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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2009

Open to Public Inspection

interi	al Hevel	The organization may have to use a copy of this feturn to sa	alisiy state	reporting requirements:	inspection
A J	or the	2009 calendar year, or tax year beginning and	ending		
В	heck if	Please Use IRS		D Employer identific	cation number
	Addre	ss label or midwest Region Organizing Committee			
	Name change	type Doing Business As		37-1	371059
	Initial	See Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
]Termin	Specific 1 N. OLD STATE CAPITOL PLAZA	525	217-	789-6996
	Amend			G Gross receipts \$	7,809,587.
	Applic	SPRINGFIELD, IL 02/01		H(a) Is this a group re	eturn
	pendir	F Name and address of principal officer: JOHN PENN		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
		empt status: X 501(c) (5) ◀ (insert no.) 4947(a)(1) or 527		If "No," attach a	list. (see instructions)
		e: > WWW.MROCNOW.ORG		H(c) Group exemption	
		organization: Corporation X Trust Association Other ▶	L Year	of formation: 1998 N	State of legal domicile: IL
P	rt i	Summary			
8		Briefly describe the organization's mission or most significant activities. AID	LABOR	UNIONS IN O	RGANIZING
ă		EMPLOYERS & EMPLOYEES			 -
Activities & Governance	l	Check this box if the organization discontinued its operations or dispo	sed of more	1.1	
Ĝ	I	Number of voting members of the governing body (Part VI, line 1a)		. 3	<u>8</u>
مخ	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	34	
iţie	ļ	Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary)	. 5	0	
ξ	l	Total mumber of volumeers (estimate in necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
Ă	l .	Net unrelated business taxable income from Form 990-T, line 34		7a 7b	0.
		Net difference business taxable meeting from 1 on 1 on 1 on 2 or 1, into or		Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		1110, 1001	Outrong roar
Ž	l .	Program service revenue (Part VIII, line 2g)		6,796,192.	6,862,946.
Revenue	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		80,793.	30,169.
Œ	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		165,919.	164,274.
	I	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,042,904.	7,057,389.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,420,587.	2,806,229.
		Benefits paid to or for members (Part IX, column (A), line 4)			
es	15	Salaries, other compensation, employeether efft Part IX, column (A), lines 5-10)		2,913,439.	3,099,570 .
Expenses		Professional fundraising fees (Part IX, column (A), line 149)	_		
ă	ь	Total fundraising experises (Part IX, column (D), line 250 >			
		Other expenses (Part IX, column A), lines 11a 14, 11 (341)	<u> </u>	1,038,747.	951,744.
		Total expenses. Add lines 13:17 (must equal Part IX, box mn (A), line 25)		6,372,773.	6,857,543.
_ <u>_ s</u>	19	Revenue less expenses. Subhabiline 18 112		670,131.	199,846.
Assets or Balances		T. 1 (D. 1)(1)	Ве	ginning of Current Year	End of Year
Seg	l	Total assets (Part X, line 16)	-	3,320,316. 11,652.	3,646,503. 19,365.
in the	l	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		3,308,664.	3,627,138.
P	rt II	Signature Block	<u>·</u> !	3,300,004.1	3,027,130.
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules are and complete Declaration of preparer (other than office) is based on all information of which preparer has a	nd statements,	and to the best of my knowledg	ge and belief, it is true, correct,
Pi Sig		and complete Declaration of preparer (other than officer) is based on all information of which preparer has a	any knowledge		
Sig	n .	Ist I ferm		1 5/1	olio
Her	е	Signature of officer		Date	-
		John F. Penn Chairman			
_		Type or print name and title			
Paic	,	Preparer's Date	Ch sei		er's identifying number structions)
	arer's		7/10 em		·
	Only	Firm's name (or ROMOLO & ASSOCIATES yours if		EIN ►	
550	y	self-employed), address and 2428 N NORTH			
		PEORIA, IL 61604		Phone no. ► 3	09-682-2001
Mar	tha II	29 discuses this return with the property shown above? (see instructions)			Van 1.11-

	Briefly describe the	of Program Service Accorganization's mission:			
	AID LABOR	UNIONS IN ORGANI	ZING EMPLOYERS AND EM	IPLOYEES	
_	Did the organization	undertake any significant progra	am services during the year which were no	ot listed on	
	the prior Form 990 o	or 990-EZ?	•		☐Yes 🗓
		ese new services on Schedule C		roaram sonucos?	☐ Yes X
	-	ese changes on Schedule O.	ıfıcant changes in how ıt conducts, any pr	rogram services?	res _A_
	·		of the organization's three largest progra		
	·		ction 4947(a)(1) trusts are required to repo e, if any, for each program service reporte		
<u> </u>	(Code.) (Expenses \$	including grants of \$) (Revenue \$	
	ORGANIZE E	MPLOYERS & EMPLO	YEES BY AIDING AFFILI		NS AND
	DISTRICT C	OUNCILS.			
	(Code.) (Expenses \$	including grants of \$) (Revenue \$	
				····	
	(Code.) (Expenses \$	including grants of \$) (Revenue \$	
		· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·				
1	Other program service (Expenses \$	ces. (Describe in Schedule O.) including grants	of \$) (Revenue \$		
_	Total program servi) (neverine a		

Form 990 (2009) MIDWEST REGION ORGANIZING COMMITTEE 37-1371059 Page 3 Part IV Checklist of Required Schedules Van Na

			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1_	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			l
	public office? If "Yes," complete Schedule C, Part I	_3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		,,	
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6_	 	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	1	
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		₹.
_	Schedule D, Part III	_8_		X
9	Did the organization report an amount in Part X, line 21; 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	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X	٠	x	
_	as applicable Did the assessment or assessment for lead, buildings, and sourcement in Port V, line 103 if "You " complete Schoolide D.	11		
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		Ì	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		İ	
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII.	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			_
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
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		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			_
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	_15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	ł		
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	L	_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines]		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u> _
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
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X

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37

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

If "Yes," complete Schedule R, Part V, line 2

Note, All Form 990 filers are required to complete Schedule O.

Statements Regarding Other IRS Filings and Tax Compliance Part V No Yes 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 34 filed for the calendar year ending with or within the year covered by this return 2a X 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 this return. (see instructions) X За 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7c to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7e benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g 7h h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings 8 at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter. 10a a Initiation fees and capital contributions included on Part VIII, line 12 **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b

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12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

<u>37-1371059</u>

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.

sec	tion A. Governing Body and Management						
	•	1	1			Yes	No
1a	Enter the number of voting members of the governing body	1a_		8		- 1	
b	Enter the number of voting members that are independent	_1b	L	_8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any other				
	officer, director, trustee, or key employee?		•	<u> 4</u>	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision		-		
	of officers, directors or trustees, or key employees to a management company or other person?			<u> </u>	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Fo		0 was filed?	<u> </u>	1		<u>X</u> _
5	Did the organization become aware during the year of a material diversion of the organization's asse	ts?			5		<u>X</u>
6	Does the organization have members or stockholders?			<u></u> 6	3		<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the				
	governing body?			7	<u>a</u>		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons?	•	7	b		<u>X</u> _
8	Did the organization contemporaneously document the meetings held or written actions undertaken	dunno	the year				
	by the following:			-	-	1	
а	The governing body?			8		X	
b	Each committee with authority to act on behalf of the governing body?			. 8	b L	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				<u> </u>		<u>X</u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)				
				_	۱	/es	No_
	Does the organization have local chapters, branches, or affiliates?			10)a		<u>X</u> _
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?			10)b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	iling th	e form?	1	1	_	<u>X</u>
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	≧a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	uld gıv	e rise	ĺ			
	to conflicts?			12	<u>2b</u>	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes, "	descnbe				
	ın Schedule O how this is done			12	<u>2c </u>	X	
13	Does the organization have a written whistleblower policy?			_1	3		_X_
14	Does the organization have a written document retention and destruction policy?			1	4	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	ndependent		İ		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official			15		X	
þ	Other officers or key employees of the organization			15	ib	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a				
	taxable entity during the year?			16	Sa		<u>X</u> _
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluation to evaluation to evaluation and organization adopted a written policy or procedure requiring the organization to evaluation and organization and organi	lluate i	ts participation			J	
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızatı	on's			- 1	
_	exempt status with respect to such arrangements?			<u> 16</u>	b		
Sec	tion C. Disclosure						
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 (or 1024 if applicable), 990, and 990-1	r (501(c)(3)s only) availa	able for			
	public inspection. Indicate how you make these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict	of interest polic	y, and f	inand	cial	
	statements available to the public						
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the orgar	nization	. ▶		
	JANELLE BROWN, CPA - 217-789-6996	101					
	1 N. OLD STATE CAPITOL PLAZA, SPRINGFIELD, IL 627	01					
				Fo	rm 9	90 (2	2009)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- 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 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.

Check this box if the organization did not		iy cu	ırren			, aire	ecto		(E)	(F)		
(A) Name and Title	(B) (C) Average Position							(D) Reportable	(E) Reportable	(F) Estimated		
ivame and Title	Average hours	(check all that apply)					hv)	compensation	compensation	amount of		
	per week	Individual trustee or director	Institutional trustee	Officer		nsated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
FRANK HOVAR	1 00											
TRUSTEE	1.00	A	├	-	┢	┼	┝	0.	0.	0.		
JOHN PENN	4 00	.		₹.					_			
CHAIRMAN	4.00	X	├	X	├		-	0.	0.			
JOHN R TAYLOR TRUSTEE	1.00	v			l			0.	0.	_		
GLYN RAMAGE	1.00	^	 		\vdash	 	├─			0.		
TRUSTEE	1.00	x						0.	0.	0.		
MIKE SHORT	1	-					T					
TRUSTEE	1.00	X			L			0.	0.	_0.		
GARY ELLIOTT	1	7.							0.			
TRUSTEE	1.00	A	├		├		├─	0.	<u>U•</u>	0.		
RENO HAMMOND TRUSTEE	1.00	X						0.	0.	0.		
LARRY YARNELL	1	l			Г							
TRUSTEE	0.00	X	<u> </u>	_	⊢	-	<u> </u>	0.	0.	0.		
DAVID PENN DIRECTOR	40.00			x				128,750.	0.	63,017.		
					_							
		_		İ	_	_						
		Ь	L	<u> </u>	Ц_	<u> </u>	Ц	<u> </u>				

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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
	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	(D) Fundraising expenses				
1	Grants and other assistance to governments and								
	organizations in the U.S. See Part IV, line 21	2,806,229.							
2	Grants and other assistance to individuals in								
	the U.S. See Part IV, line 22								
3	Grants and other assistance to governments,								
	organizations, and individuals outside the U.S.								
	See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	191,767.							
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	1,805,053.		<u>-</u>					
8	Pension plan contributions (include section 401(k)								
	and section 403(b) employer contributions)	616,412.							
9	Other employee benefits	320,643.							
10	Payroll taxes	165,695.							
11	Fees for services (non-employees):								
а	Management	00 201							
b	Legal	20,321.							
C	Accounting	5,750.							
d	Lobbying			<u> </u>					
e	Professional fundraising services. See Part IV, line 17	7 652							
f	Investment management fees	7,653.							
g	Other	260.	_						
12	Advertising and promotion	95,344.			· 				
13	Office expenses	30,344.							
14	Information technology								
15 16	Royalties Occupancy	38,460.							
17	Travel	222,448.							
18	Payments of travel or entertainment expenses	222/1101							
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	28,263.							
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	146,709.							
23	Insurance	59,272.							
24	Other expenses. Itemize expenses not covered				<u></u>				
	above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)								
а	REIMB SAL/TAXES/BENEFIT	156,298.							
b	ORGANIZING EXPENSES	54,518.							
C	TARGET PROGRAM	42,205.							
d	CHARITABLE DONATIONS	28,766.							
e	MEALS & ENTERTAINMENT	<u>25,068.</u>							
f	All other expenses	20,409.		ļ					
<u>25</u>	Total functional expenses. Add lines 1 through 24f	6,857,543.							
26	Joint costs. Check here If following								
	SOP 98-2. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	PROPERTY OF A COMPANY OF A PARTY								

Part X | Balance Sheet (A) Beginning of year End of year 1 Cash - non-interest-bearing 1 1,373,684. 1,263,418. Savings and temporary cash investments 2 2 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 7 Notes and loans receivable, net Assets 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 843,302. 10a basis. Complete Part VI of Schedule D 492,673. <u>574,639.</u> 268,663. 10c 10b b Less: accumulated depreciation 560,597. 1,694,116. 11 Investments - publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 3,628. 4,064. 15 Other assets. See Part IV, line 11 15 3,646,503. 3,320,316. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 11,652. 19,365. 25 Other liabilities Complete Part X of Schedule D 11,652. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 3,308,664. 3,627,138. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 3,627,138. <u>3,308,664.</u> 33 33 Total net assets or fund balances 320,316 3,646,503. 34 Total liabilities and net assets/fund balances

Form 990 (2009)

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

review, or compilation of its financial statements and selection of an independent accountant?

X Separate basis Consolidated basis Both consolidated and separate basis

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

consolidated basis, separate basis, or both.

Act and OMB Circular A-133?

Form **990** (2009)

X

X

2c

За

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy T

	ection 501(c)(4), (5), or (6) organiza	tions. Complete Part III.			<u> </u>
Name	of organization				Employer identification number
		REGION ORGANIZ			<u> 37-1371059</u>
Par	t I-A Complete if the org	ganization is exempt un	der section 501(c) or is a section 52	27 organization.
1 F	Provide a description of the organi	zation's direct and indirect politi	ical campaign activities	s in Part IV	
2 F	Political expenditures				▶ \$
3 /	/olunteer hours				
Dor	t I-B Complete if the ord	renization is evenent un	dor costion 501/a		
L		ganization is exempt un		:)(3)	<u> </u>
	Inter the amount of any excise tax			:6	►\$ ►\$
	Enter the amount of any excise tax	• •	="	00	Yes No
	f the organization incurred a sectic Vas a correction made?	on 4955 tax, did it file Form 4720	of this year?	•	Yes No
	f "Yes," describe in Part IV				L Tes L No
		anization is exempt un	der section 501(c), except section !	501(c)(3).
	inter the amount directly expended			··	▶ \$
	Inter the amount of the filing organ	, ,	·		_
	exempt function activities	iization's funds contributed to c	ittlei Organizations ioi		▶ \$
	otal exempt function expenditures	e Add lines 1 and 2 Enter here	and on Form 1120.PO		
	ne 17b	s. Add iiiles 1 and 2. Litter Here	and on romin rizor o		> ¢
	Did the filing organization file Form	1120-POL for this year?		•	▶ \$ Yes No
	inter the names, addresses and er	•	FINI) of all section 527 r	nolitical organizations to	. —
	or each organization listed, enter t		•	<u> </u>	' '
	hat were promptly and directly del	•	•		•
	PAC). If additional space is needed	· · · · · ·			• • •
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	om (e) Amount of political
	(a) Marrie	(5) / (30)	(0) 2	filing organization	1 1 1
			Ì	funds. If none, enter	
					delivered to a separate political organization.
				j	If none, enter -0
					
		-			
		<u> </u>			

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 M. Part II-A Complete if the organi	IDWEST RE	GION ORGAN	IZING COMMIT' on 501(c)(3) and file	TEE 37- ed Form 5768	1371059 Page 2
(election under section		•			
A Check I If the filing organization		liated group.			
B Check if the filing organization	-	- .	rovisions apply		
Limits or (The term "expenditur	n Lobbying Expe es" means amou		(.t	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	e public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence	e a legislative bo	dy (direct lobbying)			
c Total lobbying expenditures (add lines	1a and 1b)				
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (ad	dd lines 1c and 1d	d) .			
f Lobbying nontaxable amount Enter the	e amount from th	e following table in bo	oth columns.		
If the amount on line 1e, column (a) or (b)	is: The lob	bying nontaxable ar	mount is:		
Not over \$500,000	20% of	the amount on line 1	е		
Over \$500,000 but not over \$1,000,00	\$100,00	00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,500,0	00 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000	,000 \$225,00	00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
, -	ess, enter -0- n either line 1h or ? 4-Year Avens that made a s	eraging Period Unde ection 501(h) election			Yes N
			ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(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))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990 EZ) 2009 MIDWEST REGION ORGANIZING COMMITTEE 37-1371059 Page 3

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)).

501(c)(6). Yes 1 Were substantially all (90% or more) dues received nondeductible by members? 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3
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? If "Yes," describe in Part IV j Total Add lines 1c through 1i 2
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Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
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1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? 4 Did the organization make only in-house lobbying and political expenditures from the prior year? 4 Did the organization agree to carryover lobbying and political expenditures from the prior year? 4 Did the organization agree to carryover lobbying and political expenditures from the prior year? 4 Did the organization agree to carryover lobbying and political expenditures from the prior year? 4 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from the prior year? 5 Did the organization agree to carryover lobbying and political expenditures from
Did the organization agree to carryover lobbying and political expenditures from the prior year? 2 a Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
expenses for which the section 527(1) tax was paid).
a Current year

c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3
- 199 - 199
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? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Supplemental Information

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

2009
Open to Public Inspection

Name of the organization

Employer identification number

	MIDWEST REGION ORG		37-1371059
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fur	nds or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor ac	dvised funds
	are the organization's property, subject to the organization's		. Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can	be used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpo	ose conferring
	impermissible private benefit?		Yes No
Pa			0, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an	historically important land area
	Protection of natural habitat	Preservation of a c	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the fo	orm of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
a	Total number of conservation easements		
þ	Total acreage restricted by conservation easements		. <u>2b</u>
C	Number of conservation easements on a certified historic str	2c	
q	Number of conservation easements included in (c) acquired		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by	the organization during the tax
_	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section	
0	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservatunclude, if applicable, the text of the footnote to the organiza	•	
	conservation easements.	tion 5 imancial statements that describ	bes the organization's accounting for
Pa	rt III Organizations Maintaining Collections o	f Art. Historical Treasures. or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	-	
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement an	d balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these		, , , , , , , , , , , , , , , , , , ,
ь	If the organization elected, as permitted under SFAS 116, to		alance sheet works of art, historical treasures.
	or other similar assets held for public exhibition, education, of	•	
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		S
2	If the organization received or held works of art, historical tre	asures, or other similar assets for finar	ncial gain, provide
_	the following amounts required to be reported under SFAS 1		and the state of t
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$
_	·	•	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 MIDWEST	REGION OR	GANI	ZING (COMMITT	EE	-	37-13	71059) Pa	age 2
Par	t III Organizations Maintaining C	collections of A	rt, His	torical T	reasures, c	or Oth	er Simil	ar Asse	ts (conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	t are a s	significant	use of its	collection	ıtem	s
	(check all that apply):										
а	Public exhibition	(ı 🔲	Loan or exc	change progra	ams					
b	Scholarly research	•	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın how th	ney further	the organizati	on's exe	mpt purp	ose in Par	t XIV.		
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	asures, or oth	er sımila	ar assets		_		_
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's c	ollection?				Yes		No
Par	t IV Escrow and Custodial Arran		lete if org	ganization a	nswered "Yes	s" to Fo	rm 990, Pa	art IV, line	9, or		
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contributio	ns or other as	sets no	t ıncluded	_	_		_
	on Form 990, Part X?								Yes	L_	No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	offowing	table:							
									Amount		
С	Beginning balance						1c_				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance .										
2a	a Did the organization include an amount on Form 990, Part X, line 21?								Yes		No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.	·									
Par	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10										
		(a) Current year	(b) P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four	years	back_
1a	Beginning of year balance										
b	Contributions .				<u></u>						
C	Net investment earnings, gains, and losses	<u> </u>								_	
d	Grants or scholarships .										
е	Other expenditures for facilities										
	and programs							. <u></u>			
f	Administrative expenses										
g	End of year balance								·		
2	Provide the estimated percentage of the year	r end balance held a	as:								
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
С	Term endowment >	%									
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	and administe	red for t	the organi	zation	_		
	by:									Yes	No
	(i) unrelated organizations						•	•	3a(i)		
	(ii) related organizations					-			3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Sched	dule R?					3b_		
4_	Describe in Part XIV the intended uses of the										
Par	t VI Investments - Land, Building	s, and Equipm	ent. Se	e Form 990), Part X, line	10.	-				
	Description of investment	(a) Cost or o	other		t or other	(c) A	ccumulate	ed	(d) Book	value	•
		basis (investi	ment)	basis	(other)	de	preciation				
1a	Land										
b	Buildings .										
С	Leasehold improvements				<u> 15,157.</u>		3,8			<u>.,3</u>	
d	Equipment				90,361.		64,8			5,5	
_ е	Other .			73	37,784.		200,0	16.		7,70	
Total	Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	Y colun	nn (R) line	10(c))				574	6	39

Schedule D (Form 990) 2009

Part VII Investments - Other Securities. S	ee Form 990, Part X, line	12.	
(a) Description of security or category (including name of security)	(b) Book value	(c)	Method of valuation: r end-of-year market value
Financial derivatives			
Closely-held equity interests			
Other			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, lin	e 13	
(a) Description of investment type	(b) Book value	(c)	Method of valuation: r end-of-year market value
			<u> </u>
· · · · · · · · · · · · · · · · · · ·			
		-	
Total (Col/b) must aqual Form 000 Port V and (P) line 12)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, lin	0.15		<u> </u>
) Description		(b) Book value
	, Dodonpalon	•	(5) 556. (4.05
-			
- · · - · · · · · · · · · · · · · · · · · · ·		- · ···	
· · · · · · · · · · · · · · · · · · ·			
Total. (Column (b) must equal Form 990, Part X, col (B) lin Part X Other Liabilities. See Form 990. Part X	<u>ne 15.)</u>		· Pl
/-) Decomption of lightly	., IINE 25.	(b) Amount	
		(b) Amount	
Federal income taxes		10 265	
PAYROLL LIABILITIES		19,365.	
			
		10.055	
Total, (Column (b) must equal Form 990, Part X, col (B) lir	ne 25) 🕒 🕨	19,365.	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

932053 02-01-10

Schedule D (Form 990) 2009

	t XI Reconciliation of Change in Net Assets from Form 990 to		cial State		1371059 ts	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)	<u> </u>	1		7,057	389.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		6,857	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			,846.
4	Net unrealized gains (losses) on investments	• •	4			,628.
5	Donated services and use of facilities		5			,
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net) Add lines 4 through 8		9		118	,628.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	nd 9	10			474.
	t XII Reconciliation of Revenue per Audited Financial Statem		nue per F	Return		
1	Total revenue, gains, and other support per audited financial statements			1	7,176	,017.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a 11	.8,628.	.		
b	Donated services and use of facilities	2b		7 /		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d	•		2e	118	628.
3	Subtract line 2e from line 1			3	7,057	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]]		
b	Other (Describe in Part XIV.)	4b]		
С	Add lines 4a and 4b			4c		0.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	7,057	389.
Par	t XIII Reconciliation of Expenses per Audited Financial Staten	nents With Expe	enses per	Retu	m	
1	Total expenses and losses per audited financial statements	•		1	6,857	543.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.			1 1		
а	Donated services and use of facilities	2a]]		
b	Prior year adjustments	2b		ji		
С	Other losses .	2c]		
d	Other (Describe in Part XIV.)	_2d]		
е	Add lines 2a through 2d		,	2e		0.
3	Subtract line 2e from line 1			3	<u>6,857</u>	<u>.543.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]		
b	Other (Describe in Part XIV.)	4b		1 1		
С	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	6,857	<u>.543.</u>
Par	t XIV Supplemental Information					
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com					4; Part
_				Cab - 4	ule D (Form 9	20) 2000

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No 1545-0047 Inspectión

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

18. **2 Employer identification number** 37-1371059 (h) Purpose of grant or assistance ORGANIZING GRANTS ORGANIZING GRANIS ORGANIZING GRANTS ORGANIZING GRANTS ORGANIZING GRANTS X Yes ORGANIZING GRANT recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 1 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 non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) 0. o o o o ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant 136,953. 957,430. 105,953. 40,000 31,400 252,404 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. COMMITTEE (c) IRC section if applicable MIDWEST REGION ORGANIZING 44-0461923 |501 (C) (5) 501(C)(5) 501 (C) (5) 501 (C) (5) 501 (C) (5) 501 (C) (2) Enter total number of section 501(c)(3) and government organizations 06-1694040 43-0630984 26-1840493 48-0287794 35-1049602 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations EASTERN MISSOURI LABORERS DISTRICT 1 (a) Name and address of organization COUNCIL - 3450 HOLLENBURG DRIVE -COUNCIL - 4208 W PARTRIDGE WAY, GREAT PLAINS LABORERS DISTRICT UNIT 2 - PEORIA, IL 61615 or government 5700 SOUTH ANTHONY BLVD KANSAS CITY, MO 66106 FORT WAYNE, IN 46806 LABORERS LOCAL #1032 LABORERS LOCAL #1290 ST CHARLES, IL 63301 LABORERS LOCAL #213 LABORERS LOCAL #319 BRIDGETON, MD 63044 Name of the organization 2600 MERRIAM LANE JOPLIN, MD 64804 2001 EMPIRE AVE 3414 BANNER WAY Part Part N

Schedule I (Form 990) 2009

(Form 990) 2009 MIDWEST REGION ORGANIZING COMMITTEE

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Schedule 1 (Form 990) 2009

Part III

Page 2

37-1371059

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	vide the information	on required in Part I,	line 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: GRANT RECIPIENTS FOR AN EMPLOYE	RECIPIENTS	TE FOR AN	뙤	S WAGES &	
BENEFITS ARE REQUIRED TO TOWN IN TO	ם הפספונים	BOILVILL FRE	=		
al 💮			7 HHT CH	1 0	
DESIGNATED FOR OTHER FORESCES, THE	THE VICE E	T	STANT	1 Z	
RECTOR. NO	ER	PAYMENTS ARE	R SENT UNTIL	IL THE	
ARE RECEIVED AND REVIEWED					

Schedule I (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE 1-1 (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III. Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 2009 Open to Public

Inspection

(h) Purpose of grant or assistance Employer identification number 37-1371059 DRCANIZING GRANTS ORGANIZING GRANIS ORGANIZING GRANTS ORCANIZING GRANTS ORGANIZING GRANT ORCANIZING GRANT ORGANIZING GRANT (g) Description of non-cash assistance Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (book, FMV, appraisal, other) (f) Method of valuation o o. ö $\dot{\circ}$ o Ċ, ö (e) Amount of assistance non-cash 35,000. 7,087. 30,267. (d) Amount of cash grant 124,178 1,017,530 40,000 28,027 MIDWEST REGION ORGANIZING COMMITTEE (c) IRC section if applicable 501 (C) (5) 501 (C) (5) 501 (C) (5) 501 (C) (5) 501 (C) (5) 501 (C) (5) 501 (C) (5) 37-0347470 03-0545870 37-0548864 37-0347593 43-1783605 35-0288853 44-0644881 (p) EIN WESTERN MISSOURI & KANSAS LABORERS DISTRICT COUNCIL - 1101 E 87TH ST LABORERS DISTRICT COUNCIL - 2945 COUNCIL - 11720 EAST 21ST ST -SOUTHWESTERN ILLINOIS LABORERS STANTON AVE - SPRINGETELD, IL HEIGHTS PROFESSIONAL PLAZA -(a) Name and address of organization or government DISTRICT COUNCIL - 3 MEADOW SOUTHERN & CENTRAL ILLINOIS SOUTHWEST LABORERS DISTRICT - KANSAS CITY, MO 64131 COLLINSVILLE, IL 62234 BLOOMINGTON, IL 61701 VALPARAISO, IN 46368 253 S WASHINGTON ST LABORERS LOCAL #362 LABORERS LOCAL #509 Name of the organization ST LOUIS, NO 63108 LABORERS LOCAL #81 2012 FOX CREEK RD 536 N TAYLOR AVE TULSA, OK 74129 62703

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

22

Schedule I-1 (Form 990) 2009

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SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

MIDWEST REGION ORGANIZING COMMITTEE

Employer identification number 37-1371059

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	if any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b_		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
	•			
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			1
	CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
				1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	4a		X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b_		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u></u>
b	Any related organization?	5b		<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III.			ĺ
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the net earnings of.			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		-	ı
	ınıtıal contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			ı
	Regulations section 53.4958-6(c)?	9		

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed Schedule J (Form 990) 2009

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	0	Q	(E)	(F)
				-	Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in pnor Form 990 or Form 990-EZ
1	<u>s</u>	128,750.			49,410.	13,607.	191,767.	
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Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number 37-1371059 MIDWEST REGION ORGANIZING COMMITTEE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ► Attach to Form 990.

2009 Open to Public Inspection

OMB No 1545-0047

▶ See separate instructions.

Employer identification number 37-1371059

Direct controlling entity

End-of-year assets <u>e</u> Total income € Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) MIDWEST REGION ORGANIZING COMMITTEE Primary activity Name, address, and EIN of disregarded entity Part

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Part II

(a) Name, address, and EIN of related organization	(b) Prmary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
MIDWEST REGION LABORERS' POLITICAL LEAGUE 1 N OLD STRIE CAPITOL PLAZA SUITE 525					
SPRINGFIELD, IL 62701	POLITICAL COMMITTEE	IILINOIS	527		
MIDWEST REGION LABORERS' POLITICAL LEAGUE					
EDUCATION FUND - 37-1400940, 1 N OLD STATE	₁				
CAPITOL PLAZA SUITE 525, SPRINGFIELD, IL	POLITICAL COMMITTEE	HIMOIS	527		
IILINOIS LABORERS' LEGISLATIVE COMMITTEE -					
36-4001239, 1 N OLD STATE CAPITOL PLAZA					
SUITE 525, SPRINGFIELD, IL 62701	POLITICAL COMMITTEE	IILINOIS	527		
	· · · · ·				

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

932161 02-04-10

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Schedule R (Form 990) 2009

37-1371059

Page 2

Schedule R (Form 990) 2009 MIDWEST REGION ORGANIZING COMMITTEE

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Percentage ownership General or managing partner? Schedule R (Form 990) 2009 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets Ξ ate allocations? Disproportion-Yes Ξ Share of total Income Share of end-of-year assets 9 Type of entity (C corp, S corp, or trust) Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) છ 27 Direct controlling entity Primary activity ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 932162 02-04-10 Part IV

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes No	اه
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			- 1
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		Ta X	اب
b Gift, grant, or capital contribution to other organization(s)	:	Th A	اب
c Gift, grant, or capital contribution from other organization(s)		1c X	
d Loans or loan quarantees to or for other organization(s)		1d X	м
		٠ <u>٠</u>	ا.
ברמוז כן וסמו אממומונס כן סנינו מאמוודמנים (א) .		-	
f Sale of assets to other organization(s)		*	54
a Purchase of assets from other organization(s)	•	_	ير ا
	. :		<u>بر</u>
i Lease of facilities, equipment, or other assets to other organization(s)		1i X	M
			-
j Lease of facilities, equipment, or other assets from other organization(s)		; -	×
k Performance of services or membership or fundraising solicitations for other organization(s)	:	¥	ايد
I Performance of services or membership or fundraising solicitations by other organization(s)		-	×
m Sharing of facilities, equipment, mailing lists, or other assets		T X	-
n Shanng of paid employees		1n X	
o Reimbursement paid to other organization for expenses		10 X	54
p Reimbursement paid by other organization for expenses	:	X dt	54
	•		
q Other transfer of cash or property to other organization(s)	:	1 _q	
r Other transfer of cash or property from other organization(s)		-t-	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ction thresholds		
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved	
MIDWEST REGION LABORERS' POLITICAL LEAGITE	>		ا ا
	•		
(2) MIDWEST REGION LABORERS' POLITICAL LEAGUE	N	0	0
(3) MIDWEST REGION LABORERS' POLITICAL LEAGUE	ø	19,340	
(4) MIDWEST REGION LABORERS' POLITICAL LEAGUE EDUCATION FUND	M	0	0
(s) MIDWEST REGION LABORERS' POLITICAL LEAGUE EDUCATION FUND		O	•
(6) TILITNOIS LABORERS' LEGISLATIVE COMMITTEE	×		0.
		Schedule R (Form 990) 2009	8

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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(4)	(4)	3	5	[6]	٤	(5)	3
(a)	(a)	2 :	<u> </u>			(A)	
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
(and to		country)	Yes No			of Schedule K-1 (Form 1065)	•
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932164 02-04-10

Schedule R (Form 990) 2009

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

30

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount invôlved
(7) ILLINOIS LABORERS' LEGISLATIVE COMMITTEE	N	0.
(8)		
(6)		
(10)		
(11)		
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