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Short Form 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 1545-1150

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-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

\overline{A}	For t	he 2013 ca	lendar year, or tax year beginning $_{ m Jun~1}$, 2013, and ending $_{ m May}$	31		, 2014
B		if applicable	C Name of organization			dentification number
⊢		ss change	Industry Development Fund Mechanical Contractors Assoc. of Indiana, I	na	22-74	40265
\vdash	İ		Number and street (or P O box, if mail is not delivered to street address) Room/suite		Telephone	40265 number
-	Initial r			- -	•	
	Termin		P. O. Box 20882 City or town, state or province, country, and ZIP or foreign postal code		(31/)	255-4126
	l	ded return ation pending				xemption
		unting Meth	Indianapolis IN 46220 nod X Cash Accrual Other (specify) ► H C			
ı			· • • • • • • • • • • • • • • • • • • •			organization is not Schedule B
J		<u></u>	,			, or 990-PF)
K		of organiza	(direction) direction	•		· · · · · · · · · · · · · · · · · · ·
L	Add I	lines 5b, 6c	, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if to olumn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	total	▶ ¢	100 704
D			ie, Expenses, and Changes in Net Assets or Fund Balances (see the			183,724.
<u> </u>	<u> </u>	ا Neverit Check if t	he organization used Schedule O to respond to any question in this Part I	mstruc	HOUS IC	X
	1		ons, gifts, grants, and similar amounts received			
₹	2		service revenue including government fees and contracts			
2014	3		ip dues and assessments			100 601
_] A		It income		4	183,631.
₹ 7	5 2		ount from sale of assets other than inventory		3°t.7	93.
•	<u>.</u>		or other basis and sales expenses			
کر آ	1		<u> </u>			
	6		s) from sale of assets other than inventory (Subtract line 5b from line 5a)		. 5 c	
\mathcal{L}_{R}	1	•			*********	
₹.			ome from gaming (attach Schedule G if greater than \$15,000) 6a		- 72	
ANNED	"		ome from fundraising events (not including \$ of contributions raising events reported on line 1) (attach Schedule G if the sum		27 27	
₹ Ü) E		of such gre	oss income and contributions exceeds \$15,000) 6 b			
Ď	С	Less direc	ct expenses from gaming and fundraising events			
	d	Net incom 6b and sul	e or (loss) from gaming and fundraising events (add lines 6a and btract line 6c)		6 d	
	7 a	Gross sale	es of inventory, less returns and allowances			
	b	Less cost	of goods sold			
	С		fit or (loss) from sales of inventory (Subtract line 7b from line 7a)		. 7 c	
	8	Other reve	enue (describe in Schedule O)		. 8	
_	9	Total reve	enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		► 9	183,724.
	10	Grants and	d similar amounts paid (list in Schedule O)		. 10	
	11	Benefits pa	aid to or for members		. 11	
E	12		other compensation, and employee benefits		. 12	
XPENSES	13	Profession	nal fees and other payments to independent contractors OGDEN, .UT		. 13	1,035.
Ņ	14	Occupanc	y, rent, utilities, and maintenance.		. 14	
Ĕ	15		ublications, postage, and shipping		. 15	46.
•	16	Other expe	enses (describe in Schedule O)	Other Expen	seș 16	174,463.
	17	Total expe	enses. Add lines 10 through 16		▶ 17	175,544.
	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)			8,180.
A S NS E E T T	19	Net assets	or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-yorted on prior year's return).	ear · · · · ·	19	130,927.
T S	20	Other char	nges in net assets or fund balances (explain in Schedule O)		. 20	200,0211
	21		s or fund balances at end of year. Combine lines 18 through 20		▶ 21	139,107.
BA	A Fo		k Reduction Act Notice, see the separate instructions.		. 1	Form 990-EZ (2013)

P <u>a</u>	Till Balance Sheets (see the instru	uctions for Part II)				П
	Check if the organization used Schedu	ie O to respond to any questi	n mis Par II	(A) Beginning of ye		(B) End of year
22	Cash, savings, and investments			130,92		139,107.
23	Land and buildings				23	0.
24	Other assets (describe in Schedule O)		,	(24	0.
25	Total assets			130,92	7 . 25	139,107.
26	Total liabilities (describe in Schedule O)				26	0.
	Net assets or fund balances (line 27 of co			130,92	7 27	139,107.
Pai	t III Statement of Program Service Ac Check if the organization used Schee	complishments (see the ins	structions for Part III)	Г	1 (Rea	Expenses urred for section 501
What	is the organization's primary exempt purpose? DEX				┤(c)(3	and 501(c)(4)
Desc	cribe the organization's program service acco	implishments for each of its th	ree largest program :	services, as		nizations and section (a)(1) trusts, optional
mea	cribe the organization's program service acco sured by expenses. In a clear and concise m fited, and other relevant information for each	anner, describe the services program title	provided, the number	of persons		thers)
28	DEVELOPMENT AND PROMOTION		 -		1	
	CONTRACTORS IN THE FORT WA]	
					_	
	(Grants \$) If this	amount includes foreign grai	nts, check here		28 a	174,522.
29					-	
					-	
	(Grants \$) If this	amount includes foreign grai	nts check here		☐ 29 a	
30	(Grants \$	amount includes loreign gran	165, CHECK HOTE 1.1.		1 200	
•					1	
					1	
		amount includes foreign grai] 30 a	
31	Other program services (describe in Sched				_	
		amount includes foreign grain			31 a	
	Total program service expenses (add line				► 32	174,522.
Pa	List of Officers, Directors, Check if the organization used Sche	Frustees, and Key Emp	oloyees (list each one	even if not compensated	— see ti	ne instructions for Part IV)
	Check is the organization used Sche		(c) Reportable compensat	(d) Health benef	its,	
	(a) Name and Title	(b) Average hours per week devoted to position	(Forms W-2/1099-MISC (If not paid, enter -0-)	bonefit plane and de	eferred	(e) Estimated amount of other compensation
<u>Te</u>	d Current					
		2.00		0.	0.	0.
	ry Perkey	2.00		0.	0.	0.
PRI	ESIDENT	2.00		<u> </u>	<u> </u>	
		· · · · · · · · · · · · · · · · · · ·				
						<u> </u>
		<u>.</u>				
_						
			<u> </u>			Form 990-EZ (2013)
BA		TEEA0812 1				

Form 990-EZ (2013) Industry Development Fund Mechanical Contractors Assoc. of Indiana, Inc. 23-7440265

Page 2

	990-EZ (2013) Industry Development Fund Mechanical Contractors Assoc. of Inc		5	P	age 3
Par	t V. Other Information (Note the Schedule A and personal benefit contract statement require the instructions for Part V) Check if the organization used Schedule O to respond to any questions.				. 🔲
33	Did the organization engage in any significant activity not previously reported to the IRS?		33	Yes	No
34	If 'Yes,' provide a detailed description of each activity in Schedule O	amended documents if they reflect	33		X
	a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)		34		Х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from (such as those reported on lines 2, 6a, and 7a, among others)?		35 a		
ь	If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explan		35 b		X
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6	033(e) notice.			
36	reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant		35 c	X	
37 a	disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N Enter amount of political expenditures, direct or indirect, as described in the instructions		36	7	X
	Did the organization file Form 1120-POL for this year?	<u> </u>	37 b	J.C.889.38	X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key emplo			النالسا	
ŧ	any such loans made in a prior year and still outstanding at the end of the tax year covered by this if 'Yes,' complete Schedule L, Part II and enter the total		38 a		X
	amount involved	38 b		17	-
	Section 501(c)(7) organizations Enter- Initiation fees and capital contributions included on line 9	39 a			
	Gross receipts, included on line 9, for public use of club facilities	39 b	-		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year		1 :		
	section 4911 ; section 4912 ; section 4955				
t	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 e transaction during the year or did it engage in an excess benefit transaction in a prior year that ha	xcess benefit s not been reported	1-3-		<u></u>
	on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I		40 b		
	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				
C	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		40 e		X
41	List the states with which a copy of this return is filed Indiana		100	<u> </u>	
4.5					
42 a	The organization's books are in care of Cindy Stewart	Telephone no ► (317)	255	-412	6
	Located at 2509 EAST 54TH STREET INDIANAPOLIS	IN ZIP+4 - 46220			
Ł	At any time during the calendar year, did the organization have an interest in or a signature or oth	er authority over a	401	Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial fragment of the foreign country	ar account) /	42 b	19631 :k	X
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finar At any time during the calendar year, did the organization maintain an office outside of the U S.?		42 c		X
	If 'Yes,' enter the name of the foreign country		420	l	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check and enter the amount of tax-exempt interest received or accrued during the tax year	1 1			
	and enter the amount of tax-exempt interest received of accided during the tax year	[45]	_	Yes	No
44 a	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must b of Form 990-EZ	e completed instead	44 a	·	X
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 mu instead of Form 990-EZ	st be completed	44 b	13	X
c	Did the organization receive any payments for indoor tanning services during the year?		44 c		Х
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		44 d	700	
45 a	Did the organization have a controlled entity of the organization within the meaning of section 512		45 a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).	of section 512(b)(13)? If 'Yes,'	45 6	3000	8809 V
	FOUR 990 and Schedule K may need to be completed instead of Form 990-EZ (see instructions)		45 b		X

Form 990-I	EZ(2013) Industry Development Fund	d Mechanical Contra	actors Assoc. of Inc	diana, Inc. 23-744	10265	Р	age 4		
Yes No									
46 Did t	he organization engage, directly or indirectly	, in political campaign a	ctivities on behalf of or in	opposition to	2.3 Ž		السالات		
	idates for public office? If 'Yes,' complete So			· · · · · · · · · · · · · · · · · · ·	46	1	X		
Part VI	All section 501(c)(3) organization		stions 47-49b and 5	2, and complete the	tables				
	for lines 50 and 51.	•		·					
	Check if the organization used Schedule	O to respond to any que	stion in this Part VI	· · · · · · · · · · · · · · · · · · ·			للن		
47 Didit	he organization engage in lobbying activities	or have a section 501/h	a) election in effect during	the tax year? If 'Yes '	<u></u>	Yes	No		
	olete Schedule C, Part II				47				
48 Is the	e organization a school as described in secti	on 170(b)(1)(A)(II)? If 'Y	es,' complete Schedule E		48				
49 a Did t	he organization make any transfers to an ex	empt non-charitable rela	ated organization?	. <i>.</i>	49 a				
	es,' was the related organization a section 52								
	plete this table for the organization's five hig oyees) who each received more than \$100,0				key				
empi	oyees) who each received more than \$100,0	Too or compensation iro	in the organization in the	<u> </u>	-				
	(a) Name and title of each employee	(b) Average nours 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 other comp				
		222							
	I number of other employees paid over \$100				- #400 000 -				
51 Com	plete this table for the organization's five hig pensation from the organization. If there is no	nest compensated indej one, enter 'None.'	pendent contractors wno	each received more than	1 \$100,000 0	T			
	(a) Name and business address of each independent con-	tractor	(b) Type	of service	(c) Comp	ensation	n		
-									
d Total	I number of other independent contractors ea	ach recovers ever \$100	000	<u> </u>					
52 Did t	he organization complete Schedule A? Note table trusts must attach a completed Sched	e. All section 501(c)(3) or	rganizations and 4947(a)	(1) nonexempt		ſ			
Under penaltie	es of perjury, I declare that I have examined this return, incl	uding accompanying schedules	and statements, and to the best	of my knowledge and belief, it is	·103				
true, correct, a	and complete Declaration of preparer (other than officer) is	based on all information of which	ch preparer has any knowledge	9.7-14	···	-			
Ciam	Signature of officer			Date					
Sign Here	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date		TIN				
Doid	Galen D. Maust, C.P.A.	Galen D. Maust,	. C.P.A. 8/2	6/14 Check I if self-employed	0127941	6			
Paid Preparer	Firm's name GALEN D. MAUST,	P.C.		'	<u></u>				
Use Only	Firm's address > 3470 STELLHORN I			Firm's EIN ►	35-1785	911			
	FORT WAYNE		IN 46815	Phone no (26	0) 483-	1934			
May the IR	S discuss this return with the preparer show	n above? See instructio	ns		.► X Yes	<u> </u>	No		
					Form 99 0)-EZ (2013)		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2013

Open to Public

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

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

_ • 5	section 501(c)(4), (5), or (6) orga	anizations Complete Part III			
Name	of organization		Employer identification	ation number	
Ind	ustry Development Fu	nd Mechanical Contractors Asso	oc. of Indiana,	Inc. 23-744026	5
Par		rganization is exempt under section			zation.
1		ganization's direct and indirect political camp			
2					
					
		rganization is exempt under secti			
1	· · · · · · · · · · · · · · · · · · ·	e tax incurred by the organization under secti		•	
2	Enter the amount of any excis	e tax incurred by organization managers und	er section 4955	▶\$	·
3	If the organization incurred a s	section 4955 tax, did it file Form 4720 for this	year?		· · · Yes No
4 a	Was a correction made?				Yes No
	If 'Yes,' describe in Part IV				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c) , excep	t section 501(c)(3)	•
1	Enter the amount directly expe	ended by the filing organization for section 52	7 exempt function acti	vities ▶ \$	
2	Enter the amount of the filing of function activities	organization's funds contributed to other orga	nızatıons for section 5	27 exempt ▶ \$	
3	Total exempt function expendine 17b	tures Add lines 1 and 2 Enter here and on F	form 1120-POL,		
4	Did the filing organization file I	Form 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	and employer identification number (EIN) of all For each organization listed, enter the amount is received that were promptly and directly deaction committee (PAC). If additional space is	nt paid from the filing of	organization's funds Also political organization, suc	enter the
	(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-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 20					
Part II-A Complete if section 501(the organization (h)).	on is exempt under sec	ction 501(c)(3) and	d filed Form 5768 (el	ection under
A Check ► If the filin	g organization beloi	ngs to an affiliated group (and	list in Part IV each affil	ated group member's nam	e,
address,	EIN, expenses, and	I share of excess lobbying exp	penditures)		
B Check ► ☐ if the filin	g organization chec	ked box A and 'limited control	provisions apply		
(The term		ring Expenditures ans amounts paid or incurr	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditur	res to influence pub	lic opinion (grass roots lobbyii	ng)		
b Total lobbying expenditui	res to influence a le	gislative body (direct lobbying)		
c Total lobbying expenditui	res (add lines 1a an	d 1b)			
d Other exempt purpose ex	xpenditures				
e Total exempt purpose ex	penditures (add line	s 1c and 1d)			
		unt from the following table in			
If the amount on line 1e, coli	umn (a) or (b) is	The lobbying nontaxable a	amount is		3 2 1 3 6
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000	1	
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000	* 1	
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess o	ver \$1,500,000	3 *	
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	mount (enter 25% o	f line 1f)			•
h Subtract line 1g from line	1a If zero or less,	enter -0			
i Subtract line 1f from line	1c If zero or less, e	enter -0			
j If there is an amount other section 4911 tax for this		er line 1h or line 1i, did the org			Yes No
(Som		4-Year Averaging Period Unat made a section 501(h) elens below. See the instruction	ection do not have to		
	*	bying Expenditures During			
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
your boginning in					
2 a Lobbying non-taxable 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))					
f Grassroots lobbying expenditures					
BAA				Schedule C (Form	990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 Industry Development Fund Mechanical Contractors Assoc. of Indiana, Inc. 23-7440265 [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)).

	(a)	(b)			
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Am	ount		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
a Volunteers?					, l	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				II.	لننة	
c Media advertisements?			4			
d Mailings to members, legislators, or the public?						
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?			<u> </u>			
g Direct contact with legislators, their staffs, government officials, or a legislative body?						
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
, Total Mac III all all all all all all all all all	` 1 ·					
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				i,	للالة	
b If 'Yes,' enter the amount of any tax incurred under section 4912	\$64 3	. ×				
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					}	
Part*III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or				
section 501(c)(6).						
				Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?					X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				Х	<u> </u>	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?					X	
Complete if the organization is exempt under section 501(c)(4), section 501(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Fanswered 'Yes.'	c)(5) Part I	, or s II-A,	section 5 line 3, is	U1(C)		
1 Dues, assessments and similar amounts from members		1				
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			I			
a Current year		2 a	Ī			
b Carryover from last year		2 b				
c Total		2 c				
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		***********				
expenditure next year?		4				
5 Taxable amount of lobbying and political expenditures (see instructions)		5				
Rart IV Supplemental Information						
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group list), Part II-B, line 1 Also, complete this part for any additional information	art II-A	, line 2	2, and			

Schedule C (Form 990 or 990-EZ) 2013 Industry Development Fund Mechanical Contractors Assoc. of Indiana, Inc. 23-7440265 Page Part IV. Supplemental Information (continued)	3 4
Part IV Supplemental Information (continued)	
	- -
	- -
	- -
	- -
	<u>-</u> -

SCHEDULE O (Form 990 or 990-EZ)

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.

2013
Open to Rublic Inspection

Employer identification number

Industry	<u>Developmen</u>	t Fund	Mechanical	Contractors	Assoc.	of In	diana,	Inc.	23-74402	65	
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Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990-EZ, Part I, Line 16 Other Expenses

Other expenses (describe in Schedule O)	
MCA OF INDIANA DUES	107,418.
MEETING AND PROGRAM EXPENSES	19,446.
APPRENTICESHIP BANQUET	1,623.
EDUCATIONAL EXPENSES	45,000.
INSURANCE	350.
MISC	626.
Total	174,463.