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Return of Organization Exempt From Income Tax

OMB No 1545-0047

DLN: 93493237005015

Form **990**

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter social security numbers on this form as it may be made public

Internal Re	evenue Ser	vice Finformation about	Form 990 and its instructions is at <u>wi</u>	VW.1KS.gov/Tor	<u>m990</u>	Inspection			
A For	the 201		01-01-2014 , and ending 12-31-201	4					
	k ıf applı	BUILDERS ASSOCIATION OF ELKHAR	T CO		D Employer ide	ntification number			
	ess chang	e INC			35-146926	0			
	e change	Doing business as							
Initia		Number and street (or P.O. boy if m	all is not delivered to street address) Room/su	ute	E Telephone num	ber			
_ Final retur	n/termina	25422 COLUMNIA DOAD 20	all is not delivered to street address, Room, se	(574) 293-0997					
_	nded retu	ELKHART, IN 46517	itry, and ZIP or foreign postal code		G Gross receipts s	\$ 292,324			
Аррік	cation pe		1. 65						
		F Name and address of prin KIM MCKIBBIN 25428 COUNTY ROAD 20	cipal officer		is a group return rdinates?	for			
		ELKHART,IN 46517			II subordinates	┌ Yes ┌ No			
r Tax-	-exempt	status	Insert no)	Includ		(see instructions)			
		· WWW BAEC COM	11351(110) 1 4347(d)(1) 01 1 327	1 _					
			_	1	ıp exemption nui				
K Form Par		zation Corporation Trust Association	n Other -	L Year of fo	mation 1967 M	State of legal domicile IN			
Governance	TH AS ED	SOCIATION THAT IS THE RESPECT JCATES AND PROMOTES ITS MEMI	CHART COUNTY, INC (THE ASSOCITED VOICE OF THE PROFESSIONAL BERS AND THE COMMUNITY THE AGING NEEDS OF ITS INDUSTRY AND	BUILDING IN	NDUSTRY THE	ASSOCIATION			
3	2 Ch	eck this box দ if the organization dis	scontinued its operations or disposed	of more than 2	5% of its net as	sets			
Activities &	3 N		na hadu (Darb)(T. luna da)		ا ا	1 47			
			ng body (Part VI, line 1a) If the governing body (Part VI, line 1b			19			
		·	calendar year 2014 (Part V, line 2a)	•					
١,			ecessary)		6				
			art VIII, column (C), line 12		7a	(
\dashv	b Net	unrelated business taxable income fr	om Form 990-T, line 34						
	8 (ontributions and grants (Part VIII lu	ne 1h)		79,552	Current Year 66,570			
≘			ne 2g)	<u> </u>	208,389	224,871			
Havenue	10 I	nvestment income (Part VIII, column	(A), lines 3, 4, and 7d)		-2,317				
"		ther revenue (Part VIII, column (A),				C			
		otal revenue—add lines 8 through 11 2)	(must equal Part VIII, column (A), lin	e	285,624	292,102			
			IX, column (A), lines 1-3)		2,500	5,700			
			X, column (A), line 4)			C			
		alaries, other compensation, employe –10)	es, other compensation, employee benefits (Part IX, column (A), lines						
<u>¥</u>		•	column (A), line 11e)			(
සානෙන ි	b T	otal fundraising expenses (Part IX, column (D)	, line 25) ▶ <mark>28,040</mark>						
_	17 (ther expenses (Part IX, column (A), l	ines 11a-11d, 11f-24e)		202,620	202,052			
		otal expenses Add lines 13-17 (mus			275,982	280,678			
	19 R	evenue less expenses Subtract line	18 from line 12	Beginning	9,642 g of Current	11,424 End of Year			
Fund Balances	20 T	otal assets (Part X, line 16)		T	'ear 327,816	324,955			
[발					68,823	54,538			
			line 21 from line 20		258,993	270,417			
ny kno repar Sign	penaltion penalticon p		imined this return, including accompar iplete Declaration of preparer (other t	han officer) is					
Here		KIM MCKIBBIN EXECUTIVE DIRECTOR Type or print name and title							
		Print/Type preparer's name	Preparer's signature	Date Che	ck If PTIN				
Paid		CRAIG YAHNE CPA		2015-08-25 self-	employed P0054				
	arer	Firm's name		Firm	n's EIN 🟲 35-13502	97			
		Firm's address ► 110 E WASHINGTON ST	Use Only Firm's address ► 110 E WASHINGTON STREET						

GOSHEN, IN 46528

✓ Yes 厂 No

Form	990 (2014)					Page :
Par		ent of Program Servi Schedule O contains a resp				·
1	Briefly describe	the organization's mission				
THA ITS	T IS THE RESPEC MEMBERS AND T	CTED VOICE OF THE PRO	FESSIONAL	BUILDING INDUSTRY 1	IS A NOT-FOR-PROFIT TRAD THE ASSOCIATION EDUCATE TTER ENVIRONMENT AND ME	S AND PROMOTES
2	Did the organiza the prior Form 99	tion undertake any significa 90 or 990-EZ?	ant program s	ervices during the year w	hich were not listed on	「Yes ▼ No
	If "Yes," describ	e these new services on So	chedule O			
3	Did the organiza services?	tion cease conducting, or n	nake sıgnıfıcaı	nt changes in how it cond	ucts, any program	┌ Yes ┌ No
	If "Yes," describ	e these changes on Sched	ule O			
4	expenses Section) organization	s are required to report tl	e largest program services, as i he amount of grants and allocat	
4a	(Code) (Expenses \$	107,402	ıncludıng grants of \$) (Revenue \$)
		PROVIDES TRAINING, MEMBERSI NATION REGARDING INDUSTRY U			DEMONSTRATE THEIR PRODUCTS ANI LE TO MEMBERS	O SERVICES TO ONE
4b	(Code) (Expenses \$	88,126	ıncludıng grants of \$) (Revenue \$)
		ND RELATED CODES IMPACTING			S TO EDUCATE THE PUBLIC ABOUT CU FRY THESE VENUES CONSIST OF NEW	
	(Code) (Expenses \$	6,109	ıncludıng grants of \$) (Revenue \$)
	MISCELLANEOUS O	THER SERVICES AND SUPPORT F	OR THE BUILDIN	G INDUSTRY		
	See Additional	Data				
	Other program	services (Describe in Sche	idula O. V			
чu	o thei program	services (Describe III Sche	uuie O)			

5,700) (Revenue \$

5,875 including grants of \$

207,512

(Expenses \$

Total program service expenses ►

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> 2	8		No
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? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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 as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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		No
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		No
	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
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	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^7$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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 Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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	<u> </u>		
12	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c		No
a	Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		l No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		<u> </u>
٠	II 165, to line 3a of 30, and the organization life form 6000-17	5c		L
	Does the organization have annual gross receipts that are normally greater than $$100,000$, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
2	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
-	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
)	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
3	Initiation fees and capital contributions included on Part VIII, line 12 10a			
)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
3	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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.			
_	m which the organization is necessar to issue qualified health plans	-		
]	 	 _N 1
4	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

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

Check if Schedule C	contains a respo	nse or note to an	y line in this Part VI							. <u>_</u> _

Se	ection A. Governing Body and Management								
			Yes	No					
1 a	Enter the number of voting members of the governing body at the end of the tax year								
	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								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes						
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		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6	Yes						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes						
b	7b		No						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	a The governing body?								
b	b Each committee with authority to act on behalf of the governing body?								
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		Νo					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)					
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No					
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes						
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes						
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b							
b 11a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b							
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes						
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes						
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes						
b 11a b 12a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes	No					
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No					
b 11a b 12a b c 13	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No					
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No					
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No					
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No					
b 11a b 12a c 13 14 15 a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No					
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No					
b 11a b 12a c 13 14 15 a b 16a 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No					

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Upon request Other (explain in Schedule O)

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶BUILDERS ASSOCIATION OF ELKHART CO

25428 CR 20

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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, or 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ecto	not box h ar or/tr	c , ou employee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		х						О	0	0
BUILDER AT L (2) JOHN DOVENMUEHLE	0 00 1 00				\vdash					
DIRECTOR	0 00	Х						0	0	0
(3) JUSTIN HURTEKANT	1 00	v								
DIRECTOR		Х						0	0	0
(4) KAREN JOHNSON	1 00	х						0	0	0
DIRECTOR	0 00	^						0	0	
(5) BRIAN LEVAN	1 00	х						0	0	0
DIRECTOR	0 00							Ů		
(6) MARK LIECHTY	1 00	х						0	0	0
DIRECTOR (7) CREG LONGRAME	0 00									
(7) GREG LONGBRAKE	1 00	х						0	0	0
DIRECTOR (8) JEREMY LOVE	0 00				_					
		х						0	0	0
DIRECTOR (9) GENE MILLER	1 00									
DIRECTOR	0 00	Х						0	0	0
(10) STEVE OTIS	1 00									
DIRECTOR	0 00	Х						0	0	0
(11) CRAIG PAWLING	1 00							_	_	_
DIRECTOR	0 00	Х						0	0	0
(12) MEGHANN SULLIVAN	1 00	х						0	0	0
DIRECTOR		^						0	0	
(13) ANDY HARLOW	1 00			Х				0	0	0
TREASURER	0 00									
(14) JEFF LOUCKS	1 00			Х				o	0	0
PRESIDENT	0 00									
										Form 990 (2014)

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar	check x, unle n office rustee	ss er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Ke) emplojee	Former Highest compensated employee		(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(15) KIMBERLY MCKIBBIN	40 00			Х				40,154	0	
EXECUTIVE OF	0 00							,20		
(16) RICHARD MILLER	1 00			V					0	
PAST PRESIDE	0 00			Х				ľ	U	
(17) GAIL SAGER	1 00									
ASSOCIATE EL	0 00			Х				0	0	
(18) MIKE SMITH	1 00									
SECRETARY	0 00			Х				0	0	
(19) RAY WASMER	1 00									
ASSOCIATE EL	0 00			Χ				0	0	
(20) KEVIN YODER	1 00			.,				_	_	
1ST VICE PRE	0 00			Х				0	0	

1b	Sub-Total	•		
С	Total from continuation sheets to Part VII, Section A	•		
d	Total (add lines 1b and 1c)	۰	40,154	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual			
	on time 1a. 11 Yes, complete schedule 1101 such mulvidual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			ii
	ındıvıdual	4		Νo
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			1
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo

Section	R	Inden	endent	Contra	actors
Section	D.	THUED	enuent	COILLI	actors

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

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

Contributions, Gifts, Grants and Other Similar Amounts	
Program Service Revenue	
Other Revenue	

V/ + + 1	Statement o		ponse or note to any l	ine in this Part VIII			Г
	Check ii Schedi	uie O contains a res	ponse of note to any i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns	1a				
ь	Membership du	es	1b 61,530				
c	Fundraising eve	ents	 1c				
d			 1d				
e	Government grants	s (contributions)	1e				
f	All other contribution similar amounts no	ons, gifts, grants, and ot included above	1f 5,040				
g		ons included in lines		i i			
	1a-1f \$			66 570			
h	Total. Add lines	s 1a-1f	· · · · · •	66,570			
			Business Code	1			
2a	PARADE OF HOMES	S PLUS		107,971			107,971
b	HOME IMPROVEME	NT SHOW		52,917			52,917
C	MEMBERSHIP EVEN	NTS		36,330			36,330
d	EDUCATIONAL ACT	IVITIES		8,520			8,520
е	WOMENS'S COUNC	CIL		5,600			5,600
f	All other progra	am service revenue		13,533			13,533
g	Total. Add lines	s 2a-2f		224,871			+
3		ome (including divid					
	and other simil	ar amounts)		633			633
4		stment of tax-exempt bo					
5	Royalties						<u> </u>
	C	(ı) Real	(II) Personal	-			
b oa	Gross rents Less rental			-			
"	expenses						
C	Rental income or (loss)						
d	Net rental inco	me or (loss)	a a a a a pe				
		(ı) Securities	(II) Other				
7a	Gross amount from sales of		250				
	assets other than inventory						
ь	Less cost or		222				
	other basis and sales expenses		222				
C	Gain or (loss)		28	4			
d	Net gain or (los	-	· · · · · •	28	28		
8a	Gross income f events (not inc						
	of contributions	reported on line 1c)				
	See Part IV, lin	ie 18	a				
ь	less directex	penses	ь	-			
c		(loss) from fundraisii		1			
9a	Gross income f	rom gamıng actıvıtıe	es				
	See Part IV, lin	ne 19					
1.			a	 			
		penses (loss) from gaming a	b	 			
	Gross sales of		ctivities	+			1
	returns and allo]			
		ā	1]			
Ь			.	<u> </u>			
C		(loss) from sales of 1					<u> </u>
	Miscellaneous	s Revenue	Business Code	₋			
11a							
b							<u> </u>
C							1
d		ue					1
e	Total. Add lines	s 11a-11d					
12	Total revenue.	See Instructions .		292,102	28		225,504

Pari	IX Statement of Functional Expenses				1 age 10
	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organizat	ıons must comp	olete column (A)	
	Check if Schedule O contains a response or note to any line in this				<u></u>
	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21				<u> </u>
2	Grants and other assistance to domestic individuals See Part IV, line 22	5,700	5,700		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	7, 22	2,		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	40,154	21,964	9,095	9,095
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	19,508	10,661	4,424	4,423
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				_
10	Payroll taxes	13,264	7,256	3,004	3,004
11	Fees for services (non-employees)				
а	Management				
ь	Legal	828		828	
С	Accounting	15,113		15,113	
d	Lobbying	2,100	2,100		
e	Professional fundraising services See Part IV, line 17	,	·		
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	305	167	69	69
13	Office expenses	9,904	5,416	2,244	2,244
14	Information technology	2,230	2,230		·
15	Royalties	,	,		
16	Occupancy	2,180	1,192	494	494
17	Travel	2,133	1,132	.,,	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,129	6,129		
20	Interest	256		256	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	12,214	6,708	2,753	2,753
23	Insurance	3,227	1,765	731	731
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PARADE OF HOMES PLUS	60,626	60,626		
b	HOME IMPROVEMENT SHOW PLU	27,500	27,500		
c	MEMBERSHIP EVENTS	17,627	17,627		
d	REPAIRS AND MAINTENANCE	10,709	5,857	2,426	2,426
e	All other expenses	31,104	24,614	3,689	2,801
25	Total functional expenses. Add lines 1 through 24e	280,678	207,512	45,126	28,040
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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in thi	STAILA	(A)	· ·	· · ·
				Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1	,
	2	Savings and temporary cash investments		47,403	2	67,554
	3	Pledges and grants receivable, net			3	_
	4	Accounts receivable, net		56,095	4	43,981
	5	Loans and other receivables from current and former officers, directly employees, and highest compensated employees. Complete Part Schedule L	ectors, trustees, key : II of		5	
Assets	6	Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and co and sponsoring organizations of section $501(c)(9)$ voluntary emporganizations (see instructions) Complete Part II of Schedule L	ntributing employers		6	
% %	7	Notes and loans receivable, net			7	
ď	8	Inventories for sale or use		830	8	951
	9	Prepaid expenses and deferred charges		6,478		5,155
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 332,58	·		0,100
	Ь	Less accumulated depreciation	10b 156,433	186,462	10c	176,150
	11	Investments—publicly traded securities	,		11	<u> </u>
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		30,548	15	31,164
	16	Total assets. Add lines 1 through 15 (must equal line 34)		327,816	16	324,955
	17	Accounts payable and accrued expenses		3,265	17	1,549
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
ω.	21	Escrow or custodial account liability Complete Part IV of Sched			21	
<u>a</u>	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualifie	s, trustees,			
Liabiliti		persons Complete Part II of Schedule L			22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		2,707	23	956
	24	Unsecured notes and loans payable to unrelated third parties .			24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part	X of Schedule			
	l	D		62,851	25	52,033
	26	Total liabilities. Add lines 17 through 25		68,823	26	54,538
Φ S		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	and complete			
ĕ	27	Unrestricted net assets		246,740	27	255,974
Fund Balance	28	Temporarily restricted net assets		12,253	28	14,443
	29	Permanently restricted net assets		,	29	
Š	-	Organizations that do not follow SFAS 117 (ASC 958), check her				
<u>.</u>		complete lines 30 through 34.	CF una			
s or	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .			31	
Ass	32	Retained earnings, endowment, accumulated income, or other fur			32	
Net 1	33	Total net assets or fund balances		258,993	33	270,417
Ź	34	Total liabilities and net assets/fund balances		327,816	34	324,955
	T.,	. 111. Habilities and het desetojiana saidnees. I I I I I	<u> </u>	1 327,810	5 7	524,000

Form 990	(2014)
Part XI	Rec
	Chec

Page **12**

Par	t XI	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				<u>.</u>
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		-	292,102
2	Total	expenses (must equal Part IX, column (A), line 25)	2			280,678
3	Reven	nue less expenses Subtract line 2 from line 1	3			11,424
4	Netas	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-	258,993
5	Net ur	nrealized gains (losses) on investments	5			
6	Donat	red services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	O ther	changes in net assets or fund balances (explain in Schedule O)	9			
10	Net as colum	ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10		2	270,417
Par	t XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				. F
					Yes	No
1		organization changed its method of accounting from a prior year or checked "Other," explain in dule O				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	wed on			
	√ s	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b		No
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
	Γs	eparate basis				
C		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i fule O	n			
За		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	e	За		No
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the red audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID:

Software Version:

EIN: 35-1469260

Name: BUILDERS ASSOCIATION OF ELKHART CO

INC

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	5,875	including grants of \$	5,700) (Revenue \$)
THE ASSOCIATION	PROVIDES ACADEMIC	SCHOLAR:	SHIPS FOR QUALIFIED STUDENTS		

DLN: 93493237005015

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

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) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of the organization BUILDERS ASSOCIATION OF ELKHART CO

TIVC				35-146926				
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a section 52	27 organization.			
1	Provide a description of the or	ganızatıon's dırect and ındırect politic	cal campaign act	ivities in Part IV				
2	Political expenditures			▶	\$\$			
3	Volunteer hours							
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).				
1	Enter the amount of any excis	e tax incurred by the organization und	der section 4955	▶	\$			
2	Enter the amount of any excis	e tax incurred by organization manag	ers under sectio	n 4955 🕨	\$			
3	If the organization incurred a s	section 4955 tax, did it file Form 472	┌ Yes ┌ N					
4 a	Was a correction made?	correction made?						
b	If "Yes," describe in Part IV							
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 5	01(c)(3).			
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exem	pt function activities 🕨	\$			
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organizations	s for section 527	\$			
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	\$			
4	Did the filing organization file I	Form 1120-POL for this year?			Yes			
5	organization made payments amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	om the filing organization's to a separate political org	s funds Also enter the ganızatıon, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contributions receiv			
For F	Paperwork Reduction Act Notice, s	Let the instructions for Form 990 or 990	 -EZ. /	Cat_No_50084S	/ (Form 990 or 990-F7) 20			

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
	Over \$1,000,000 but not over \$1,500,000	9 \$175,000 plus 10% of the excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	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))					

Grassroots lobbying expenditures

_	filed Form 5768 (election under section 501(h)).		(6	a)		(b)	
	r each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed descript tivity.	tion of the lobbying	Yes	No	А	moun	ıt
1	During the year, did the filing organization attempt to influence foreign, nationa legislation, including any attempt to influence public opinion on a legislative methrough the use of			<u> </u>			
а	a Volunteers?						
b	b Paid staff or management (include compensation in expenses reported on lines	: 1c through 1ı)?					
C							
d	, , , , ,						
е	, ,						
f	, 31 1						
g					1		
h		nilar means?			+		
i		_			_		
j	-	5047 7/070		I			
2a		n 501(c)(3)?			4		
b	,	4042					
C	, , , , , , , , , , , , , , , , , , , ,				-		
d	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for tart III-A Complete if the organization is exempt under section		01/0	\/F\		-4:-	
1 61	501(c)(6).	1 SUI(C)(4), Section 5	OT(C)(5),	or se	CTIO	n
	501(0)(0).					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members	5?		ſ	1		
2				ŀ	2		
3	Did the organization agree to carry over lobbying and political expenditures fro	m the prior year?		Ī	3		
Par	art III-B Complete if the organization is exempt under section						
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 are	nd 2, are answered "	No" C)R (b)	Part	: III-	-А,
	line 3, is answered "Yes."						
1 2	•	ido amounts of political	1				
2	expenses for which the section 527(f) tax was paid).	ide amounts of political					
а			2a				
b	· _ · _ ·		2b				
c	c Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible	section 162(e) dues	3				
4	-,,,,,,						
	does the organization agree to carryover to the reasonable estimate of nonded	uctible lobbying and	,				
_	political expenditure next year?		5				
5	Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		3				
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additiona		p list),	Part I	I-A, lı	nes 1	and
	Return Reference Explanation						
SCH	CHEDULE C, PART I-A, LINE 1 CONTRIBUTION OF 100 TO ALLAN KAUFF				MAYC	RAN	D
	CONTRIBUTION OF 2,000 TO DOUG MILL	ER FOR STATE REPRESEN	TATI	/ E			

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493237005015

OMB No 1545-0047

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.

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

Open to Public

	me of the organization LDERS ASSOCIATION OF ELKHART CO			oloyer identification number
Pa	rt I Organizations Maintaining Donor Ad	vised Funds or Other Similar		
	organization answered "Yes" to Form 990	· · · · · · · · · · · · · · · · · · ·		
		(a) Donor advised funds		(b) Funds and other accounts
•	Total number at end of year			
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o	-		rsed Yes No
	Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit?			
a	rt III Conservation Easements. Complete r	f the organization answered "Yes	s" to Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	n or education) Preservation o Preservation o	f a certifie	ically important land area d historic structure n of a conservation
	easement on the last day of the tax year			
,	Total number of conservation easements		120	Held at the End of the Year
	Total acreage restricted by conservation easements		2a	
•	Number of conservation easements on a certified hist	core etrusture included in (a)	2b	
	Number of conservation easements included in (c) ac	• •	2c	
	historic structure listed in the National Register		2d	
	Number of conservation easements modified, transfer	red, released, extinguished, or termir	nated by tr	ne organization during
	the tax year 🗠			
	Number of states where property subject to conservation	tion easement is located ►		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, h	nandling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, insper	ecting, and enforcing conservation ea	isements o	during the year
	A mount of expenses incurred in monitoring, inspectin	a and enforcing conservation easem	ents durin	g the year
	► \$	g, and emoreing conservation easem	circo darrir	g the year
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of	section 17	70(h)(4)(B)(ı) Yes No
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easem	ne footnote to the organization's finan		
ı	Complete if the organization answered "			her Similar Assets.
1	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, educati	on, or rese	arch in furtherance of public
)	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar assesservice, provide the following amounts relating to the	ets held for public exhibition, educati		
	(i) Revenue included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			> \$
	If the organization received or held works of art, histo following amounts required to be reported under SFAS			'
1	Revenue included in Form 990, Part VIII, line 1			▶ \$
)				▶ \$
-	Assets included in Form 990, Part X			F >

Part	Organizations Maintaining Col	lections of Art	, His	tori	cal 1	<u>reasu</u>	<u>res, or Ot</u>	<u>her</u>	Similar Ass	ets (co	ontinued)
3	Using the organization's acquisition, accessical collection items (check all that apply)	on, and other record	ds, ch	neck	·		_		significant use o	of its	
a	Public exhibition		d	Γ	Loai	n or excl	nange progra	ms			
b	Scholarly research		e	Γ	Oth	er					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	llections and explai	ın hov	w the	y furtl	ner the o	rganızatıon's	exe	empt purpose ın	I	
5	During the year, did the organization solicit o									,	
Par	assets to be sold to raise funds rather than to tall Escrow and Custodial Arrange									Yes	│ No
Pal	Part IV, line 9, or reported an am						i aliswereu	16	is to Follings	,0,	
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?						or other asse	ts no	ot	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follov	wing t	able						
									Amo	ount	
C	Beginning balance							lc			
d	Additions during the year						<u> </u>	ld			
e	Distributions during the year						<u> </u>	le			
f	Ending balance						_1	Lf			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21,	for e	scrow	orcusto	odial accoun	t lıab	oility? [Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expl	anatı	on ha	s been p	rovided in Pa	art X	III		Γ
Pa	t V Endowment Funds. Complete										
4 -	Danis and a state of the state	(a)Current year	(b) Prior	year	b (c) Tv	vo years back	(d)⊺l	hree years back ((e) Four y	ears back
1a L	Beginning of year balance					+			-		
b	Contributions					-			+		
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
q	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balanc	e (lir	ne 1 a	. colu	 mn (a)) ł	neld as		I		
a	Board designated or quasi-endowment	,	(5	,	(= // .					
ь	Permanent endowment ►										
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c shou	ld equal 100%									
За	Are there endowment funds not in the posses		ition	that	are he	eld and a	dmınıstered	for t	he		
	organization by	J								Yes	No
	(i) unrelated organizations				•				3a(i)		<u> </u>
	(ii) related organizations							•	3a(ii		
ь 4	Describe in Part XIII the intended uses of the	·				?		•	<u>3b</u>		
	t VI Land, Buildings, and Equipme					on answ	vered 'Yes'	to F	orm 990. Par	t IV. lı	ne
	11a. See Form 990, Part X, line 1										
	Description of property					or other estment)	(b)Cost or ot basis (other		(c) Accumulated depreciation	(d) B	ook value
1a	and						40,	000		1	40,000
b	Buildings						223,	849	117,060	0	106,789
C	_easehold improvements										
d	Equipment						39,	828	25,93	0	13,898
							· ·	905	13,44	2	15,463
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i> d	gual Form 990, Part X	(, colu	ımn (B), lın	e 10(c).)			▶		176,150
									Schedule D	(Form 9	90) 2014

Part VII Investments—Other Securities. Com	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of va	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Con	nplete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of va	
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization		」)Part IV line 11d See I	Form 990 Part X line 15
(a) Descrip			(b) Book value
(1) CERTIFICATE OF DEPOSIT			31,164
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.			31,164
Part X Other Liabilities. Complete if the organ	iization answered 'Yes' t	o Form 990, Part IV, l	ıne 11e or 11f. See
Form 990, Part X, line 25.	(In) Dealers lead		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
UNEARNED REVENUE	38,062		
DUE TO AFFILIATED ASSOCIATION	10,354		
ACCRUED PAYROLL TAX & WITHOLDING	3,617		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	52,033		
	,		

LINE 4B

Part X		evenue per Audited Financial Statements With Revenue prered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1 T		r support per audited financial statements	1	292,074
2 A	mounts included on line 1 but	t not on Form 990, Part VIII, line 12		
a N	et unrealized gains (losses) d	on investments 2a		
b D	onated services and use of fa	acilities		
c R	ecoveries of prior year grants	2c		
d 0	ther (Describe in Part XIII)			
e A	dd lines 2a through 2d .		2e	_
			3	292,074
4 A	mounts included on Form 990	O, Part VIII, line 12, but not on line 1		
	•	uded on Form 990, Part VIII, line 7b . 4a		
	,			
	dd lines 4a and 4b	•	4c	28
		4c. (This must equal Form 990, Part I, line 12)	5	292,102
Part XI		openses per Audited Financial Statements With Expenses Swered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1 T		audited financial statements	1	280,650
2 A	mounts included on line 1 but	t not on Form 990, Part IX, line 25		
a D	onated services and use of fa	cilities		
b P	rıor year adjustments	2b		
c 0	therlosses	2c		
d 0	ther (Describe in Part XIII)	2d		
e A	dd lines 2a through 2d		2e	
3 S	ubtract line 2e from line 1 .		3	280,650
4 A	mounts included on Form 990	D, Part IX, line 25, but not on line 1:		
a Ir	nvestment expenses not inclu	ıded on Form 990, Part VIII, line 7b 4a		
b 0	ther (Describe in Part XIII)			
			4c	28
		d 4c. (This must equal Form 990, Part I, line 18)	5	280,678
Part X				
	line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Return Reference	Explanation		
	LE D, PAGE 3, PART X	THE ASSOCIATION HAS ADOPTED THE ACCOUNTING STANDARD OUNCERTAINTY IN INCOME TAXES THIS STANDARD ADDRESSES THE WHETHER TAX BENEFITS CLAIMED, OR EXPECTED TO BE CLAIMED, SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER TASSOCIATION MAY RECOGNIZE THE TAX BENEFITS FROM AN UNCONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WEXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNIC POSITION THE TAX BENEFITS THAT COULD BE RECOGNIZED IN THE STATEMENTS FROM SUCH POSITIONS WOULD BE MEASURED BASE BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNTAXES ALSO ADDRESSES DERECOGNITION, CLASSIFICATION, INTON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS AT DEVELOPMENT OF THE FORM 990 AND RELATED STATE OF INDIANA TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR THE FORM	HE DE. ON A HIS G ERTA (ILL B CAL M HE FII D ON ICERT ERES DECEN ED AS RETU	TERMINATION OF TAX RETURN UIDANCE, THE IN TAX POSITION E SUSTAINED ON ERITS OF THE NANCIAL THE LARGEST IG REALIZED UPON TAINTY IN INCOME T AND PENALTIES IBER 31, 2014 THERE RN, AND IS SUBJECT
SCHEDU LINE 4B	LE D, PAGE 4, PART XI,	GAIN ON DISPOSAL OF EQUIPMENT 28		
SCHEDU	LE D, PAGE 4, PART XII,	GAIN ON DISPOSAL OF EQUIPMENT 28		

Jenedale 2 (1 31111 33 3) 23 13		age 💆
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493237005015 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number BUILDERS ASSOCIATION OF ELKHART CO 35-1469260 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) ACADEMIC SCHOLARSHIPS	5	5,700		N/A	N/A

Return Refere	ence	Explanation	,	, , , , , , , , , , , , , , , , , , , ,	•
Part IV	Supplemental Info	ormation. Provide the info	rmation required in Part I, lin	ne 2, Part III, column (b),	and any other additional information.

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DLN: 93493237005015

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Name of the organization
BUILDERS ASSOCIATION OF ELKHART CO
INC
35-1469260

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	
FORM 990, PAGE 2, PART III, LINE 4D	THE ASSOCIATION PROVIDES ACADEMIC SCHOLARSHIPS FOR QUALIFIED STUDENTS
FORM 990, PAGE 6, PART VI, LINE 2	VARIOUS VARIOUS SERVICES PROVIDED
FORM 990, PAGE 6, PART VI, LINE 6	INDIVIDUALS AND BUSINESSES DEVOTED TO EDUCATION AND PROMOTION OF THE BUILDING TRADES INDUSTRY
FORM 990, PAGE 6, PART VI, LINE 7A	BOARD MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY
FORM 990, PAGE 6, PART VI, LINE 11B	A COPT OF THE 990 IS MADE AVAILABLE TO ALL MEMBERS OF THE GOVERNING BODY PRIOR TO FILING, AND REVIEWED WITH THEM BY THE PREPARER
FORM 990, PAGE 6, PART VI, LINE 12C	EACH NEW RESPONSIBLE PERSON IS REQUIRED TO REVIEW AND ACKNOWLEDGE IN WRITING THE POLICY EACH RESPONSIBLE PERSON SHALL ANNUALLY COMPLETE A DISCLOSURE FORM IDENTIFYING ANY RELATION SHIPS, POSITIONS, OR CIRCUMSTANCES IN WHICH THE RESPONSIBLE PERSON IS INVOLVED THAT HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT OF INTEREST THIS POLICY SHALL BE REVIEWED ANN UALLY BY EACH MEMBER OF THE BOARD OF DIRECTORS ANY CHANGES TO THE POLICY SHALL BE COMMUNI CATED IMMEDIATELY TO ALL RESPONSIBLE PERSONS
FORM 990, PAGE 6, PART VI, LINE 15A	THE GOVERNING BODY REVIEWS AND APPROVES ALL COMPENSATION OF OFFICERS AND KEY EMPLOYEES CO MPENSATION IS BASED ON PERFORMANCE AND COMPARABLE COMPENSATION OF SIMILAR ORGANIZATIONS
FORM 990, PAGE 6, PART VI, LINE 15B	THE GOVERNING BODY REVIEWS AND APPROVES ALL COMPENSATION OF OFFICERS AND KEY EMPLOYEES CO MPENSATION IS BASED ON PERFORMANCE AND COMPARABLE COMPENSATION OF SIMILAR ORGANIZATIONS
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST
FORM 990, PART IX, LINE 24E	PROPERTY TAX 3,993 1,654 1,654 COST OF QUALITY MANUALS 5,969 0 0 MEMBERSHIP CANCELLATIONS 5,940 0 0 EDUCATIONAL ACTIVITIES 4,009 0 0 TELEPHONE 2,090 858 858 MEMBERSHIP PROCESSING F EE 1,633 0 0 MILEAGE 697 289 289 DUES AND SUBSCRIPTIONS 0 888 0 WOMEN'S COUNSEL 175 0 0 MI SCELLANEOUS 108 0 0
FORM 990, PART XI, LINE 9	GAIN ON DISPOSAL OF EQUIPMENT -28 GAIN ON DISPOSAL OF EQUIPMENT 28

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DLN: 93493237005015

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

		Information a	oout Form 4562 and its sep	arate instructior	ıs is a	at <u>ww</u>	v.irs.g	ov/form45	<u>62.</u>	Sequence No 179
Nam	e(s) shown on retu	rn	Business o	or activity to which	this f	orm rela	ates		Id	entifying number
	LDERS ASSOCIAT	ION OF ELKHART		DEPRECIATION					,	1460260
INC	rt I Electio	n To Evnence	 Certain Property Un	der Section	170	<u> </u>			3:	5-1469260
			isted property, comple				omple	ete Part I.		
1									1	500,000
2	Total cost of sect	tion 179 property p	laced in service (see inst	ructions) · ·					2	
3	Threshold cost of		3	2,000,000						
4	Reduction in limit	tation Subtract line	3 from line 2 If zero or le	ess, enter - 0 -					4	
5	Dollar limitation f	for tax year Subtra	ct line 4 from line 1 If zer	o or less, enter	-0-	Ifma	rried fi	lıng		
	separately, see ii	nstructions							5	
				_						
6	((a) Description of p	roperty	(b) Cost (bu		ess us	e	(c) Elected	cost	
				on	19)					-
										1
7	Listed property	Enter the amount fr	om line 29	·		7	T			
8			operty Add amounts in co	olumn (c), lines	6 an	.d 7			8	
9			er of line 5 or line 8 • •						9	
10	Carrvover of disa	llowed deduction fr	om line 13 of your 2013 F	orm 4562 •					10	
11			e smaller of business inco		nan z	ero) o	r line 5	see		
	instructions)								11	
12	Section 179 expe	ense deduction Ad	d lines 9 and 10, but do no	ot enter more th	nan li	ne 11			12	
			015 Add lines 9 and 10,		. 📂	13	1		<u> </u>	
Not	e: Do not use Pa	art II or Part III	below for listed proper	ty. Instead, u	ise F	Part V				
Pa	rt III Special	Depreciation A	Allowance and Other	Depreciati	on (Do n	ot inc	lude listed	proper	ty) (See instructions)
14	Special depreciat	tion allowance for q	ualified property (other tha	an listed proper	ty) p	laced	ın ser	vice during		
	the tax year (see	ınstructions) •			•				14	
15	Property subject	to section 168(f)(1) election · · ·		•				15	
)		•				16	12,318
Par	t IIII MACRS	Depreciation (Do not include listed p	oroperty.) (Se ction A	e in	struc	tions.)		
17	MACRS deduction	ne for accete place	d in service in tax years b		201	1 .			17	
			ets placed in service durin							<u> </u>
10	•			-				_		
			Service During 201						reci	ation System
			(c) Basis for							
(a) Classification of	f (b) Month and	· '	(d) Recovery	l	_		(6) 14 11		(g)Depreciation
_	property	year placed in service	(business/investment use	period	(e)	Conve	ention	(f) Meth	100	deduction
			only—see instructions)							
	3-year property									
	5-year property									
	7-year property				+					
	10-year property 15-year property									
	20-year property									
	25-year property			25 yrs				S/L		
h	Residential rental			27 5 yrs		ММ		S/L		
	property			27 5 yrs	_	MM		S/L		
	Nonresidential real			39 yrs		MM		S/L		
	property	-ti C. At DI-	- die Gereier Desire 2014	. T V !!-:		MM		S/L	6	<u> </u>
202	Class life	CLION C—ASSETS PIA	ced in Service During 2014	FIAX TEAT USIN	y the	Aiter	native	S/L	л эуѕ	Leiu
	12-year			12 yrs				S/L		
	40-year			40 yrs		ММ		S/L		
Pai	t IV Sumn	nary (see instruc	ctions.)							
21 l	isted property En	ter amount from lın	e 28 · · · · · ·		٠				21	
22 1	Fotal. Add amounts	from line 12, lines	14 through 17, lines 19 a	and 20 in colum	nn (g), and	line 2:	1 Enter		
			your return Partnerships	-		-see ii	nstruc	tions • •	22	12,318
		bove and placed in attributable to sec	service during the current		е	23				
	Jordion of the Dasis	accimulante to sec	tion 263A costs		•					

Form 4562 (2014) Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre 24a Do you have evider										Yes," is 1							
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(o Cost o	i) r other sıs	other (business/inve		(e) sis for depreciation usiness/investment use only) (Rec			(g) Method/ Convention		(h) Depreciation/ deduction			(i) Elected section 179 cost		
25Special depreciation allo	•		ty placed	in service o	during the	tax year	and u	ised mo	re than	25							
26 Property used more	•		usiness	use						1 ==							
,		%															
		%							_		+						
27 Property used 50%	n orless in a		ness IIs	e										—			
zr i roperty used 50 %	0 01 1033 111 0	%	11033 43						S/L -		T						
		%							S/L -								
		%			<u> </u>				S/L -								
28 Add amounts in co						ne 21,	page	1	28								
29 Add amounts in co	olumn (ı), lın					•					•	•	29				
Complete this section	for vehicles	used by a sol	e propri	— Infor etor, part	tner, or o	ther "n	nore t	than 5	% own	er," or	relat	ed per	son				
If you provided vehicles to	your employee	es, first answer th	e questio		a)		neet a b)	n excep	(c)	completir	ng this (C		_	_		(f)	
30 Total business/in year (do not inclu			ng the •	Vehi	•	-	cle 2	V	'ehicle	3 '	√ehi	•		e) icle 5		icle 6	
31 Total commuting	mıles drıven	during the yea	ır .														
32 Total other person	nal(noncomn	nuting) miles d	rıven														
33 Total miles driven through 32	during the y	ear Add lines	30														
34 Was the vehicle a	vailable for p	personal use	-	Yes	No	Yes	No	Ye	s	No 1	es	No	Yes	No	Yes	No	
during off-duty ho	urs? .		_											†		1	
35 Was the vehicle u	sed primaril	y by a more tha	an 5%														
36 Is another vehicle		r personal use	2 .													†	
Section Answer these question 5% owners or related	ns to determ		t an exc												not mo	re tha	
37 Do you maintain a employees?	written poli	cy statement t	hat prof	nibits all i	personal • •	use of	vehic	cles, II	ncludır 	g comn	nutın	g, by	your	Y	'es	No	
38 Do you maintain a employees? See t												your					
39 Do you treat all us																	
40 Do you provide movehicles, and reta	ore than five	vehicles to yo	ur empl			rmatio	n fror	n your	emplo	yees a	bout	the us	se of				
41 Do you meet the r				automobi	le demor	 nstratio	n us	e? (Se	e ınstr	uctions) .				$\overline{}$		
Note: If your answ	ver to 37, 38,	39, 40, or 41 is	"Yes,"	do not con	mplete Se	ction B	for th	ne cove	ered ve	hıcles.							
	rtization																
(a) Description of c	osts	(b) Date amortization		(c A mort a mo	ızable		C	(d) Code ection		(e) mortiza period	or			(f) ortizati this ye			
42 A mortization of as	ete that he	begins	r 2014	tav vosa	(see inc	tructic	٦ς١			ercent	aye						
42 A mortization of co	rata tilat beg	jiiis uuriiig you	1 2014	cax year	(see IIIS	T	15/		Т								
	+		-			-+			-+								
42 A mortination of a	oto that has	inn hofore	. 2014	-5.V. 115							42						
43 A mortization of co	_	•		•	ere to re	port	•				43 44						
		,, === me m		*****			-			- 1	1						