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)

2018

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

	Α	For the 2	2018 ca	alendar year, or tax year beginning , 2018, and e	nding	,	
	В	Check if app	plicable	С	7	D Employer id	entification number
		Address cha		MANUEACTURED HOUGING ACCOCIANTON OF		22 25	20170
	=	Name chang	5-	MANUFACTURED HOUSING ASSOCIATION OF		22-250 E Telephone n	
	=	Initial return		PO BOX 6886	l'		
	≓	Final return/ter		SCARBOROUGH, ME 04070	\sim \sim \sim	(207)	761-4221
	=	Amended re			ין על ו	F Group Ex	emption
		Application Accountil		L thod [X] Cash		Number	
		Website:	•	thod ∑ Cash		d to attach \$	organization is not
			_	check only one) — 501(c)(3) X 501(c) (6)			, or 990-PF)
			•			····	
		Form of o	9			_	
		assets (F	Part II,	c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶\$	75,314.
	Рa			ue, Expenses, and Changes in Net Assets or Fund Balance		ructions fo	
				the organization used Schedule O to respond to any question in this Part	<u> </u>	1 4 1	X
				ions, gifts, grants, and similar amounts received service revenue including government fees and contracts	,	1	
			_	hip dues and assessments.		2	2,850.
				nt income		3 4	68,788.
						4	3,676.
				t or other basis and sales expenses to other basis and sales expenses			
				Language Control of the Control of t		5 c	
				s) from sale of assets other than inventory (Subtract line 5b from line 5a) and fundraising events		30	
	<u>o</u>		-	ome from gaming (attach Schedule G if greater than \$15,000)			
	Revenue				ontributions		
	*			raising events reported on line 1) (attach Schedule G if the sum			
	œ			ross income and contributions exceeds \$15,000) 6 b			
		c Les	ss dire	cct expenses from gaming and fundraising events 6 c			
		d Net	t incom	ne or (loss) from gaming and fundraising events (add lines 6a and ibtract line 6c)		<u> </u>	
				es of inventory, less returns and allowances 7 a		00	
	ł			t of goods sold 7b			
				fit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7 c	
				enue (describe in Schedule O)		8	
e A				enue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		▶ 9	75,314.
Ő	_			id similar amounts paid (list in Schedule O) RECEIV	'FD	10	75,514.
Š	- 1			paid to or for members		11	
2	ł					12	14,895.
SUN OUR	g l	13 Pro	fession	other compensation, and employee benefits nal fees and other payments to independent contractors JUL 192	019 Ö	13	2,393.
Ö	use	14 Occ	cupanc	y, rent, utilities, and maintenance		14	
Þ	Expenses	15 Prir	nting, p	publications, postage, and shipping	UT I	15	70.
Ĕ	w	16 Oth	ner exp	enses (describe in Schedule O)	CHEDULE O	16	22,049.
N9		17 Tot	tal expo	enses. Add lines 10 through 16		17	39,407.
8	,,	18 Exc	cess or	(deficit) for the year (Subtract line 17 from line 9)		18	35,907.
28 2019 1.060	Net Assets	19 Net	assets	s or fund balances at beginning of year (from line 27, column (A)) (must a orted on prior year's return)	igree with end-of-		
19	ΪŽ			inges in net assets or fund balances (explain in Schedule O)		19	281,668.
4	2			s or fund balances at end of year Combine lines 18 through 20		► 21	217 575
<u>`</u>	BAA			rk Reduction Act Notice, see the separate instructions.			317, 575. Form 990-EZ (2018)
\approx			P-1 1101				. Jim JJU-LL (2010)
4							
,							
\wedge				TEF 400101 01 01 140			

Forn	Form 990-EZ (2018) MANUFACTURED HOUSING ASSOCIATION OF 22-2502179 Page 2						
	Balance Sheets (see the Inst Check if the organization used Sche	tructions for Part II)					
	1 Officer if the organization used Sche	saule o to respond to any qu		A) Beginning of ye	ar T	(B) End of year	
22	Cash, savings, and investments		-	281,668			
23	Land and buildings				23	<u> </u>	
24	Other assets (describe in Schedule O)				24		
25	Total assets			281,668	. 25	317,575.	
26	Total liabilities (describe in Schedule O)	0	•				
	Net assets or fund balances (line 27 of	281,668	27				
Par		complishments (see the inst	tructions for Part III)	X		Expenses	
What	Check if the organization used Sc s the organization's primary exempt purpose? SEE	COURDINE O	question in this Part III	<u>_</u>	(Reg	juired for section 501 b) and 501(c)(4)	
Desc	ribe the organization's program service a	CCOMPLISHMENTS for each of	its three largest progra	m services as	orga	nizations, optional	
mea	ribe the organization's program service a sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi	ces provided, the num	ber of persons	for o	thers)	
28	TO PROMOTE AND SAFEGUARD				ļ	1	
	INDUSTRY.	TUE INTEVESTS OF	THE WANDLYCION	- 4002TMG -	┨		
					1		
	(Grants \$) If th	is amount includes foreign g	rants, check here	· 	28 a		
29				<u>, </u>		·	
					1		
]		
	(Grants \$) If th	is amount includes foreign g	rants, check here	•	29 a		
30							
					4		
	(Grants \$) If th	is amount includes foreign g			20-		
31	Other program services (describe in Sch		rants, check here		30 a		
J1		is amount includes foreign g	rants check here	▶ □	31 a		
32	Total program service expenses (add lii		Tarke, cricer nore		32		
	List of Officers, Directors,		plovees (list each one eve	n if not compensated —		Instructions for Part IV)	
	Check if the organization used Sc						
		(b) Average hours per week devoted to	(c) Reportable compensation (Forms W 2/1099 MISC)	(d) Health benefit contributions to emp	ts,	(e) Estimated amount of	
	(a) Name and title	week devoted to position	(Forms W 2/1099 MISC) (If not paid, enter -0-)	benefit plans, and de compensation	ferred	other compensation	
TTN	AMARIE_SMITH			Compensation			
	SIDENT	1			0.	0.	
	RY PALMER					· · · · · · · · · · · · · · · · · · ·	
	ECTOR	1	. 0		0.	l o.	
	RY BENNER		-				
	ECTOR	1	. 0		0.	0.	
	HARD BRADSTREET	_					
	CUTIVE DIR.	5	14,895		0.	0.	
	DRA HINKLEY ECTOR	1			_		
	N RICHARD	1	0	· 	0.	0.	
	ASURER	1	0.		0.	0.	
	REST BRYANT			•	<u> </u>	<u> </u>	
	ECTOR	1	0.		0.	0.	
	ERT TREADWELL						
	ECTOR	1	0.		0.	0.	
	SALAMAK		İ				
	ECTOR	1	0.		0.	0.	
	K TURNER						
	E PRESIDENT	1	0.		0.	0.	
	DREW ECTOR	1				_	
דע	ECTOR	<u></u>	0.	' 	0.	0.	
	·						
			-	†			
	·						
	·						
BAA		TEEA0812L 0	01/21/19	-		Form 990-EZ (2018)	

Page 2

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22-2502179

	Form	990-EZ (2018) MANUFACTURED HOUSING ASSOCIATION OF 22-250217	9	P	age 3
•	Par	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?		Yes	No
	34	If 'Yes,' provide a detailed description of each activity in Schedule O Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect	33	ļ	Х
		a change to the organization's name Otherwise, explain the change on Schedule O See instructions Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities	34	<u> </u>	Х
	30 a	(such as those reported on lines 2, 6a, and 7a, among others)?	35 a		х
	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	35 b		
	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	35 c	Х	
	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		х
		Enter amount of political expenditures, direct or indirect, as described in the instructions. • 37a 5,000.	XX		
		Did the organization file Form 1120-POL for this year?	37 b	383 4 6000	X
		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?	38 a		X
	b	olf 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		8 .9	
		Section 501(c)(7) organizations Enter			
		Initiation fees and capital contributions included on line 9 Once property websited as here 0 formation and the feet has been contributed as here 0 formation and 0 for			
		Gross receipts, included on line 9, for public use of club facilities N/A Section 501(a)(3) executations. Enter amount of toy improved on the groundstand divisor the year under 11(3)		₩7,000 1000	
	40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under N/A section 4911 N/A, section 4912 N/A, section 4955 N/A		· 激·〕	
	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	40 ь		
	c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization	****		
	d	managers or disqualified persons during the year under sections 4912, 4955, and 4958 • 0. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed.			
	·	by the organization O.			
	е	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	نتششش 40 e		X
	41	List the states with which a copy of this return is filed NONE	100	L	
	42 -	The organization's			
	42 a	The organization's books are in care of ► BUD ROUSSEAU Telephone no ► (207)	680	-642	6
		Located at ► 126 US ROUTE ONE SCARBOROUGH ME ZIP + 4 ► 04074			
	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)?	42 b	Yes	No X
		If 'Yes,' enter the name of the foreign country ►	72.0	West,	A 53.7 (28)
		0 the restaurant for a continuous self-less continuous for E-00N E 114 D 4 - 5 D - 1 1 5 1 4 1 4 5			
	c	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) At any time during the calendar year, did the organization maintain an office outside the United States?	42 c	Chalman's	X
	·	If 'Yes,' enter the name of the foreign country	 		
		· · · · · · · · · · · · · · · · · · ·			
	42	Contrar 4047(a)(1) page years about the stable to set films Forms 000 F7 in last of Forms 1041. Check have			37 / 3
	43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year		⁻ Ц	N/A N/A
		43		Yes	No
	44 a	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a	4	X
	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	44 b	and the second	X
		Did the organization receive any payments for indoor tanning services during the year?	44 c		Х
	d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	44 d		ð.
		Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45 a	ba. ^^ =	X
	b	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	45 b		X

	DOULE (2018) MANOFACTURED HOUST	NG ASSOCIATION	<u>Or</u>	22-250		_	age 4
46 .	Old the organization engage, directly or indire candidates for public office? If 'Yes,' complete	ctly, in political campa e Schedule C, Part I	ign activities on behalf o	of or in opposition to	46	Yes	No
	VIA Section 501(c)(3) Organizations All section 501(c)(3) organization for lines 50 and 51.	s Only	uestions 47-49b an	d 52, and complete			<u> </u>
	Check if the organization used Schedul	le O to respond to any	question in this Part VI				П
	Old the organization engage in lobbying activities	or have a section 501(h) election in effect during	the tax year? If 'Yes,'		Yes	No
	complete Schedule C, Part II 47 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 48						
	Old the organization a scribol as described in so			dule E	48 49 a		
	f 'Yes,' was the related organization a section	•	related organization		49 b		
50 C	Complete this table for the organization's five high employees) who each received more than \$100,0	hest compensated emplo 00 of compensation from	oyees (other than officers, In the organization off there	directors, trustees, and lis none, enter 'None'	кеу	1	
	(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 other comp		
		,		-			
4 7	otal number of other employees paid over \$1	100,000					
51 C	Complete this table for the organization's five high compensation from the organization. If there is	nest compensated indepe	endent contractors who ea	ich received more than \$	100,000 of		
	(a) Name and business address of each independent co	ontractor	(b) Type (of service	(c) Compe	nsation	1
						-	
		-					
	· · · · · · · · · · · · · · · · · · ·						
							
					· ·		
d T	otal number of other independent contractors	s each receiving over \$	100 000	.			
52 D	ond the organization complete Schedule A? Note that the organization completed Schedule A	- '	·	ttach a	Yes]No
Under pe true, corr	naities of perjury, I declare that I have examined this return, ect, and complete Declaration of preparer (other than office	including accompanying scheol) is based on all information of	dules and statements, and to the	best of my knowledge and bel	lief, it is		
	heron Report	3		7-12-19			
Sign	Signature of officer			Date			
Here	RICHARD BRADSTREET Type or print name and little			EXECUTIVE DIRE	<u>CTOR</u>		
	Print/Type preparer's name	Prepa er's signature	Date		TIN		
Paid	MATTHEW R BARBOUR, CPA	7	7/01/1	Check L if	00729842	!	
Prepar Use On		COMPANY	<u> </u>	Firm's EIN	01-05049	102	
JJC UI	PORTLAND, ME 041	103	·		-878-272		
Mav the	e IRS discuss this return with the preparer sh		uctions	201	► X Yes		 No
					Form 990 -		
						_ \-	,

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545 0047 **2018**

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2018

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered 'Yes,' on 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,' on 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,' on 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) o	rganizations Complete Part III			
Name		URED HOUSING ASSOCIATION O	F	Employer identific	
n	MAINE			22-250217	
		rganization is exempt under secti			zation.
1	(see instructions for definition	organization's direct and indirect political on of 'political campaign activities')	ampaign activities in	Part IV SEE PART	IV
2	Political campaign activity ex	xpenditures (see instructions)		► \$	5,000.
3	Volunteer hours for political	campaign activities (see instructions)			
Pai	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	▶ \$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				☐Yes ☐No
Ł	If 'Yes,' describe in Part IV				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	n activities >\$	
2	Enter the amount of the filing 527 exempt function activities	g organization's funds contributed to other is	organizations for sec	tion ► \$	
3	Total exempt function expen line 17b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	Enter the names, addresses	and employer identification number (EIN)	of all section 527 pol	itical organizations to w	hich the filing
	organization made payments amount of political contribution	s For each organization listed, enter the ai s received that were promptly and directly del Il action committee (PAC) If additional spa	mount paid from the fivered to a separate po	filing organization's fun- plitical organization, such	ds Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 20	18 MANUFACTURED the organization) HOUSING ASSOCI	ATION OF	22-250 I filed Form 5768 (4	
section 501((h)).	is exempt under se			sicction under
A Check ► If the filin	ng organization belongs	to an affiliated group (and	d list in Part IV each affili	ated group member's nar	ne,
L		share of excess lobbying		J ,	•
B Check ► I If the fill	ng organization chec	ked box A and 'limited co	ontrol' provisions apply		
(The term	Limits on Lobbyi 'expenditures' mear	ng Expenditures is amounts paid or incur	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pub	lic opinion (grass roots le	obbying)		
b Total lobbying expendit					
c Total lobbying expendit	ures (add lines 1a an	d 1b)	,		
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add line	es 1c and 1d)			
f Lobbying nontaxable an both columns	mount Enter the amo	unt from the following ta	ble in		
If the amount on line 1e, col	lumn (a) or (b) is	he lobbying nontaxable	amount is	7003E3376376	
Not over \$500,000		0% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess over \$500,000			
Over \$1,000,000 but not over \$	\$1,500,000	175,000 plus 10% of the excess	s 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 a	amount (enter 25% o	f line 1f)			
h Subtract line 1g from lir	ne 1a If zero or less,	enter -0-			
i Subtract line 1f from lin	e 1c If zero or less,	enter -0-			
j If there is an amount othe section 4911 tax for this	er than zero on either li s year?	ne 1h or line 1i, did the org	ganızatıon file Form 4720	reporting	Yes No
	4	Year Averaging Period	Under Section 501(h)		
(Som	e organizations that	made a section 501(h) e w. See the separate inst	lection do not have to		•
	Lobby	ing Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2 a Lobbying nontaxable amount			,		
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line 2d, column (e))

Schedule C (Form 990 or 990-EZ) 2018

Part: II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Ver' response on loss to through to below, provide in Deat IV a data and decrease.			(b)
or each 'Yes' response on lines 1a through 1i below, provide in Part IV a detailed description the lobbying activity		No	Amount
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		·	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i		156	
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		340	
b If 'Yes,' enter the amount of any tax incurred under section 4912	7.97	#547W	
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		X
_	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		X
3 27	A3118 15 (C. 1914)			

Part III²B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No,' OR (b) Part III-A, line 3, is answered 'Yes.'

1	Dues, assessments and similar amounts from members	1	67,672.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2.4	
	a Current year	2 a	5,000.
	b Carryover from last year	2 b	
	c Total	2 c	5,000.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	·
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0.
5	Taxable amount of lobbying and political expenditures (see instructions)	5	5,000.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information

PART I-A, LINE 1 - DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES

ORGANIZATION MADE CONTRIBUTIONS TO CANDIDATES FOR STATE OFFICES.

SCHEDULE O (Form 990 or 990-EZ)

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.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

MANUFACTURED HOUSING ASSOCIATION OF MAINE

Employer identification number

22-2502179

TO'

FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

ADVERTISING AND PROMOTION CONFERENCES, CONVENTIONS, AND MEETINGS DONATED ASSETS INSURANCE OFFICE EXPENSES WEBSITE DESIGN & HOSTING

	\$ 9,600. 6,124. 5,000.
	760. 56.
	509.
TAL	\$ 22,049.

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

PROMOTION AND ADVOCACY FOR MANUFACTURED HOUSING INDUSTRY ACHIEVED THROUGH
LEGISLATIVE REPRESENTATION, CONTINUING INDUSTRY EDUCATION, PUBLIC RELATIONS AND
COMMUNICATION EFFORTS