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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		<input checked="" type="checkbox"/>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		<input checked="" type="checkbox"/>
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	<input checked="" type="checkbox"/>	
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	<input checked="" type="checkbox"/>	
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		<input checked="" type="checkbox"/>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b _____	
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9	39a _____	
b	Gross receipts, included on line 9, for public use of club facilities	39b <u>6,000</u>	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<input checked="" type="checkbox"/>
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		<input checked="" type="checkbox"/>
41	List the states with which a copy of this return is filed ▶ <u>ILLINOIS</u>		
42a	The organization's books are in care of ▶ <u>EFFIE A. NEAL, FINANCIAL SECRETARY</u> Telephone no. ▶ <u>773-375-0422</u> Located at ▶ <u>1420 EAST 87TH STREET, CHICAGO, IL</u> ZIP + 4 ▶ <u>60619-6523</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		<input checked="" type="checkbox"/>
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶ _____		<input checked="" type="checkbox"/>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		<input checked="" type="checkbox"/>
c	Did the organization receive any payments for indoor tanning services during the year?		<input checked="" type="checkbox"/>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		<input checked="" type="checkbox"/>

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b If "Yes," was the related organization a section 527 organization?	49b	✓

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

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

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

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here	▶ <u>Effie A. Neal</u> Signature of officer	▶ <u>5-13-14</u> Date
	▶ EFFIE A. NEAL, FINANCIAL SECRETARY Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name CHARLEEN MILLS	Preparer's signature <u>Charleen Mills</u>	Date <u>5/12/14</u>	Check <input checked="" type="checkbox"/> if self-employed	PTIN P00716173
	Firm's name ▶ CHARLEEN MILLS, CPA	Firm's EIN ▶			
	Firm's address ▶ 3214 WEST 85TH PLACE, CHICAGO, IL 60652-3757	Phone no 773-502-5130			

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

MIDWEST BRIDGE UNIT, INC.
FOR THE YEAR ENDED DECEMBER 31, 2013

INCOME - FORM 990-EZ (LINE 3)

ABA Dues, Charter Fees and Sanction Fees	12,310
Bank Fees	-
Bridge Education	3,294
Property Tax Refund	-
Games	58,071
Member Donations and Pledges	7,444
Miscellaneous	<u>5,118</u>
	86,237

MIDWEST BRIDGE UNIT, INC.
FOR THE YEAR ENDED DECEMBER 31, 2013

EXPENSES - FORM 990-EZ (LINE 12)

Payroll	23,685
Payroll Expense	<u>2,996</u>
	26,681

MIDWEST BRIDGE UNIT, INC.
FOR THE YEAR ENDED DECEMBER 31, 2013

EXPENSES - FORM 990-EZ (LINE 14)

Building Maintenance	8,163
Building Supplies	1,956
Building Fund	-
Real Estate Tax	6,598
Snow Removal	-
Insurance	3,917
Utilities	<u>9,845</u>
	30,479
Depreciation	<u>5,493</u>
	<u><u>35,972</u></u>

MIDWEST BRIDGE UNIT, INC.
FOR THE YEAR ENDED DECEMBER 31, 2013

EXPENSES - FORM 990-EZ (LINE 15)

Office Supplies	1,377
Ads ABA/Sectional	140
ABA Hand Records, etc.	-
	<hr/>
	1,518

MIDWEST BRIDGE UNIT, INC.
FOR THE YEAR ENDED DECEMBER 31, 2013

EXPENSES - FORM 990-EZ (LINE 16)

ABA Dues, Charter Fees and Sanction Fees	7,680
ACBL Sanction Fees	3,241
Bank Charges	125
Benevolence	300
Bridge Education	-
Hospitality	2,256
City of Chicago	285
MBU Section Dues	1,524
Grade A	3,992
Soft Drinks	112
Website	-
Miscellaneous	<u>880</u>
	20,396