Form 990

**Return of Organization Exempt From Income Tax** 

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

Department of the Treasury	▶ Do no
1	

t enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u>A</u>	For the 2	018 calendar year, or tax year beginning JUL 1, 2018 and en	iding J	<u>UN 30, 201</u>	.9
8	Check if	C Name of organization		D Employer ident	tification number
		MIDWESTERN DISTRICT			
	Address change	PROMOTIONAL COMMITTEE, INC.			
	Name change	Doing business as		39-	1706666
	Initial		om/suite	E Telephone num	
	Final return/	771 GREENWOOD SPRINGS DRIVE			<u>-807-5722</u>
	termin- aled	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	245,834.
Г	Amended	GREENWOOD, IN 46143			
⊢	return Applica- tion	F Name and address of principal officer: TODD PANCAKE		H(a) Is this a group	
L	pending	SAME AS C ABOVE		for subordinat	
	<del></del>		- N A	H(b) Are all subordinate	
	Tax-exem <sub>l</sub>		()527		a list. (see instructions)
	Website:		$\mathcal{V}\mathcal{V}$	H(c) Group exempt	
		anization: X Corporation	L Year o	of formation: 1993	M State of legal domicile: WI
<b>a</b>	1 Bns	efly describe the organization's mission or most significant activities: PROMOT	E TH	E BETTERME	NT OF
ĕ		DUSTRIAL AND CONSTRUCTION WORKS BY SUPPO			
Ē,		eck this box I if the organization discontinued its operations or disposed			
ž		andron and the first of the state of the sta	01111010	Than 2070 or Ro Het	1 A
Ğ		mber of voting members of the governing body (Part VI, line 1a)		·· ·	4
Activities & Governance	1		• • • • •		
Ę	1	al number of individuals employed in calendar year 2018 (Part V, line 2a)		🖺	<del></del>
.₹		al number of volunteers (estimate if necessary)		<u> </u>	
Å		al unrelated business revenue from Part VIII, column (C), line 12		<u>7</u>	
	b Net	unrelated business taxable income from Figure 990-T, time 36	<del></del>		<u>0.</u>
				Prior Year	Current Year
ā	8 Cor	otributions and grants (Part VIII, line 1h)		0	
Revenue	9 Pro	gram service revenue (Part VIII, line 2g)	L	122,133	. 245,614.
ě	10 Inve	estment income (Part VIII, column (A), lines (00), and 7d)	. L	207	. 220.
<u></u>	11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	
	12 Tota	al revenue · add lines 8 through 11 (must equal Pathur Column (A) une 12)		122,340	
	1	nts and similar amounts paid (Part IX, column (A), lines 1-3)		0	
	14 Ben	efits paid to or for members (Part IX, column (A), line 4)		0	
v,		ines other compensation, employee benefits (Part IV, column (A), lines 5.10)	" <del> </del>	0	
Expenses		assignal fundations food (Part IV, column (A) line 110)		0	
喜		al fundraising expenses (Part IX, column (D), line 25)			·  ·
M		er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>•</u>	24 510	. 111,441.
		Il expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	· -	24,510	-,
1			<u> </u>	24,510	
드웨	19 Rev	enue less expenses. Subtract line 18 from line 12		97,830	
ets or ances			Begi	inning of Current Year	
33	20 1018	l assets (Part X, line 16)	·	765,347	
Net Asse Fund Bal		l liabilities (Part X, line 26)	.	0.	0.
Set A		assets or fund balances Subtract line 21 from line 20		765,347	889,740.
		gnature Block			
		of perjury, I declare that I have examined this return, including accompanying schedules and			ny knowledge and belief, it is
true,	correct, and	complete. Declaration of preparer (other than officer) is based on all information of which p	preparer h	as any knowledge.	
uue,		M. Juli			
Sign		Signature of omicer		Date / )	1110
Here		TODD PANCAKE, CHAIRMAN		14.	11.17
		Type or print name and title		-	
	Prin	t/Type preparer's name Preparer's signature	Da	te /// Check	PTIN
Paid		IC WALLIN ERIC WALLIN		11/5//9 if self-emplo	
Prepa		's name LEGACY PROFESSIONALS LLP		7	32-0043599
Use O		's address 4 WESTBROOK CORPORATE CTR #700		Firm's EIN	34-0043333
035 (	,,,,,   E11111			05	2 260 0500
<u> </u>	4ha 150 ·	WESTCHESTER, IL 60154		[Prione no. 3 ]	.2-368-0500
May 1	tne IRS di	scuss this return with the preparer shown above? (see instructions)			X Yes No

Par	rt III Statement of Program Service Accomplishments								
	Check if Schedule O contains a response or note to any line in this Part III								
1	Briefly describe the organization's mission PROMOTE THE BETTERMENT OF INDUSTRIAL AND CONSTRUCTION WORKS BY								
	SUPPORTING ACTIVITIES OF THE UNITED BROTHERHOOD OF CARPENTERS								
	JOINERS OF AMERICA AND ITS REGIONAL AND DISTRICT COUNCILS AND	LOCAL							
	UNIONS OF THE MIDWESTERN DISTRICT.								
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No							
	If "Yes," describe these new services on Schedule O.								
2		Yes X No							
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O								
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expen									
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organization 501(c)(4) orga	expenses, and							
	revenue, if any, for each program service reported.								
4a	(Code) (Expenses \$) (Revenue \$)	)							
	PROMOTE THE BETTERMENT OF INDUSTRIAL AND CONSTRUCTION WORKS BY								
	SUPPORTING ACTIVITIES OF THE UNITED BROTHERHOOD OF CARPENTERS								
	JOINERS OF AMERICA AND ITS REGIONAL AND DISTRICT COUNCILS AND	LOCAL							
	UNIONS OF THE MIDWESTERN DISTRICT.	-							
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$	)							
		·							
4c	(Code ) (Expenses \$ Including grants of \$ ) (Revenue \$)								
70	Cons								
		<del></del>							
		<del></del>							
		<u></u>							
4d	Other program services (Describe in Schedule O.)								
	(Expenses \$ including grants of \$ ) (Revenue \$								
4e_	Total program service expenses								
		Form <b>990</b> (2018)							

#### MIDWESTERN DISTRICT PROMOTIONAL COMMITTEE, INC.

39-1706666

Page 3

Form 990 (2018)

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X 2 Is the organization required to complete Schedule B, Schedule of Contributors 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I 3 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? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X Schedule D. Part III. 8 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 X 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V X 10 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d 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 X Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12h X 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines X 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," X 19 complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b 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 19 if "Yes," complete Schedule I, Parts I and II Х

### 39-1706666 Page 4

#### MIDWESTERN DISTRICT PROMOTIONAL COMMITTEE, INC.

Form 990 (2018)

Part IV | Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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? If "Yes," complete			
	Schedule J	23		X
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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	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		
	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		ļ
þ	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		<b> </b>
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? If "Yes,"			<b> </b> ₩
	complete Schedule L, Part II	26	<u> </u>	X
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			x
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
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)	00-		х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	20-		х
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<del>                                     </del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
04	contributions? If "Yes," complete Schedule M	-30		<del></del> -
31	Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I	31		х
20	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			<del></del> -
32		32		х
22	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	J.E		<del></del> -
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			<del></del>
34	Part V, line 1	34		х
35.2	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			<u> </u>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	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		Х
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	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
00000		Form	990	(2018)

Form 990 (2018) PROMOTIONAL COMMITTEE, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return  2a 2	<u> </u>		l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
Ь	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)	<u> -</u>	<u>-</u>	$\frac{1}{x}$
5a		5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		^
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<b></b>	<del> </del>
ьа	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	Į.	x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Oa	<del>                                     </del>	<del>  ^</del>
U	were not tax deductible?	6b	Ì	}
7	Organizations that may receive deductible contributions under section 170(c).	0.0	┢	i i
a	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		$\overline{\mathbf{x}}$
	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?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	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		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			لــــا
	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		
10	Section 501(c)(7) organizations. Enter			1
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			(
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter			
'' a	Gross income from members or shareholders			
_	Gross income from other sources (Do not net amounts due or paid to other sources against			
_	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			- 1
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			]
	Enter the amount of reserves on hand			1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	ا ا		v
	excess parachute payment(s) during the year?	15		<u>-X</u>
46	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	$\overline{}$	<del>^</del>
	If "Yes," complete Form 4720, Schedule O	Form	990	(2019)

# MIDWESTERN DISTRICT

PROMOTIONAL COMMITTEE, INC.

39-1706666

Form 990 (2018) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI					X					
Sec	tion A. Governing Body and Management										
			, ,	-	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		4							
	If there are material differences in voting rights among members of the governing body, or if the governing	ĺ	ĺ	ĺ		ĺ					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			.   '							
þ	Enter the number of voting members included in line 1a, above, who are independent	1b	<u> </u>	4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with	any other								
	officer, director, trustee, or key employee?			2		Х					
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision	ļ							
	of officers, directors, or trustees, or key employees to a management company or other person?			3	igsqcurve	X					
4											
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X					
6	Did the organization have members or stockholders?			6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			l					
	more members of the governing body?			7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or								
	persons other than the governing body?			7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:		<del></del>						
	The governing body?			8a	Х						
b	Each committee with authority to act on behalf of the governing body?			8b		X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached :	at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	e Code)								
					Yes	No					
	Did the organization have local chapters, branches, or affiliates?			10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		X					
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	y beto	re filing the form?	11a							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			-		X					
	Did the organization have a written conflict of interest policy? If "No," go to line 13		flore O	12a							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es, a	escribe								
40	in Schedule O how this was done			12c		X					
13	Did the organization have a written whistleblower policy?			13	-	X					
14	Did the organization have a written document retention and destruction policy?	. 1 6		14							
15	Did the process for determining compensation of the following persons include a review and approv		aepenaent								
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			15a		X					
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization					X					
ь				15b							
16-	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 arrange.	ment :	oth a								
iva	taxable entity during the year?	HEHL W	nui a	16a		X					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its r	articination	104							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the organizati										
	exempt status with respect to such arrangements?	inzatio		16b							
Sec	tion C. Disclosure			100		-					
17	List the states with which a copy of this Form 990 is required to be filed NONE										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, ai	nd 990	T (Section 501/c)(3	)s only	availa	ble					
.5	for public inspection. Indicate how you made these available. Check all that apply.	500	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,							
	Own website Another's website X Upon request Other (explain	ın Sch	nedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		•	d finan	cıal						
	statements available to the public during the tax year		torost ponoj, an	rul l							
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records								
	TODD PANCAKE - 317-807-5722	J., G Q1									
	771 GREENWOOD SPRINGS DRIVE, GREENWOOD, IN 46143										
					000	(0040)					

Page 7

PROMOTIONAL COMMITTEE, INC.

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

Check if Schedule O contains a response or note to any line in this Part VII

#### 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, and 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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	one	Reportable	Reportable	Estimated
	hours per					ıs bot or/trus	h an tee)	compensation	compensation	amount of
	week	<u> </u>				Г	T ,	from the	from related organizations	other compensation
	(list any hours for	direct	•			L		organization	(W-2/1099-MISC)	from the
	related	36 Or (	stee			nsate		(W-2/1099-MISC)	(** 27 7000 111100)	organization
	organizations	Individual trustee or director	Institutional trustee		)yee	adwc		`		and related
	below	ndual	totto	   =	Key employee	esto	je j			organizations
	line)	ligi	gu	Officer	ě,	Highest compensated employee	Former	<u></u>		<u></u>
(1) DAVID THARP	0.25	]		1					_	_
DIRECTOR - PAST	0.00	X	<u> </u>		L	lacksquare	<u> </u>	0.	0.	0.
(2) MARK MCGRIFF	0.25	l		İ						
DIRECTOR - NEW	0.00	X			L	<u> </u>		0.	0.	0.
(3) MICHAEL JACKSON	0.25			l						•
CHAIRMAN - PAST	0.00	X	ļ	X		$oldsymbol{ol}}}}}}}}}}}}}}}}}$	ļ	0.	0.	0.
(4) MARK MCGRIFF	0.25	ļ		l		l				•
TREASURER - PAST	0.00	X	L	X	_		<u> </u>	0.	0.	0.
(5) AL BOND	0.25			١						
SECRETARY	0.00	Х	L	X	<u> </u>	L	<u> </u>	0.	0.	0.
(6) FRANK LIBBY	0.25	١		l					٠, ١	_
TRUSTEE - PAST	0.00	X	L	X	_	L	_	0.	0.	0.
(7) JOHN RAINES	0.25									0
TRUSTEE	0.00	X	<u> </u>	X	_	<u> </u>		0.	0.	0.
(8) TODD PANCAKE	0.25	ļ.,		۱,,				0.	о.	0
CHAIRMAN - NEW	0.00	X	<u> </u>	X	_	ــــ		0.	0.	0.
(9) GARY PERINAR	0.25			<b>.</b> ,				0.	0.	0.
TREASURER - NEW	0.00	X	<u> </u>	X	<u> </u>	H		U •		0.
		1								
		<u> </u>								
		ł								
	<del> </del>	⊢	$\vdash$	<u> </u>	⊢	$\vdash$	_			
		1		l	İ					
		-		_	┢				<del>,</del>	-
		1								
<del> </del>		$\vdash$		_	<del>                                     </del>	H		···		<del></del>
		i								
		H	-	$\vdash$	-	-	_	<u> </u>	-	
		1								
				$\vdash$	<del>                                     </del>					
	<b>——</b>									
	<del>                                     </del>	$\vdash$			$\vdash$	$\Box$	$\vdash$			
	L	j l			ı	1 1	1	i		

832007 12-31-18

Pai	t VII Section A. Officers, Directors, Trus		ploy	ees/			igne	st C						
	(A)	(B)	(C) Position						(D)	(E)			(F)	
	Name and title	Average hours per	(do not check more than one box, unless person is both an						Reportable compensation	Reportable compensation			stimate nount o	_
		week		cer an					from	from related		aı	other	<i>J</i> ,
		(list any	ctor						the	organization		com	pensa	tion
		hours for	d die		l		EG EG	İ	organization	(W-2/1099-MI	SC)		rom the	
		related	stee 0	rustee		_	bensa		(W-2/1099-MISC)		!	_	anızatı	
		organizations below	la tru	onal t		Joyee	Ee ee						d relate	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				Olga	anızatıc	JI 15
		<del> </del>	투	=	۴	×	Ξ =	Œ	<del>                                     </del>					
			1							r				
	<del></del>	<del> </del>	┢			-	┢	┢	<u> </u>					
			1											
			<u> </u>										-	
			1											
									-					
			1					l						
							<u> </u>							
			<u> </u>					<u> </u>						
	,				Щ		L_							
			ļ	_		_	_							
					ŀ									
	<u> </u>	<u> </u>				<u> </u>		Ļ			0.			0.
	Sub-total								0.		0.			0.
	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
	Total (add lines 1b and 1c)	4   4 _ 4 _ 4 _ 4 _		1		<b>-</b>	٠			000 of conortob				<u> </u>
2	Total number of individuals (including but r	iot limited to tr	iose	IISTE	eo ai	DOV	e) wr	10 re	eceived more than \$ 100	,000 or reportab	ıe			0
	compensation from the organization				_								Yes	No
3	Did the organization list any former officer,	director or tri	iste	e ke	v en	nnlo	vee	or	highest compensated e	molovee on				
•	line 1a? If "Yes," complete Schedule J for s			0, 110	,		,,00		, ingricor companion o			3		X
4	For any individual listed on line 1a, is the si			amo	ensa	ation	n and	d oti	her compensation from	the organization				
•	and related organizations greater than \$15									<b>J</b>		4		X
5	Did any person listed on line 1a receive or									dual for services	;			
	rendered to the organization? If "Yes," com											5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated in	depe	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of con	npens	ation 1	rom	
	the organization. Report compensation for	the calendar y	ear	endı	ng v	vith	or w	ıthır	the organization's tax	ear.				
	(A)				_			- 1	(B)		_	((		_
	Name and business	address	N	INC	<u> </u>			_	Description of s	ervices		ompe	nsation	1
								-	<del>.</del>					
								-+						
				-				┰		· <del>-</del> -				
								- 1						
		<u>_</u>						$\dashv$		<del></del>				
2	Total number of independent contractors (	ncluding but n	nt lu	mıte	d to	the	se lis	sted	above) who received m	ore than				
_	\$100,000 of compensation from the organi		11		0		)							
	The state of the s						-					Form	<b>990</b> (2	2018)

Page 9

#### 39-1706666

Form 990 (2018) PROMOTION Part VIII Statement of Revenue

MIDWESTERN DISTRICT PROMOTIONAL COMMITTEE, INC.

		Check if Schedule O conf	ains a resnonse	or note to any lir	ne in this Part VIII			
		Check if Schedule 9 com	ams a response	or note to arry in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Cther Similar Amounts	b c d e	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo	its, and					
털	g	Noncash contributions included in lines	1a-1f \$					4
<u>8 0</u>	h	Total. Add lines 1a-1f						
Program Service Revenue	2 a b			Business Code 900099	245,614.	245,614.		
am eve	d				_			
90 R	е							
ا تە	f	All other program service reve	enue		0.15 61.1			
$\longrightarrow$		Total. Add lines 2a-2f		<u> </u>	245,614.			
	3	Investment income (including other similar amounts) Income from investment of ta		•	220.			220.
	5	Royalties		<b>•</b>				
		Gross rents Less rental expenses Rontal income or (loss)	(i) Real	(II) Personal	· · · · · · · · · · · · · · · · · · ·		,	
	d	Net rental income or (loss)		<b></b>				
		Gross amount from sales of assets other than inventory	(i) Securities	(II) Other				
	c	Less cost or other basis and sales expenses Galn or (loss) Net gain or (loss)					e sur	· , ; - i
F:evenue	8 a	Gross income from fundraisin including \$	of 1c) See				<b>.</b> , , ,	
Other Fe		Part IV. line 18	b	<b>•</b>			-	
	9 a	Gross income from gaming ac Part IV, line 19	ctivities See					
		Less direct expenses	را معناه معناه معناه			<del></del>	<del></del>	. <u></u>
		Net income or (loss) from gan Gross sales of inventory, less and allowances				•		
		Less cost of goods sold	b					
ŀ	С	Net income or (loss) from sale		<b></b>				
}	44 -	Miscellaneous Revenu	<u></u>	Business Code			<del></del>	
	11 a							
	C							
	d							
	е	Total. Add lines 11a-11d		<b>•</b>				
$\Box$	12	Total revenue. See instructions			245,834.	245,614.	0.	220.
832009	10.3	110						Form <b>990</b> (2018)

## 39-1706666 Page 10

#### MIDWESTERN DISTRICT PROMOTIONAL COMMITTEE, INC.

Form 990 (2018) PROMOTIONAL CO Part IX | Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
	Check if Schedule O contains a respon		this Part IX	<u> </u>						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses					
1	Grants and other assistance to domestic organizations	40.000								
	and domestic governments. See Part IV, line 21	10,000.								
2	Grants and other assistance to domestic									
	ındıvıduals. See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals See Part IV, lines 15 and 16									
4	Benefits paid to or for members			ļ						
5	Compensation of current officers, directors,									
	trustees, and key employees									
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)				<u></u> -					
7	Other salaries and wages			<del></del> -						
8	Pension plan accruals and contributions (include	•								
_	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits				<u>                                     </u>					
10	Payroli taxes									
11	Fees for services (non-employees)									
_	Management									
b	Legal	3,001.								
c	Accounting Lobbying	370011								
d	Professional fundraising services. See Part IV, line 17									
•	Investment management fees									
g				- "-						
9	column (A) amount, list line 11g expenses on Sch O.)			1						
12	Advertising and promotion									
13	Office expenses	1,151.								
14	Information technology	3,225.								
15	Royalties									
16	Occupancy									
17	Travel									
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	104,064.								
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance				. , ,					
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										
b										
c										
d										
е	All other expenses									
25	Total functional expenses. Add lines 1 through 24e	121,441.								
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.			1						
	Check here tf following SOP 98-2 (ASC 958-720)									

#### MIDWESTERN DISTRICT PROMOTIONAL COMMITTEE, INC.

Form 990 (2018)
Part X | Balance Shee

Part )	<b>X</b>	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	489,026.	1	367,584
2	2	Savings and temporary cash investments	276,321.	2	522,156
3	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			<u> </u>
	_	trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
6	6	Loans and other receivables from other disqualified persons (as defined un	nder		
	_	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	•		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
yo		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	- <del></del>
Assets	7	Notes and loans receivable, net		7	
ړ   ک <sup>ړ</sup>	, В	Inventories for sale or use		8	
- 1	9	Prepaid expenses and deferred charges		9	
J <sup>-</sup>		Land, buildings, and equipment cost or other		<u> </u>	
'`	-	basis Complete Part VI of Schedule D 10a			
	h	Less accumulated depreciation 10b		10c	
11		Investments - publicly traded securities	<del></del>	11	
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		15	
16		Total assets. Add lines 1 through 15 (must equal line 34)	765,347.	16	889,740
17		Accounts payable and accrued expenses		17	
18		Grants payable		18	
19		Deferred revenue		19	
20		Tax-exempt bond liabilities		20	
21		Escrow or custodial account liability Complete Part IV of Schedule D		21	<del>-</del>
		Loans and other payables to current and former officers, directors, trustees		-	<del>-</del>
	-	key employees, highest compensated employees, and disqualified persons			
		Complete Part II of Schedule L	· · · · · · · · · · · · · · · · · · ·	22	<del></del>
i   23	3	Secured mortgages and notes payable to unrelated third parties		23	
24		Unsecured notes and loans payable to unrelated third parties		24	
25		Other liabilities (including federal income tax, payables to related third			
~	•	parties, and other liabilities not included on lines 17-24) Complete Part X or	f		
ı		Schedule D	`	25	
26	â	Total liabilities. Add lines 17 through 25	0.	26	0
<u></u> _		Organizations that follow SFAS 117 (ASC 958), check here			
رم ا م		complete lines 27 through 29, and lines 33 and 34.		1	·
일   27	7	Unrestricted net assets	765,347.	27	889,740
28		Temporarily restricted net assets		28	
29		Permanently restricted net assets		29	
§   ~		Organizations that do not follow SFAS 117 (ASC 958), check here			
-		and complete lines 30 through 34.			
30	)	Capital stock or trust principal, or current funds		30	- <del></del>
31		Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 30 31 32 32 32 32 32 32 32 32 32 32 32 32 32		Retained earnings, endowment, accumulated income, or other funds		32	
33		Total net assets or fund balances	765,347.	33	889,740
34		Total liabilities and net assets/fund balances	765,347.	34	889,740
	<u> </u>	Total Habilities and het assets/fully balances			Form <b>990</b> (201

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

#### 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

➤ 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.

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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) organiza	ations Complete Part III.			
Nan	ne of organization MIDWEST	TERN DISTRICT		Empl	oyer identification number
	PROMOTI	ONAL COMMITTEE,	INC.		39-1706666
Pa	art I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organic Political campaign activity expendic Volunteer hours for political campa	tures	ical campaign activities		
_		ganization is exempt un			
	Enter the amount of any excise tax			<b>▶</b> \$	· · · · · · · · · · · · · · · · · · ·
	Enter the amount of any excise tax			5 ▶\$	
	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
	Was a correction made?				└── Yes
D <sub>2</sub>	o If "Yes," describe in Part IV  art I-C   Complete if the or	ganization is exempt un	der section 501(c)	except section 501	c)(3).
	Enter the amount directly expende	<u> </u>			
	Enter the amount of the filing organ				•••
_	exempt function activities	mization o idilas contributed to t	on organization of o	<b>▶</b> \$	
3	Total exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-POL	-	
	line 17b			▶\$	
4	Did the filing organization file Form	1120-POL for this year?		·	Yes No
5	Enter the names, addresses and e made payments. For each organiza contributions received that were political action committee (PAC) If	ation listed, enter the amount pa romptly and directly delivered to	aid from the filing organi o a separate political org	zation's funds Also enter th ganization, such as a separa	ne amount of political
	(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

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

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#### MIDWESTERN DISTRICT

Schedule C (Form 990 or 990-EZ) 2018 P Part II-A   Complete if the orga	ROMO	TIONAL	COMMITTEE,	INC.		1706666 Page 2
Part II-A Complete if the organsection 501(h)).	mizatio	ווע exel	npi under Sectio	in Jungajanu ili	eu Form 9700 (e	rection under
	on belon	gs to an affi	liated group (and list ii	n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and share						
B Check   if the filing organizati	on check	ed box A ar	nd "limited control" pre	ovisions apply		
Limits	on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
·						-}
1a Total lobbying expenditures to influe				-		<del> </del>
b Total lobbying expenditures to influe			y (direct lobbying)	•		+
c Total lobbying expenditures (add lin		a 1b)		-		+
d Other exempt purpose expenditures				-		<del> </del>
e Total exempt purpose expenditures						<del> </del>
f Lobbying nontaxable amount Enter				1		
If the amount on line 1e, column (a) or	(b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000,	000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	ດດຸດດດ	\$225,00	n plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	,	\$1,000,0				
g Grassroots nontaxable amount (ent	er 25% c	of line 1f)			··· · · ·	
h Subtract line 1g from line 1a If zero				1		T T
i Subtract line 1f from line 1c If zero						
j If there is an amount other than zero			line 1. did the organiz	ation file Form 4720		
<del>-</del>			ine ii, did the organiz	ation file i offit 4720		Yes No
reporting section 4911 tax for this y	eai :	4 Voor Aug	eraging Period Under	Section FO1/h)		
(Some organizations the		a section 5		have to complete all o	of the five columns	below.
	Lobi	bying Exper	nditures During 4-Ye	ar Averaging Period	• • •	
Calendar year (or fiscal year beginning in)	(a)	2015	<b>(b)</b> 2016	( <b>c)</b> 2017	( <b>d</b> ) 2018	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
6 Graceroste lobbuing expanditures						

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 PROMOTIONAL COMMITTEE, INC. 39-170666

[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 e	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	)	(t	<del>)</del>
	e lobbying activity	Yes	No	Amo	ount
1	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	-			
	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	<del></del>			
	Media advertisements?	-			
	Mailings to members, legislators, or the public?				151
	Publications, or published or broadcast statements?	-			
f	Grants to other organizations for lobbying purposes?	<b>—</b>			
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
-	Other activities?	<del>                                     </del>			
-	Total, Add lines 1c through 1:				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912				
	•	1 1			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	-			
	t III-A   Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(	5). or se	ction	
<u> </u>	501(c)(6).		-,,		
	331(3)(3)			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from	the prior vear	? 3		Х
Par	t III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ion 501(c)( d "No," OR	5), or se l (b) Par	ction t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	tical			
_	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
	Carryover from last year		2b		
c	Total		2c		
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 ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou actions), and Part II-B, line 1. Also, complete this part for any additional information	ıp list), Part II-	A, lines 1 a	and 2 (see	
	1				
		·			
		Schedule	e C (Form	990 or 990	)-EZ) 2018

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

► Attach to Form 990.

Open to Public

OMB No 1545-0047

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

Employer identification number Inspection

2 [] 39-1706666 X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States INC. PROMOTIONAL COMMITTEE, MIDWESTERN DISTRICT General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Part Part II

recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if additive	onal space is neec	led			
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, PMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
CARPENTERS HELPING HANDS, INC. 101 CONSTITUTION AVE. NW 10TH FLOOR WASHINGTON, DC 20001	52-1241116	501(C)(3)	.000,01	0	0. CASH PAID		TO PROVIDE CHARITABLE AID TO POOR AND DISTRESSED OR UNDERPRIVILECED CARPENTERS, JOINERS,
•							
<ul><li>2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li><li>3 Enter total number of other organizations listed in the line 1 table</li></ul>	nd government or s listed in the line	rganizations listed in the 1 table	e line 1 table				1.

Schedule I (Form 990) (2018)

39-1706666

PROMOTIONAL COMMITTEE, INC.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed Schedule I (Form 990) (2018) Part III

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: CARPENTERS HELPING HANDS, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROVIDE CHARITABLE AID TO POOR

832102 11-02-18

#### MIDWESTERN DISTRICT

Schedule I (Form 990)		PRO	DMOTIONAL	COM	MITTEE,	INC	•	39-	-1706666	Page 2
Part IV Suppler	mental	Informat	tion							
AND DISTRESS	SED O	R UNDI	ERPRIVILE	SED (	CARPENTI	ERS,	JOINERS,	RELATED	TRADES	AND
OCCUPATIONS	AND '	THEIR	FAMILIES	AND	DEPENDI	ENTS	•			
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832291 04**-**01-18

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

MIDWESTERN DISTRICT

PROMOTIONAL COMMITTEE, INC.

Employer identification number 39-170666

111011011101111111111111111111111111111
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA AND ITS
REGIONAL AND DISTRICT COUNCILS AND LOCAL UNIONS OF THE MIDWESTERN
DISTRICT.
FORM 990, PART VI, SECTION A, LINE 8B:
THERE ARE NO COMMITTES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING
BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WILL BE REVIEWED BY AT LEAST ONE OFFICER OF THE COMMITTEE
PRIOR TO FILING.
FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO
THE PUBLIC.
<del></del>

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

Schedule O (Form 990 or 990-EZ) (2018)