </u>	<u> </u>	Form 990 (2013

332007 10-29-13

Page 8

Part VII Section A. Officers, Directors	Trustees Key Em		ees.	and	1 His	ahes	st C	Compensated Employe	es (continued)	<u> </u>		ige C
(A)	(B)	,,		(C		giic.	31 0	(D)	(E)		(F)	
Name and title	Average			Posi	tion			Reportable	Reportable	Es	timate	d
	hours per			heck r ss per				compensation	compensation	ŀ	nount o	
	week	offic	er an	d a di	recto	r/trus	tee)	from	from related		other	
	(list any	흟						the	organizations	com	pensa	tion
	hours for	ğ	9			ted		organization	(W 2/1099-MISC)	fr	om the	;
	related	stee	truste			bens		(W-2/1099-MISC)		ı ~	anızatı	
	organizations below	ᄪ	onal		ptoye	ee ee				l .	d relate	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	anızatıd	Sחכ
(18) ANDREW S. KRUSE	1.00	_			<u>×</u>							
DIRECTOR		x						746.	0.			0
(19) JOE LABRUZZO	1.00											
DIRECTOR		Х	ł					0.	0.			0
(20) ROBERT A. LAKE	1.00											
DIRECTOR		X						1,215.	0.			0
(21) GREG M. LEWIS	1.00											
DIRECTOR		X						0.	0.			0
(22) RICK PEROSA	1.00											
DIRECTOR		X	ļ					0.	0.			0
(23) NICHOLAS SAPNAR	1.00											
DIRECTOR		X				ļ	_	0.	0.			_0
(24) MIKE SHINN	1.00								_			_
DIRECTOR		X						0.	0.	ļ		0
(25) ADAM E. SNAVELY	1.00											_
DIRECTOR	1 00	X	 					0.	0.	-		0
(26) RICHARD A. STARR	1.00	٠,						0.4.4				^
DIRECTOR		X	L			<u> </u>	Ļ	90,184.	0.	ļ		0
1b Sub-total									0.	4 5	<u> </u>	0
c Total from continuation sheets to P	art VII, Section A							1,902,873.	0.		$\frac{4,4}{4,4}$	
d Total (add lines 1b and 1c) 2 Total number of individuals (including	hut not limited to th		liete	- d al	2011	ابيد (د	20.5		·	<u> 45</u>	4,4	<u> </u>
2 Total number of individuals (including compensation from the organization	_	1056	11516	eu ai	JUVE	2) WI	10 1	eceived more than \$100	5,000 of reportable			1
compensation from the organization				_						-	Yes	No
3 Did the organization list any former o	fficer, director, or tri	uste	e, ke	ey en	nplo	yee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule				•	•			, , , , , , , , , , , , , , , , , , , ,	. ,	3		X
4 For any individual listed on line 1a, is	the sum of reportab	le co	omp	ensa	ation	and	d ot	her compensation from	the organization			
and related organizations greater tha	n \$150,000? <i>If</i> "Yes	," co	mpl	ete S	Sche	edule	e J	for such individual		4	Х	
5 Did any person listed on line 1a recei	•				•		elat	ted organization or indiv	idual for services			
rendered to the organization? If "Yes,	" complete Schedu	le J f	or s	uch	pers	son				5_		X
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	(B) Description of services	(C) Compensation
PCI COMMUNICATIONS		
3015 COLVIN STREET, ALEXANDRIA, VA 22314	PRODUCTION SERVICES	696,375.
JOHN KOONTZ	INSTRUCTIONAL	
203 STACEY HOLLOW DR, LAFAYETTE, IN 47905	SERVICES	391,990.
AEG, 231 SOUTH BEMISTON AVENUE, SUITE 715,	CONFERENCE	
ST. LOUIS, MO 63105	ENTERTAINMENT	293,719.
PACIFIC EVENT PRODUCTIONS, INC.	CONFERENCE DECOR &	
6989 CORTE SANTA FE, SAN DIEGO, CA 92121	EXHIBIT	199,626.
360 LIVE MEDIA, 14047 W. PETRONELLA DR.		
STE. 102, LIBERTYVILLE, IL 60048-942	CONSULTANT - MSCA	158,583.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 of compensation from the organization		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2013)

Form 990 (2013)

OF AMERICA, INC

13-0831270

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) (C) Total revenue Related or Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 862,712 g Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f 862.712 Business Code Program Service Revenue 2 a MEMBERSHIP DUES 900099 7,148,213 7,148,213 b EDUCATIONAL ACTIVITIES 900099 2,290,665 2,290,665 CONVENTION 900099 2,226,600 2,226,600 PUBLICATION SALES 541800 302.843 166.700 136 143 All other program service revenue Total, Add lines 2a-2f 11 968 321 Investment income (including dividends, interest, and other similar amounts) 144,707 144 707. Income from investment of tax-exempt bond proceeds 5 Royalties 94,502 94.502. (ı) Real (II) Personal 6 a Gross rents Less rental expenses Rental income or (loss) Net rental income or (loss) Gross amount from sales of (i) Securities (II) Other assets other than inventory 500,000 Less cost or other basis and sales expenses 199.727 c Gain or (loss) 300,273 d Net gain or (loss) 300,273 300,273. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a MCERF MANAGMENT FEE 900099 150,000 150,000. MISCELLANEOUS b 900099 7,527 7.527. All other revenue Total, Add lines 11a 11d 157,527

13 528 042

332009 10-29-13

Total revenue See instructions

11,832,178

136 143

697,009.

Form **990** (2013)

13-0831270 Page 10

Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)								
	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and								
	organizations in the United States. See Part IV, line 21	75,815.							
2	Grants and other assistance to individuals in								
	the United States See Part IV, line 22								
3	Grants and other assistance to governments,								
	organizations, and individuals outside the								
	United States See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	1,498,411.							
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and				ļ				
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	1,827,307.							
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	308,568.							
9	Other employee benefits	293,372.							
10	Payroll taxes	187,346.							
11	Fees for services (non employees)								
а	Management								
b	Legal	6,642.							
С	Accounting	38,750.							
d	Lobbying								
е	Professional fundraising services See Part IV, line 17	05 115							
f	Investment management fees	85,115.							
g	Other (If line 11g amount exceeds 10% of line 25,	747 400							
	column (A) amount, list line 11g expenses on Sch O)	747,498.							
12	Advertising and promotion	134,418.							
13	Office expenses	1,540,168.							
14	Information technology	. 239,335. 1,530.							
15	Royalties	25,167.			<u> </u>				
16	Occupancy Travel	1,445,714.							
17 18	Payments of travel or entertainment expenses	<u> </u>							
10	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	3,449,670.							
20	Interest	3,115,070.							
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	263,131.	···						
23	Insurance	65,706.							
24	Other expenses Itemize expenses not covered								
	above. (List miscellaneous expenses in line 24e. If line								
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)								
а	TAXES	21,968.							
b	MERCHANT FEES	162,192.							
С	DUES & SUBSCRIPTIONS	73,982.							
d	REPAIRS & MAINTENANCE	72,408.							
е	All other expenses	221,858.							
25	Total functional expenses Add lines 1 through 24e	12,786,071.							
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 if following SOP 98-2 (ASC 958-720)								

	1 990 (OF AMERICA, INC			13-	0831270 Pa	ge 11
Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or note to	any line in this Part X				
				(A) Beginning of year		(B) End of year	
	1	Cash - non-interest bearing		929,943.	1	1,221,8	27.
	2	Savings and temporary cash investments		1,688,860.	2	2,481,8	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		51,770.		89,3	41.
	5	Loans and other receivables from current and forme					
		trustees, key employees, and highest compensated					
		Part II of Schedule L			5		
	6	Loans and other receivables from other disqualified	persons (as defined under	**	Ť		
		section 4958(f)(1)), persons described in section 495		•			
		employers and sponsoring organizations of section 5					
S		employees' beneficiary organizations (see instr) Con	• • • •		6		
Assets	7	Notes and loans receivable, net		7			
As	8	Inventories for sale or use		· · ·	8		
	9	Prepaid expenses and deferred charges		469,450.	9	674,8	50
	-	Land, buildings, and equipment cost or other	1	409,430.	9	0/4,0	50.
	loa	basis Complete Part VI of Schedule D	5,205,836.				
	L	Less accumulated depreciation 10		2,961,283.	40-	2 600 1	E 2
	11	Investments - publicly traded securities	2,307,004.	7,567,609.		2,698,1 8,572,8	26
	12	Investments - publicly traded securities Investments - other securities See Part IV, line 11		1,201,009.	11	0,314,0	20.
	13	·		12		-	
	1	Investments - program-related See Part IV, line 11 Intangible assets		13			
	14			913,684.	14	070 /	0.4
	15	Other assets See Part IV, line 11	14,582,599.	15	978,4		
	16	Total assets. Add lines 1 through 15 (must equal line		16	16,717,2		
	17 18	Accounts payable and accrued expenses		505,665.	17	369,4	<u> </u>
	19	Grants payable Deferred revenue		1,653,790.	18	2 470 6	61
	20			1,055,790.	19	2,479,6	<u>01.</u>
	21	Tax-exempt bond liabilities	N/ of Cobodula D		20		
	22	Escrow or custodial account liability Complete Part			21	<u> </u>	
Liabilities	22	Loans and other payables to current and former offic					
를		key employees, highest compensated employees, ar	id disqualified persons				
Ľ:	00	Complete Part II of Schedule L	No well as a select		22		
	23	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated thir	*		23		
	24	• •	· '		24		
	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-2 Schedule D	24) Complete Part X of	913,684.		070 /	Λ 4
	26	Total liabilities. Add lines 17 through 25		3,073,139.	25	978,4 3,827,4	
	26		eck here X and	3,0/3,139.	26	3,047,4	70.
10		Organizations that follow SFAS 117 (ASC 958), ch complete lines 27 through 29, and lines 33 and 34	· ·				
ě	27	Unrestricted net assets	•	11,509,460.		12 000 7	E 0
lan	l			11,509,400.	27	12,889,7	<u> </u>
Ba	28	Temporarily restricted net assets		28			
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SEAS 117 (ASC)		29			
Ē		Organizations that do not follow SFAS 117 (ASC 9					
ts o	20	and complete lines 30 through 34.					
se	30	Capital stock or trust principal, or current funds	ant fund		30		
t As	31 Paid-in or capital surplus, or land, building, or equipment fund			31			
Net	32	Retained earnings, endowment, accumulated income	e, or otner tunds	11 500 460	32	10 000 7	FC
	33	Total net assets or fund balances		11,509,460. 14,582,599.	33	12,889,7	
	34	Total liabilities and net assets/fund balances		14,504,533.	34	16,717,2	

Form **990** (2013)

	550 (2015)	<u> </u>	<u> </u>	<u> </u>	ı a	<u>ge 12</u>
Pai	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
	•					
1	Total revenue (must equal Part VIII, column (A), line 12)	_1		<u>, 52</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> </u>	<u>,78</u>	<u>6,0</u>	<u>71.</u>
3	Revenue less expenses Subtract line 2 from line 1	3		<u>74</u>	<u>1,9</u>	71.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	11	<u>, 50</u>	9,4	60.	
5	Net unrealized gains (losses) on investments	5		<u>63</u>	<u>8,3</u>	28.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	12	,88	9,7	<u> 59.</u>
Pa	t XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	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	d on a				1
	separate basis, consolidated basis, or both					ŀ
	Separate basis Consolidated basis Both consolidated and separate basis					:
b	Were the organization's financial statements audited by an independent accountant?			2b	_X_	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs	•			
	consolidated basis, or both			l .		
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	_X_	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C)	İ		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt			
	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	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		<u> </u>
				Form	990	(2013)

332012 10-29-13

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

1(c) and section 527
Form 990 or Form 990-EZ.
orm 990 or 990 EZ) and the

OMB No 1545-0047

Inspection

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 35c (Proxy Tax), then

 Section 501(c)(4), (5), or (6) or 	ganizations Complete Part III	7Xy 14X) 01 1 01111 330-1	LE, Fait V, line 350 (FTOXY	rax), trien
	ANICAL CONTRACTORS	ASSOCIATION	N Emp	oloyer identification number
OF A	MERICA, INC			13-0831270
Part I-A Complete if the	e organization is exempt un	der section 501(c	c) or is a section 527 (organization.
 Provide a description of the of Political expenditures Volunteer hours 	organization's direct and indirect polit	tical campaign activities	s in Part IV ▶	\$
Part I-B Complete if the	e organization is exempt un	der section 501(c	:)(3).	
	se tax incurred by the organization u			\$
2 Enter the amount of any exci	se tax incurred by organization mana	gers under section 495		\$
3 If the organization incurred a	section 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if th	e organization is exempt un	der section 501(c), except section 501	(c)(3).
1 Enter the amount directly exp	pended by the filing organization for s	section 527 exempt fun	ction activities	\$
2 Enter the amount of the filing	organization's funds contributed to	other organizations for	section 527	
exempt function activities			▶ :	\$
· ·	ditures Add lines 1 and 2 Enter here	and on Form 1120-PO	•	
line 17b			▶ :	\$
	Form 1120-POL for this year?			Yes No
	and employer identification number (I			
	ganization listed, enter the amount parere promptly and directly delivered to			•
	AC) If additional space is needed, pro			ate segregated fund or a
				4 > A ====== + = + = = = + = = = + = = + = = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = + = = = + = = = + = = = + = = = + = = = = + = = = = = + = = = + = = + = = = + = = = = = + =
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
-				
			-	

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

Schedule C (Form 990 or 990-EZ) 2013

LHA 332041 MECHANICAL CONTRACTORS ASSOCIATION

Schedule C (Form 990 or 990 EZ) 2013	OF AM	ERICA,	INC	- 504(-)(2)	13-0	0831270 Page 2
Part II-A Complete if the org			npt under sectio	n 501(c)(3) and the	ea Form 5/68	
(election under sec		-` ''				
				n Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share		, ,	•			
B Check 🕨 💹 if the filing organiza	tion check	ed box A ar	nd "limited control" pro	ovisions apply		
		oying Expe			(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" m	eans amou	ints paid or incurred.)	totals	
1a Total lobbying expenditures to infli	uence pub	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to infli	uence a le	gislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add li	ines 1a an	d 1b)	, , , ,			
d Other exempt purpose expenditure		•				
e Total exempt purpose expenditure		s 1c and 1c	1)	Ţ		
f Lobbying nontaxable amount Enti	•		·	th columns		
If the amount on line 1e, column (a) o			bying nontaxable am	-		
Not over \$500,000	(5)		the amount on line 1e			
Over \$500,000 but not over \$1,000	0.000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17.			00 plus 5% of the exce			
Over \$17,000,000	,000,000	\$1,000,0		33 0 (0 1 4 1,000,000		
Over \$17,000,000		Ψ1,000,	000			
g Grassroots nontaxable amount (er	tor 25% c	f line 1f)				
h Subtract line 1g from line 1a If zer		•		<u> </u>		
i Subtract line 1f from line 1c If zero	•			ŀ		
			line 1. did the organiz	tation file Form 4720		
J If there is an amount other than ze		si iirie iiri Oi	ine ii, did the organiz	auon nie Fonn 4720		□vaa □Na
reporting section 4911 tax for this	year	4 Voor Ave	Programa Dorrod Lindor	Continu FO1/h)		Yes No
(Some organiz	ations th		eraging Period Under	n do not have to comp	lete all of the five	
				es 2a through 2f on pa		
			nditures During 4-Ye			
		- 				
Calendar year (or fiscal year beginning in)	(a)	2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount						
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))	<u></u>					
	1		ĺ	1		1

Schedule C (Form 990 or 990-EZ) 2013

13-0831270 Page 3

Schedule C (Form 990 or 990 EZ) 2013 OF AMERICA, INC 13-08312'
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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?	Yes			o)
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)?		No	Amo	ount
or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
 a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 	1			
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?				-
Other activities?				
j Total Add lines 1c through 1i				
a 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	1			
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?				
art III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	ion 501(c)((5), or se	ection	
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1		Х
Did the organization make only in house lobbying expenditures of \$2,000 or less?		2		X
Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."		· ·	· · · · · · · · · · · · · · · · · · ·	·
Dues, assessments and similar amounts from members		1	7,148	<u>3,213</u>
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	iical			
expenses for which the section 527(f) tax was paid).				405
a Current year		2a	6.	L <u>,485</u>
b Carryover from last year		2b	<u></u>	405
c Total		2c	6.	L, <u>485</u>
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex				
	political			•
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		4		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		5	61	. 485 1,485

332043 11-08-13

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www irs gov/form990.

2013
Open to Public Inspection

Name of the organization

MECHANICAL CONTRACTORS ASSOCIATION

OF AMERICA. INC

Employer identification number 13-0831270

organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (drumg year) Aggregate contributions to (drumg year) Aggregate value at end of year Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization is properly, subject to the organization's exclusive legal control? Dot the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable private benefit grantees. Somplete if the organization answered "Yes" to Form 990, Part IV, line 7 Part III Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(9) or conservation assements held by the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(9) or conservation assements held by the organization funds an experiment of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of open space Complete lines 2 a through 2d if the organization held a qualified conservation extructure or a conservation examination of a conse	Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or A	Accounts. Complete if the
1 Total number at end of year 2 Aggregate value at ord of year 3 Aggregate value at ord of year 5 Dot the organization is from all dinons and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? Ob dit he organization inform all dinons and donor advisors in writing that the assets held in donor advised funds are the organization property, subject to the organization's exclusive legal control? Do the displacement of the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring integritings being private benefit? Part III Conservation Easements			e 6	
2 Aggregate contributions to (during year) 3 Aggregate contributions to (during year) 4 Aggregate value at end of year 5 bit the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization informal ill grantess, donors, and donor advisors in writing that the assets held in donor advisors on be used only for charitable purposes and not for the benefit of the donor or donor advisor, or or any other purpose confering incompanies of the conference of			(a) Donor advised funds	(b) Funds and other accounts
2 Aggregate contributions to (during year) 3 Aggregate contributions to (during year) 4 Aggregate value at end of year 5 bit the organization inform all dinors and donor advisors in writing that the assets held in donor advised funds are the organization informal ill grantess, donors, and donor advisors in writing that the assets held in donor advisors on be used only for charitable purposes and not for the benefit of the donor or donor advisor, or or any other purpose confering incompanies of the conference of	1	Total number at end of year		
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4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring incompanies to the organization answered "Yes" to Form 990, Part IV, line 7 1 Purpose(s) of conservation easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of open space 2 Complete lines 2 a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of expenses incurred in mentioning, inspecting, and enforcement of the conservation easements the holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcement of the conservation easement in the form of a conservation easement in the form of a conservation easement in the form of a conservation easement in the form of a conservation easement in the form of the conservation easement in the form of the preservation easement in the form of the preservation easement in the form of the preservation easement in the form of the form of the form o				
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c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)² 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held fo	b	Total acreage restricted by conservation easements		
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a Revenues included in Form 990, Part VIII, line 1	2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gair	
<u></u>		the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
b Assets included in Form 990, Part X	а	Revenues included in Form 990, Part VIII, line 1		> \$
	b	Assets included in Form 990, Part X		> \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051

Schedule D (Form 990) 2013

MECHANICAL CONTRACTORS ASSOCIATION

	dule D (Form 990) 2013 OF AMER					3-083		
Par	rt III Organizations Maintaining C							
3	Using the organization's acquisition, accession	on, and other records, c	heck any of the f	following that are	a significant us	se of its co	ection ite	ems
	(check all that apply) '	_						
а	Public exhibition	d L	Loan or exch	nange programs				
b	Scholarly research	e	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain ho	ow they further th	ne organization's e	exempt purpos	se in Part 🗵	(III	
5	During the year, did the organization solicit or	receive donations of a	rt, historical treas	sures, or other sin	nılar assets		r	
	to be sold to raise funds rather than to be ma						Yes	No_
Par	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Par		if the organization	n answered "Yes"	to Form 990, 1	Part IV, lin	e 9, or	
1a	Is the organization an agent, trustee, custodia	an or other intermediary	for contribution	s or other assets	not included		_	
	on Form 990, Part X?						Yes	No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follow	ng table					
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21	?				Yes [No
b	If "Yes," explain the arrangement in Part XIII							
Par	rt V Endowment Funds. Complete if	the organization answe	ered "Yes" to For	m 990, Part IV, lır	ne 10			
		(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three ye	ars back	(e) Four yea	ars back_
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships					\longrightarrow		
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses		· -					
g	End of year balance			L				
2	Provide the estimated percentage of the curr	ent year end balance (li	ine 1g, column (a	i)) held as				
а	Board designated or quasi-endowment	%	,					
b	Permanent endowment >	%						
С	· · · · · · · · · · · · · · · · · · ·	%						
	The percentages in lines 2a, 2b, and 2c shou	•						
3а	Are there endowment funds not in the posse	ssion of the organizatio	n that are held a	nd administered f	or the organiza	ation		
	by						Ye	s No
	(i) unrelated organizations						3a(ı)	
	(ii) related organizations						3a(II)	
	If "Yes" to 3a(ii), are the related organizations	•					_3b	
A Do:	Describe in Part XIII the intended uses of the rt VI Land, Buildings, and Equipm		nent funds					
Fai			11/1	- F 000 D				
	Complete if the organization answered							
	Description of property	(a) Cost or othe basis (investment	1 , ,	,	c) Accumulated	1 (d) Book va	alue
	Load	Dasis (investmen			depreciation		CE 2	700
	Land			2,700. 5,755. 1	E02 07	77 1		700.
b	Buildings		3,5/	<u>5,/55+ -1</u>	L,583,07	' • 	<u>, 992, </u>	0/8.
C	Leasehold improvements		E 1	6 136	482,18	5	- A C	251
d	• • •	-		6,436. 0,945.	482,18			<u>251.</u> 523.
	Other Add lines 12 through 1e (Column (d) must e	gual Form 000 Port V			444,44	2		152

Schedule D (Form 990) 2013

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		S ASSOCIATION	12 0021070 - 4
Schedule D (Form 990) 2013 OF AMERICA, Part VII Investments - Other Securities.	INC		13-0831270 Page 3
	1- F 000 D- 11/		
Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	•	or and of year madest value
	(b) Book value	(c) Method of Valuation Cost	or end-or-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)	-		
(C)			
(D)			
(E)			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	<u>l. </u>		
	. 5 000 0 4 114		
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		or end-of-year market value
···	(b) Book value	(c) Method of Valuation Cost	or end-or-year market value
(1)			
(2)			· · · · · · · · · · · · · · · · · · ·
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col (B) line 13) ▶ Part IX Other Assets.			
	to Form 000 Port IV	line 11d Coe Form 000 Dark V line 15	
Complete if the organization answered "Yes"	Description	, line 11d See Form 990, Part X, line 15	(b) Book value
100=00		CAMTON ODITORMION	978,404.
	KED COMPEN	SATION OBLIGATION	978,404.
(2)			
(3)			
(4)			
(5)			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) lin	0.15.1		▶ 978,404.
Part X Other Liabilities.	e 13 j		570,404.
Complete if the organization answered "Yes"	to Form 990 Part IV	line 11e or 11f See Form 990 Part X II	ne 25
(1)5	10 1 0 1111 330, 1 art 14	(b) Book value	116 23
···		(b) Book value	
(1) Federal income taxes (2) DEFERRED COMPENSATION OBL	TCATTON	978,404.	
(3)	TGRIION	210,404.	
(4)			
(5)			
(0)			

	` '
(1) Federal income taxes	
(2) DEFERRED COMPENSATION OBLIGATION	978,404.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	978,404.

2. Liability for uncertain tax positions. 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 provided in Part XIII X

Schedule D (Form 990) 2013

PART XI, LINE 2D - OTHER ADJUSTMENTS:

THREE YEARS AFTER IT IS FILED.

332054

Schedule D (Form 990) 2013

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs gov/form990.

▶ Attach to Form 990.

å Employer identification number 13-0831270 X Yes 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 CONTRACTORS ASSOCIATION General Information on Grants and Assistance criteria used to award the grants or assistance? MECHANICAL Name of the organization Part I

	for any		(h) Purpose of grant
	" to Form 990, Part IV, line 21,		(g) Description of (h)
	inization answered "Yes		(f) Method of valuation (book
J States	omplete if the orga	pa	(e) Amount of
g the use of grant funds in the United States	United States. C	onal space is need	(d) Amount of (e) Amount of
oring the use of grant	Organizations in the	be duplicated if additi	(c) IRC section
cedures for monit	Governments and	55,000 Part II can	(a) EIN
Describe in Part IV the organization's procedures for monitoring the	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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	1 (a) Name and address of organization
	art		1 (ε

1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of ((b) EIN	(c) IRC section	(d) Amount of	a)	(f) Method of valuation (book,	(g) Description of	(h) Purpose of grant
30,60,00		applicable	Casil grant	assistance	FMV, appraisal, other)	ווסויכשאון מטטוטומוזכם	O assistance
CONVOY OF HOPE							
330 SOUTH PATTERSON AVENUE SPRINGFIELD MO 65802	68-0051386	501(C)(3)	25 000	C			GENERAL UNRESTRICTED
ANYO CITATO DIADRITED	1						
THREE PARK PLACE							SENERAL UNRESTRICTED
ANNAPOLIS, MD 21401	53-0159020		10,000.	0			DONATION
JOHNNY DAMON FOUNDATION							
P.O. BOX 1233	201500		0	c			GENERAL UNRESTRICTED
00/10 13		75/12/12/					DOWNITON
PIPE FABRICATION INSTITUTE							
511 AVENUE OF THE AMERICA'S NEW VORK NV 10011	25_0727205	501(0)(3)	000	c			GENERAL UNRESTRICTED
11001		(5) (5) (5)	200				NOT TONO

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

N

Schedule I (Form 990) (2013)

30

MECHANICAL CONTRACTORS ASSOCIATION

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed OF AMERICA, INC Schedule | (Form 990) (2013)

Part III Grants and Othe

Page 2

13-0831270

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Provide the information required		e 2, Part III, column	ın Part I, line 2, Part III, column (b), and any other additional information	dditional information	
PART I, LINE 2:	ļ				
EXPLANATION: THE ORGANIZATION DOES NOT MONITOR THE	NOT MON		USE OF UNRESTRICTED	STRICTED	
CONTRIBUTION AND SPONSORSHIP PAYMENTS	NTS.				

31

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990. See separate instructions.

■ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

MECHANICAL CONTRACTORS ASSOCIATION

<u>OF AMERICA, INC</u>

Employer identification number 13-0831270

Part I **Questions Regarding Compensation** No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items X First-class or charter travel Housing allowance or residence for personal use X Travel for companions Payments for business use of personal residence X Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Х 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors. X trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III X Compensation committee Independent compensation consultant X Compensation survey or study X Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization a Receive a severance payment or change-of-control payment? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2013

Page 2

13-0831270

OF AMERICA, INC

Schedule J (Form 990) 2013

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2	W-2 and/or 1099-MI	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(D)·(l)(B)	reported as deferred in prior Form 990
(1) JOHN GENTILLE	Ξ	385,000.	150,000.	18,790.	68,500.	24,326.	646,616.	0
EXECUTIVE VICE PRESIDENT/C	(ii)	• 0	0.	• 0	0	0	0	0
(2) DONALD MAY	Θ	155,000.	40,000.	-4,988.	32,872.	28,492.	251,376.	0
CFO	(ii)	0	0.	0	0			0
(3) CYNTHIA BUFFINGTON	ε	170,632.	42,500.	-1,161.	35,986.	24,195.	272,15	0
SENIOR EXECUTIVE DIRECTOR	Ξ	• 0	0	0	0	0	0	0
(4) BARBARA DOLIM	Θ	152,850.	37,000.	-7,309.	31,984.	24,008.	238,533.	0
EXECUTIVE DIRECTOR, MSCA	(II)	0	0	0.	0	0		0
ļ	Ξ	200,000	57,500.	775.	43,338.	24,326.	325,939.	0
GENERAL COUNSEL	Ξ	0	• 0	0	0	0	0	0
(6) DENNIS LANGLEY	Θ	119,500.	14,000.	2,249.	22,183.	1,662.	159,594.	0
EXECUTIVE DIRECTOR	(II)	0	0.	0.	0	0		0
(7) PETE CHANEY	(ι)	119,500.	9,500.	-1,246.	21,400.	28,157.	177,311.	0
DIRECTOR, SAFETY AND HEALTH	(ii)	• 0	0	0	0	0.	0	0
	Θ							
	(ii)							
	Θ							
	Ξ							
	Ξ							
	Ξ							
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332112				ć			Schedu	Schedule J (Form 990) 2013

13-0831270

Page 3

Schedule J (Form 990) 2013	OF A	AMERICA,	INC 13-0	13-0831270
Partill Supplemental Information				
Provide the information, explanation, or descriptions req	or desc	criptions required for	for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information	any additional information

ART I, LINE 1A: KELANATION: ON A LIMITED BASIS BUSINESS CLASS TRAVEL IS PROVIDED FOR NTERNATIONAL TRAVEL. DOMESTIC TRAVEL IS BY COACH CLASS. ART I, LINE 4B: KPLANATION: THE ORGANIZATION MAINTAINS A 457(F) PLAN FOR JOHN GENTILLE. OWEVER DURING 2013, NO CONTRIBUTION WAS MADE TO THE PLAN.	
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SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

и Y •

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

 \blacktriangleright Attach to Form 990 or Form 990-EZ. \blacktriangleright See separate instructions.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open To Public Inspection

Name of the organization Employer identification number MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA, INC 13-0831270 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (h) Approved by board or (a) Name of (d) Loan to or (c) Purpose (i) Written (b) Relationship (e) Original (f) Balance due (g) In from the interested person principal amount agreement? with organization default? committee? organization? To From Yes Yes No ▶ \$ Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (c) Amount of (a) Name of interested person (d) Type of (e) Purpose of (b) Relationship between assistance assistance assistance interested person and the organization

332131

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

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 OF AMERICA, INC

Part IV Business Transactions Involving Interested Persons. 13-0831270 Page 2

Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
CALLY CRAMELLE		104 605		Yes	No
SALLY GENTILLE	SPOUSE - EXECUTIVE V		EXECUTIVE C		X
SABINA MAY	SPOUSE- CFO	150.	CONSULTING		X
			-		
Part V Supplemental Information					
Provide additional information for resp	onses to questions on Schedule L (see i	nstructions)			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVI	NG INTEREST	ED PERSONS:		
/1\	COMMET TO				
(A) NAME OF PERSON: SALLY	GENTILLE		·		
(B) RELATIONSHIP BETWEEN]	NAMEDECHED DEDCON VIII	_	TOM.		
(B) RELATIONSHIP BETWEEN 1	NIEKESIED PERSON ANI	J ORGANIZAT	TON:		
SPOUSE- EXECUTIVE V.P.					
210002 2201212				-	
(C) AMOUNT OF TRANSACTION	\$ 124,625.				
			 .		
(D) DESCRIPTION OF TRANSAC	TION: EXECUTIVE COM	MUNICATIONS	S/SPEECH-WRI	TING	
SERVICES.	<u> </u>				
(=)					
(E) SHARING OF ORGANIZATION	ON REVENUES? = NO				
					
(A) NAME OF PERSON: SABINA	MAY				
ATT THE OF THE OWN. BILLING	11111		· · · · · · · · · · · · · · · · · · ·		
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON ANI	ORGANIZAT	ION:		
SPOUSE- CFO					
(C) AMOUNT OF TRANSACTION	\$ 150.				
(D) D=667-7-101 0- 5-1161					
(D) DESCRIPTION OF TRANSAC	CTION: CONSULTING SE	RVICES-PAYE	ROLL SYSTEM/	<u>HRIS</u>	
CVCMDW					
SYSTEM.					 -
(E) SHARING OF ORGANIZATION	NI DEVENUECO - NO				
(E) BIANTING OF ONGANIZATIO	N REVENUES: - NO				
			. .		

Schedule L (Form 990 or 990-EZ) 2013

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SCHEDULE O (Form 990 or 990-EZ)

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Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

• Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 **2013**Open to Public

Employer identification number

13-0831270

Open to Public Inspection

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EMPLOYED, AND BY BETTER PUBLIC SERVICE, TO CONTRIBUTE TO THE

ADVANCEMENT OF THE INDUSTRY IN ALL ITS BRANCHES, TO STANDARDIZE THE

MECHANICAL CONTRACTORS ASSOCIATION

OF AMERICA, INC

MATERIALS AND METHODS USED IN THE INDUSTRY, AND TO UNIFY AND MAKE

EFFECTIVE THE WORK OF LOCAL STATE AND REGIONAL ASSOCIATIONS WITHIN THE

FORM 990, PART VI, SECTION A, LINE 6:

DECLARED OBJECTIVES OF MCAA.

EXPLANATION: MCAA IS A MEMBERSHIP ORGANIZATION WHICH IS COMPRISED PRIMARILY OF MECHANICAL CONTRACTING COMPANIES FROM ACROSS THE UNITED STATES. THERE IS ONLY ONE CLASS OF MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: MEMBERS OF THE MANUFACTURER SUPPLIER COUNCIL ELECT THEIR

PRESIDENT WHO, IN TURN, IS A MEMBER OF THE MCAA BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: BY-LAW CHANGES RECOMMENDED BY THE BOARD OF DIRECTORS MUST BE

APPROVED BY THE GENERAL MEMBERSHIP AT THE ASSOCIATION'S ANNUAL BUSINESS

MEETING.

FORM 990, PART VI, SECTION B, LINE 10B:

EXPLANATION: THE ORGANIZATION HAS AFFILIATED LOCAL ASSOCIATIONS WHICH ARE INDEPENDENT. MCAA DOES NOT HAVE ANY CONTROL OR INFLUENCE OVER THEIR GOVERNANCE OR OPERATIONS. THEY ARE ALL INDEPENDENT.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA, INC	Employer identification number 13-0831270
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE 990 WAS PREPARED BY THE OUTSIDE ACCOUTAN	ITS AND REVIEWED BY
THE EXECUTIVE COMMITTEE ON BEHALF OF THE BOARD.	
FORM 990, PART VI, SECTION B, LINE 12C:	
EXPLANATION: ON AN ANNUAL BASIS, ALL BOARD MEMBERS AND MC	AA EMPLOYEES ARE
PROVIDED WITH A COPY OF THE CONFLICT OF INTEREST POLICY A	ND ARE REQUIRED TO
COMPLETE AND SIGN THE ACKNOWLEDGMENT AND DISCLOSURE FORM.	ALL COMPLETED
FORMS, AS WELL AS ALL OTHER PERTINENT INFORMATION PROVIDE	D BY BOARD
MEMBERS, ARE PROVIDED TO AND REVIEWED BY THE MCAA PRESIDE	NT AND EXECUTIVE
VICE PRESIDENT/CEO. ANY BOARD MEMBER WHO PRESENTS ACTUAL	OR POTENTIAL
CONFLICT OF INTEREST IS RECUSED FROM PARTICIPATING IN DEB	ATES AND VOTING ON
THE MATTER.	
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: THE PERFORMANCE OF MCAA'S EXECUTIVE VICE PRE	SIDENT & CEO IS
REVIEWED ANNUALLY BY THE COMPENSATION COMMITTEE, WHICH, I	N TURN,
ESTABLISHES HIS/HER SALARY. THE COMMITTEE USES COMPENSATI	ON SURVEYS AS A
FACTOR IN DETERMINING THE LEVEL OF COMPENSATION AND/OR SA	LARY INCREASES.
UPON THE CONCLUSION OF ITS REVIEW, THE COMPENSATION COMMI	TTEE CHAIRMAN
SENDS A LETTER TO THE CFO DOCUMENTING THE DECISION OF THE	COMMITTEE, WHICH
IS INCLUDED IN THE CEO'S PERSONNEL FILE. THE LAST COMPENS	ATION REVIEW
PROCESS TOOK PLACE DECEMBER 10, 2013.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: COPIES OF MCAA'S CONFLICT OF INTEREST POLICY	, GOVERNING
DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE FOR REVI	EW UPON REQUEST AT
MCAA'S OFFICE DURING NORMAL BUSINESS HOURS. 332212 09-04-13 Scheo	dule O (Form 990 or 990-EZ) (2013)

SCHEDULE R (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

MECHANICAL CONTRACTORS ASSOCIATION

INC

OF AMERICA,

Name of the organization

Department of the Treasury Internal Revenue Service

▶Information about Schedule R (Form 990) and its instructions is at www.irs gov/form990 ▶ See separate instructions.

Employer identification number Open to Public Inspection 13-0831270

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(g) Section 512(b)(13) Direct controlling entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year End-of-year assets e <u>e</u> Total income Ð ਉ Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) Primary activity 9 Name, address, and EIN (if applicable) of disregarded entity Part II Part I

٥ controlled entity? Yes × Direct controlling entity MCAA status (if section Public charity 501(c)(3)) Exempt Code section 527 Legal domicile (state or foreign country) MARYLAND Primary activity POLITICAL ACTIVITY - 52-2188539 Name, address, and EIN MCAA POLITICAL ACTION COMMITTEE of related organization ROCKVILLE, MD 20850 1385 PICCARD DRIVE

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

332161 09-12-13 LHA

Schedule R (Form 990) 2013

MECHANICAL CONTRACTORS ASSOCIATION

OF AMERICA, Schedule R (Form 990) 2013 Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Part III

1

Page 2

13-0831270

General or Percentage managing ownership 3 Code V.UBI General or Present or Present or Schedule K-1 (Form 1065) Disproportionate Yes No allocations? Ξ Share of end-of-year assets <u>6</u> Share of total income Ξ Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Direct controlling entity ਉ (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization

Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Part IV

(a)	(q)	(c)	(p)	(a)	(£)	(6)	3	(6)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Typ. (C co	Shar	Share of end-of-year	gg L	Section 512(b)(13) controlled entity?
		country)		(ical)		8339613		Yes No
								_
	•							
								-
		-						-
	_							
	T							
	r							
	_						_	
332162 09-12-13		40		:		Sche	Schedule R (Form 990) 2013	990) 2013

MECHANICAL CONTRACTORS ASSOCIATION OF AMERICA, INC

Page 3

13-0831270

Schedule R (Form 990) 2013

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				٨	Yes	₂
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ons with one or more re	elated organizations listec	I in Parts II:IV?		\dashv	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				19	~	×
b Gift, grant, or capital contribution to related organization(s)				£	, ×	×
c Gift, grant, or capital contribution from related organization(s)				5	×	×
d Loans or loan guarantees to or for related organization(s)				₽		×
e Loans or loan guarantees by related organization(s)				1	*	×
f Dividends from related organization(s)				=	7	×
g Sale of assets to related organization(s)				19	×	×
h Purchase of assets from related organization(s)				1h	X	54
 Exchange of assets with related organization(s) 				-	×	ايدا
J Lease of facilities, equipment, or other assets to related organization(s)					X	54
k Lease of facilities, equipment, or other assets from related organization(s)				*	X	5 d
I Performance of services or membership or fundraising solicitations for related orgi	related organization(s)			=	X	ايدا
m Performance of services or membership or fundraising solicitations by related organization(s)	janization(s)			1m	X	ايدا
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)			£	×	ايد
 Sharing of paid employees with related organization(s) 				9	×	<u>.</u>
						5
				2	4	. اہ
 Aeimbursement paid by related organization(s) for expenses 				5	×	اید
${f r}$ Other transfer of cash or property to related organization(s)				-	×	اب
s Other transfer of cash or property from related organization(s)				18	$\stackrel{\bowtie}{-}$	اب
2 If the answer to any of the above is "Yes," see the instructions for information on v	who must complete the	nis line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds			- 1
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1)						
(2)						
(5)						
(4)						
(5)						
(9)						
332163 09-12-13	41		Schedule R (Form 990) 2013	R (Form 99	90) 201	£

13-0831270 Page 4

Schedule R (Form 990) 2013 OF AMERICA, INC

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) Percentage ownership				
(j) neral or anaging artner?				
(-1 Page (-1	 <u>.</u>			
(h) (i) (j) (k) Dispropor- binance in the companies of superior				
(h) Spropor- Nonate Socations?				
Olsp C		 	 	
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all partners sec 501(c)(3) orgs 7 Ves No				
Predominant income (related, unrelated, excluded from tax under section 512-514) related.				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R (Form 990) 2013



MECHANICAL CONTRACTORS ASSOCIATION

VII Supplemental	iniornation					
Provide additional	nformation for responses t	o questions on Sche	edule R (see instru	ctions)		
					_ ,	
						
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Part VII Section A. Officers, Directors	s, Trustees, Key Er	mpic	oyee	s, a	na r	ııgn	est	Compensated Employ		(F)
(A)		(B) (C)				(D)	(E)	(F)		
Name and title	Average	,_		Posi			I. A	Reportable	Reportable	Estimated
	hours per	(C)	heck	anı	ınaı	app	iy)	compensation from	compensation from related	amount of other
	week					98		the	organizations	compensation
	(list any	cto				l ge		organization	(W-2/1099-MISC)	from the
	hours for	rdre				ted er		(W 2/1099-MISC)	,	organization
	related	ste c	ruste		۵.	seusa				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	divid	stitute	Officer	зу ет	ghest	F ormer			
	line)	Ē	=	to	S.	主	ъ			
(27) CHARLIE USHER	1.00	ļ								
DIRECTOR		Х				<u> </u>		0.	0.	0.
(28) JOHN GENTILLE	40.00									
EXECUTIVE VICE PRESIDENT/C				Х		<u> </u>		553,790.	0.	92,826
(29) DONALD MAY	40.00	1						}		
CFO				Х		<u> </u>		190,012.	0.	61,364
(30) CYNTHIA BUFFINGTON	40.00									
SENIOR EXECUTIVE DIRECTOR					Х	L_		211,971.	0.	60,181
(31) BARBARA DOLIM'	40.00					;				
EXECUTIVE DIRECTOR, MSCA		L.			X			182,541.	0.	55,992
(32) JOHN MCNERNEY	40.00									
GENERAL COUNSEL						X		258,275.	0.	67,664.
(33) DENNIS LANGLEY	40.00]								
EXECUTIVE DIRECTOR						X		135,749.	0.	23,845.
(34) PETE CHANEY	40.00									-
DIRECTOR SAFETY AND HEALTH		<u> </u>				X		127,754.	0.	49,557.
(35) DARIUSH NIKPOURFARD	40.00									
EXECUTIVE DIRECTOR						X		122,540.	0.	21,714.
(36) LU ANN STEELE-CORNMAN	40.00									
CHIEF INFORMATION OFFICER]				X		120,241.	0.	21,281.
										
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Total to Part VII, Section A, line 1c								1,902,873.		454,424.