

Form 990-EZ

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)

2017

- 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/form990ez.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service**A For the 2017 calendar year, or tax year beginning 12-01-2017, and ending 11-30-2018**

B Check if applicable

- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

C Name of organization
MICHIGAN MOVERS ASSOCIATIONNumber and street (or P. O. box, if mail is not delivered to street address) Room/suite
426 S CEDAR ST SUITE CCity or town, state or province, country, and ZIP or foreign postal code
LANSING, MI 48912**D** Employer identification number
38-1201330**E** Telephone number
(517) 338-3035**F** Group Exemption Number ►**G** Accounting Method Cash Accrual Other (specify) ►**H** Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**I** Website: ► WWW.MIMOVERS.ORG**J** Tax-exempt status (check only one) - 501(c)(3) 501(c)(6) (insert no) 4947(a)(1) or 527**K** Form of organization Corporation Trust Association Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 131,311**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I

Revenue	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 80%;">1 Contributions, gifts, grants, and similar amounts received</td><td style="width: 20%; text-align: right;">1</td></tr> <tr><td>2 Program service revenue including government fees and contracts</td><td style="text-align: right;">2 8,569</td></tr> <tr><td>3 Membership dues and assessments</td><td style="text-align: right;">3 122,185</td></tr> <tr><td>4 Investment income</td><td style="text-align: right;">4 307</td></tr> <tr><td>5a Gross amount from sale of assets other than inventory</td><td style="text-align: right;">5a</td></tr> <tr><td>b Less cost or other basis and sales expenses</td><td style="text-align: right;">5b</td></tr> <tr><td>c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)</td><td style="text-align: right;">5c</td></tr> <tr><td>6 Gaming and fundraising events</td><td></td></tr> <tr><td>a Gross income from gaming (attach Schedule G if greater than \$15,000)</td><td style="text-align: right;">6a</td></tr> <tr><td>b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)</td><td style="text-align: right;">6b</td></tr> <tr><td>c Less direct expenses from gaming and fundraising events</td><td style="text-align: right;">6c</td></tr> <tr><td>d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)</td><td style="text-align: right;">6d</td></tr> <tr><td>7a Gross sales of inventory, less returns and allowances</td><td style="text-align: right;">7a</td></tr> <tr><td>b Less cost of goods sold</td><td style="text-align: right;">7b</td></tr> <tr><td>c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)</td><td style="text-align: right;">7c</td></tr> <tr><td>8 Other revenue (describe in Schedule O)</td><td style="text-align: right;">8 250</td></tr> <tr><td>9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►</td><td style="text-align: right;">9 131,311</td></tr> </table>	1 Contributions, gifts, grants, and similar amounts received	1	2 Program service revenue including government fees and contracts	2 8,569	3 Membership dues and assessments	3 122,185	4 Investment income	4 307	5a Gross amount from sale of assets other than inventory	5a	b Less cost or other basis and sales expenses	5b	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	6 Gaming and fundraising events		a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	c Less direct expenses from gaming and fundraising events	6c	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	7a Gross sales of inventory, less returns and allowances	7a	b Less cost of goods sold	7b	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	8 Other revenue (describe in Schedule O)	8 250	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►	9 131,311
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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 33 Yes No

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34 Yes No

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35a Yes No

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 35b Yes No

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c Yes No

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36 Yes No

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a Yes No

b Did the organization file **Form 1120-POL** for this year? 37b Yes No

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38a Yes No

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b Yes No

39 Section 501(c)(7) organizations Enter 39a Yes No

a Initiation fees and capital contributions included on line 9 39a Yes No

b Gross receipts, included on line 9, for public use of club facilities 39b Yes No

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 4911, section 4912 ► 4912, section 4955 ► 4955 40b Yes No

b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b Yes No

c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 40b Yes No

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization ► 40b Yes No

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 40e Yes No

41 List the states with which a copy of this return is filed ► 41 Yes No

42a The organization's books are in care of ► TRACI RIEHL RIEHL SOLUTIONS Telephone no ► (517) 338-3035 42a Yes No

Located at ► 416 SOUTH CEDAR ST SUITE C LANSING, MI ZIP + 4 ► 48912 42a Yes No

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b Yes No

If "Yes," enter the name of the foreign country ► 42b Yes No

See the instructions for exceptions and filing requirements for **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)** 42c Yes No

c At any time during the calendar year, did the organization maintain an office outside the U.S.? 42c Yes No

If "Yes," enter the name of the foreign country ► 42c Yes No

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** - Check here ► 43 Yes No

and enter the amount of tax-exempt interest received or accrued during the tax year 43 Yes No

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44a Yes No

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b Yes No

c Did the organization receive any payments for indoor tanning services during the year? 44c Yes No

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 44d Yes No

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a Yes No

45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45b Yes No

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	46		No

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

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

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

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

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

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

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

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

d Total number of other independent contractors each receiving over \$100,000. ►

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ► Yes No

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

Sign Here	***** Signature of officer	2019-09-10
	ANDREW ANDROFF PRESIDENT Type or print name and title	Date

Paid Preparer Use Only	Print/Type preparer's name BRADLEY M DEVRIES	Preparer's signature	Date 2019-09-25	Check <input type="checkbox"/> if self-employed	PTIN P01305693
	Firm's name ► YEO & YEO PC				Firm's EIN ► 38-2706146
	Firm's address ► 822 CENTENNIAL WAY STE 250 LANSING, MI 48917				Phone no (517) 323-9500

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

Additional Data

Software ID:

Software Version:

EIN: 38-1201330

Name: MICHIGAN MOVERS ASSOCIATION

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations; optional for others.)
<p>28 THIS PAST YEAR THE MMA CONTINUED TO MAINTAIN A STABLE FINANCIAL STRUCTURE WE CONTINUED OUR TRADITION OF FINANCIALLY SUBSIDIZING THE ANNUAL CONVENTION, WHICH IS FREE TO ALL MEMBERS. THIS IS THE BOARD'S WAY OF GIVING BACK TO THOSE MOVERS WHO CANNOT AFFORD TO ATTEND NATIONAL MEETINGS BUT STILL NEED THE EDUCATION THEY OFFER. OUR NEWSLETTER CONTINUES TO BE ONE OF THE NICEST IN THE INDUSTRY AND OUR WEBSITE IS AN IMPORTANT RESOURCE FOR MEMBERS AND THE PUBLIC TO GAIN INFORMATION ABOUT MICHIGAN BASED MOVERS AND THE INDUSTRY IN GENERAL. WE ALSO ADDED MEMBER RESOURCES INCLUDING A MICHIGAN TARRIFF CALCULATOR. ADDITIONALLY, MMA UPDATES MEMBERS THROUGH EMAILS ON LEGISLATIVE, BUSINESS, AND INDUSTRY ISSUES. THE MMA ACADEMIC SCHOLARSHIP FUND (MMA-ASF) AWARDED 5,000 TO COLLEGE STUDENTS THIS PAST FALL AND WE ANTICIPATE AN EVER GROWING RESPONSE TO THIS WORTHWHILE FUND</p>	<p>28a</p>

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
MORRIE STEVENS JR PAST PRESIDE	1 00	0		
ANDREW ANDROFFPRESIDENT	1 00	0		
NATE CORRIGAN VICE-PRESIDE	1 00	0		
ROB FELCHER TREASURER	1 00	0		
KAITLYN JOHNSTON SECRETARY	1 00	0		
JON SORBER DIRECTOR (PA	1 00	0		
ANDREW BOER DIRECTOR	1 00	0		
SCOTT JENSEN DIRECTOR	1 00	0		
BLANE LAGERMAN DIRECTOR	1 00	0		
JIM MEYER DIRECTOR	1 00	0		
DAVE MORSE DIRECTOR	1 00	0		
JEFF PALMER DIRECTOR	1 00	0		
JESSICA PULA DIRECTOR	1 00	0		
JAMIE SCOTT DIRECTOR	1 00	0		
TIMOTHY SEE DIRECTOR	1 00	0		

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(list each one even if not compensated — see the instructions for Part IV)

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

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
MICHAEL STAFFORD DIRECTOR	1 00	0		
JOHNNA STRUCK DIRECTOR	1 00	0		
JOHN DRAKE DIRECTOR	1 00	0		
TRACI RIEHL RIEHL SOLUTIONS MANAGEMENT C	20 00	0		

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

MICHIGAN MOVERS ASSOCIATION

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.

2017**Open to Public
Inspection****Employer identification number**

38-1201330

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 8	SCHOLARSHIP FUND 250 TOTAL 250

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16	EXPENSES TRAVEL 746 SCHOLARSHIPS 5,000 D&O INSURANCE 920 BANK SERVICE CHARGES 32 DUES 720 MEALS AND ENTERTAINMENT 99 MEMBERSHIP DIRECTORY 198 CREDIT CARD FEES 1,517 MEMBERSHIP SOFTWARE 1,000 OFFICE SUPPLIES 240 WEBSITE EXPENSES 4,500 MISCELLANEOUS 2,353 ANNUAL CONFERENCE 31,591 PRINTING 515 BOARD/COMMITTEE 937 DUES PAY DISCOUNT EARLY 8,974 ELECTRONIC TARIFF DEV 25,500 TOTAL 84,842

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990- EZ, PART II, LINE 26	DEFERRED REVENUE 0 1,940

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III	TO FOSTER, DEVELOP AND PROMOTE THE HIGHEST STANDARDS OF CONDUCT AND SERVICE TO THE PUBLIC AND TO MEMBERS ENGAGED IN THE TRANSPORTATION AND/OR THE STORAGE OF PROPERTY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 28	THIS PAST YEAR THE MMA CONTINUED TO MAINTAIN A STABLE FINANCIAL STRUCTURE WE CONTINUED OUR TRADITION OF FINANCIALLY SUBSIDIZING THE ANNUAL CONVENTION, WHICH IS FREE TO ALL MEMBERS. THIS IS THE BOARD'S WAY OF GIVING BACK TO THOSE MOVERS WHO CANNOT AFFORD TO ATTEND NATIONAL MEETINGS BUT STILL NEED THE EDUCATION THEY OFFER. OUR NEWSLETTER CONTINUES TO BE ONE OF THE NICEST IN THE INDUSTRY AND OUR WEBSITE IS AN IMPORTANT RESOURCE FOR MEMBERS AND THE PUBLIC TO GAIN INFORMATION ABOUT MICHIGAN BASED MOVERS AND THE INDUSTRY IN GENERAL. WE ALSO ADDED MEMBER RESOURCES INCLUDING A MICHIGAN TARRIFF CALCULATOR. ADDITIONALLY, MMA UPDATES MEMBERS THROUGH EMAILS ON LEGISLATIVE, BUSINESS, AND INDUSTRY ISSUES. THE MMA ACADEMIC SCHOLARSHIP FUND (MMA-ASF) AWARDED 5,000 TO COLLEGE STUDENTS THIS PAST FALL AND WE ANTICIPATE AN EVER GROWING RESPONSE TO THIS WORTHWHILE FUND.