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Department of the Treasury

### 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)

OMB No 1545-0047 Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Inspection For the 2012 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number MIDWEST REGION LABORERS'-EMPLOYERS' Address change COOPERATION & EDUCATION TRUST Name change 01-0606353 Doing Business As Initial return Room/suite Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Termin-1 NORTH OLD STATE CAPITOL PLAZA 525 217-789-4306 Amended 1,022,014. City, town, or post office, state, and ZIP code G Gross receipts \$ Applica-SPRINGFIELD, IL 62701 H(a) is this a group return pending F Name and address of principal officer. JOHN PENN Yes X No for affiliates? SAME AS C ABOVE H(b) Are all affiliates included? Yes No Tax-exempt status 501(c)(3) X 501(c) ( 4947(a)(1) or If "No," attach a list (see instructions) J Website: ► WWW.MIDWESTLECET.ORG H(c) Group exemption number ▶ Corporation X Trust Association Other > K Form of organization: Year of formation: 2002 M State of legal domicile: IL Part I Summary Briefly describe the organization's mission or most significant activities. ADDRESS LABOR-MANAGEMENT IN THE MIDWEST REGION. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 15 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2012 (Part V. line 2a) 5 3 Total number of volunteers (estimate if necessary) 6 0 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** 210,000. Contributions and grants (Part VIII, line 1h) 168,200. Program service revenue (Part VIII, line 2g) 802,918. 844,346. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 8,864 9,468. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,762 0. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 025,544 022,014. Grants and similar amounts paid (Harris Column (A), line-4) (A), line-4) (Benefits paid to or for members (Part X column (A), line-4) (A), lines 5-10) 50,000 0. 14 0. 15 Salaries, other compensation, employee benefits (Part 16a Professional fundraising fees Bart IX, column (A), line 300,494 324,243. 0. b Total fundraising expenses (Part IX, column (D), line 25) 0. 17 Other expenses (Part IX, column (A) 578,691 712,015. Total expenses. Add lines 13 17 929,185 036,258. 19 Revenue less expenses Subtract line 18 from line 12 96,359 <14,244.> Assets or Balances **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 904,574. 899,765. 21 Total liabilities (Part X, line 26) 4,085 429. Net assets or fund balances Subtract line 21 from line 20 900,489, Part II Signature Block Under penalties of perjury, I declare at I have xamined this rature ocluding accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declar ion of preparer (other than green) is based on all information of which preparer has any knowledge. Signature Sıgn JOHN PENN CHAIRMAN Here Type or print name and title Date Print/Type preparer's name PTIN Preparer's signature Paid self-employed Preparer Firm's name Firm's EIN Use Only Firm's address May the IRS discuss this return with the preparer shown above? (see instructions) LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

<b>,</b>	Total program service expenses ► Form 99	
t L	Other program services (Describe in Schedule O.)  (Expenses \$ including grants of \$ ) (Revenue \$ )	
_	Other program services (Describe in Schedule O.)	
		_
	(Code) (Expenses \$	
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	IN THE CONSTRUCTION INDUSTRY.	_
	(Code) (Expenses \$	EF
	revenue, if any, for each program service reported	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, an	d
	If "Yes," describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O	X
	Did the organization undertake any significant program services during the year which were not listed on	
		_
	Briefly describe the organization's mission  ADDRESS LABOR-MANAGEMENT NEEDS IN THE MIDWEST REGION.	

Form 990 (2012) COOPERATION & EDUCATION TRUST

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(k)(s) or 4947(k)(1) (other than a private foundation)?  If '''''se, ''''se, '''' complete Schedule S. Schedule S. Schedule of ContributorD  Did the organization regione in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If '''se', 'complete Schedule C, Part I'  Section 501(k)(s) organization. Bid the organization engage in lobbying activities, or have a section 501(k) election in effect during the tax year? If ''Yes, 'complete Schedule C, Part II'  1 is the organization as defined in Review Procedule 98-197 If 'Yes, 'complete Schedule C, Part II'  1 is the organization as defined in Review Procedule 98-197 If 'Yes, 'complete Schedule C, Part II'  1 is the organization as defined in Review Procedule 98-197 If 'Yes, 'complete Schedule C, Part II'  2 is the organization as defined in Review Procedule 98-197 If 'Yes, 'complete Schedule C, Part II'  5 is the organization as defined in Review Procedule 98-197 If 'Yes, 'complete Schedule C, Part II'  6 Did the organization maintain and yodors advised funds or any similar funds or accounts for which domors have the right of the provide Schedule on Interest in the environment, hardors are areas, or hations structures If 'Yes, 'complete Schedule O, Part II'  7 Did the organization maintain collections of works of art, instorical treasures, or other similar assestis? If 'Yes, 'complete Schedule O, Part II'  8 Did the organization maintain and in Part X, line 121, for escretion endoded account liability, serve as a custodian for amounts not listed in Part X, line 131 in the configuration organization maintain and in Part X, line 131 in the organization report an amount for line following questions is "Yes," time complete Schedule D, Part X II  9 Did the organization report an amount for investments: program related in Part X, line 107 If 'Yes,' complete Schedule D, Part X III  1 Did the organization report an amount for investments: program related in Part X, line		`		Yes	No
2 Is the organization required to complete Schedule S, Schedule of Contributors D diff the organization engage in direct or indirect profiles obtained appropriate some public office? If "Yes," complete Schedule C, Part II Section 601(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(t)) election in effect during the tax year? If "Yes," complete Schedule C, Part III I be the organization as offerior or investment of an amount of the organization as defined in exercise the organization or investment or aimliar amounts as defined in exercise profiles of the organization and the organization or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II D diff the organization and collections of whota of art, Instincial treasures, or other similar assessity? If "Yes," complete Schedule D, Part II D diff the organization and the organization of the organization and an account of the labeltities of the third sets of the organization and the organization and an account of the labeltities of the third sets of the organization and the organiz	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dut the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public officer of "Yes", complete Schedule C, Part II  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 III  Did the organization assection 5(10(k)), 501(c)(5), 601(c)(5), 6		If "Yes," complete Schedule A	1		<u>X</u>
public office? If Yes, 'complete Schedule C, Part I Section 501((s)) organization. Both the organization engage in lobbying activities, or have a section 501(t) election in effect during the tax year' If Yes, 'complete Schedule C, Part II to the organization as action 501(s)(4), 501(s)(5), or 501(s)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 II 'Yes, 'complete Schedule C, Part III bit the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? II' Yes, 'complete Schedule D, Part II bit the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lard eras, or historic structures? If 'Yes, 'complete Schedule D, Part III bit 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, dieth management, credit repair, or debt negotiation services? If 'Yes, 'complete Schedule D, Part II' bit the organization report an amount for lead, buildings, and equipment in Part X, line 107 II' Yes, 'complete Schedule D, Part VII' bit the organization report an amount for revestments - other securities in Part X, line 107 II' Yes, 'complete Schedule D, Part XII' bit the organization report an amount for lead, buildings, and equipment in Part X, line 107 II' Yes, 'complete Schedule D, Part XII' bit the organization report an amount for lead, buildings, and equipment in Part X, line 107 II' Yes, 'complete Schedule D, Part XII' bit the organization report an amount for lead to the schedule D, Part XII' bit the organization report an amount for lead to the schedule D, Part XII' bit the organization report an amount for lead to the schedule D, Part XII' II' XII' bit the organization report an amount for lead to the schedule D, Part	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4. Section 501(k)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(k)(4) section in effect during the tax year? if "Yes," complete Schedule C, Part II is the organization a section 501(k)(4), 501(k)(5), or 501(k)(5) organization that receives membership dues, assessments, or smilar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part II is Did the organization maintain any donor advised funds or any semilar funds or accounts for which disons have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II is Did the organization maintain collections of works of art, historical treasures, or other smilar assets? If "Yes," complete Schedule D, Part II is Did the organization maintain collections of works of art, historical treasures, or other smilar assets? If "Yes," complete Schedule D, Part II is Did the organization directly of through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasisendowments? If "Yes," complete Schedule D, Part V if If the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V if If the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part V if If If the organization report an amount for ministrents: other securities in Part X, line 107 If "Yes," complete Schedule D, Part V if Did the organization report an amount for other assets in Part X, line 107 If "Yes," complete Schedule D, Part V if Did the organization report an amount for the reservation is part X, line 107 If "Yes," complete Schedule D, Part V if Did the organization report an amount for other assets in Part X, line 107 If "Yes," complete Schedule D, Part V if Did the organization report an amount for other assets in Part X, line 107 If Yes, complete Schedule D, Part X in Did the organization r	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
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5 is the organization a section SOT(c)(4), SOT(c)(5), or SOT(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99:197 if "Yes," complete Schedule C, Part III  7 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  8 Did the organization maintain and collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization funds of the part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization disease of the third organization, hold assets in temporally restricted endowments, permanent and owners, or provide any of the following questions is "Yes," then complete Schedule D, Part VI  11 If the organization is an amount for any of the following questions is "Yes," then complete Schedule D, Part VI  12 Did the organization report an amount for investments or ther securities in Part X, line 10? If "Yes," complete Schedule D, Part VI  12 Did the organization report an amount for investments in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 150 II "Yes," complete Schedule D, Part XI  13 Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax pomplete Schedule D, Part XI  14 Did the organization aschool described in section 170(b)(1)(A)(a)? If "Yes," complete Schedule D, Part XI  15 Did the organization aschool described in section 170(b)(1)(A)(a)? If "Yes," complete Schedule D, Part XI and XI  16 Did the organ	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I    The organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II    The organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II    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    The organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-endowments? If "Yes," complete Schedule D, Part V    The organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-endowments? If "Yes," complete Schedule D, Part V    The organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V    The organization report an amount for investments - program related in Part X, line 112 that is 5% or more of its total assets reported in Part X, line 15? If "Yes," complete Schedule D, Part V    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 15? If "Yes," complete Schedule D, Part X     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 15? If "Yes," complete Schedule D, Part X     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 X     The Ord the organization		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent andowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization is any or the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for investments - program related in Part X, line 15? If "Yes," complete Schedule D, Part VI 13 Did the organization report an amount for other assets in Part X, line 15? If at its 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 14 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X 15 Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization is about the organization or school described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule D, Part X 16 Did the organization and anound for other albalities in Part X, line 15? If "Yes," complete Schedule D, Part X 17 Did the organization maintain an office, employees, or agents outside of the United States? 18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargeste foreign invest	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
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B   Yes," complete Schedule D, Part IV   10   10   10   10   10   10   10   1	9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		:	
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as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 107 if "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VIII 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 Part X, line 167 if "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 157 that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part X in the organization is part and amount for other labilities in Part X, line 157 if "Yes," complete Schedule D, Part X d Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's lability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X in the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X in and XII is optional if "Yes," and if the organization included in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  133		endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
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12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII  b Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  12b X  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  14a Did the organization maintain an office, employees, or agents outside of the United States?  15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  16 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, Parts II and IV  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  18 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1 c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a X  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	t		١		.,
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Form 990 (2012) COOPERATION & EDUCATION TRUST

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on 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 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			i
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part i	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		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			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)			
	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		X
¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			٠
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			٦,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
00	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
00	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		X
34	Part V, line 1	24	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		^
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		ļ
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	335		-
00	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	50		<b>-</b>
	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?	<del></del>		<del>                                     </del>
	Note. All Form 990 filers are required to complete Schedule O	38	x	
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	ported an expansion in concess of		990	(2012)
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		T
14a		14a		Х
С	Enter the amount of reserves on hand			
	organization is licensed to issue qualified health plans	]		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	Note. See the instructions for additional information the organization must report on Schedule O.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u></u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
-	amounts due or received from them )			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
a	Gross income from members or shareholders			
11	Section 501(c)(12) organizations. Enter	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	1		1
а	Initiation fees and capital contributions included on Part VIII, line 12			ŀ
10	Section 501(c)(7) organizations. Enter			
		9b	-	ļ
а	Did the organization make any taxable distributions under section 4966?	9a		
9	Sponsoring organizations maintaining donor advised funds.	┌	<b></b>	-
3	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
ь 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?  Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h		<del>                                     </del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of care, heats, airplanes, or other vehicles, did the organization file a Form 1098-C2	7g		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intollectual property, did the organization file Form 9899 as required?	7f		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
d	If "Yes," indicate the number of Forms 8282 filed during the year  Did the organization receive any funds directly or indirectly to pay promiums on a personal benefit contract?	7.		v
	to file Form 8282?	7c		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<del> </del>
а	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		<del> </del>
7	Organizations that may receive deductible contributions under section 170(c).			1
	were not tax deductible?	6b	 	<b> </b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		'	1
	any contributions that were not tax deductible as charitable contributions?	6a		X
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
		5c		ļ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
		5a		X
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
b	If "Yes," enter the name of the foreign country: ►			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u></u>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	filed for the calendar year ending with or within the year covered by this return  2a 3			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
·	(gambling) winnings to prize winners?	1c	х	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	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  1b 0			
	Fater the number reported in Pay 2 of Form 1006 Fater 0 of pat applicable		Yes	No
	Check is someone of contains a response to any question in this rait v		V	<u> </u>
	Check if Schedule O contains a response to any question in this Part V			$\overline{}$

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Form 990 (2012)

COOPERATION & EDUCATION TRUST

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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 to any question in this Part VI					$\mathbf{x}$	
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	15				
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15.	, ,	ļ		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship						
_	officer, director, trustee, or key employee?	•	•	2		$\mathbf{X}_{-}$	
3	Did the organization delegate control over management duties customarily performed by or under th	e direc	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?		·	3	į	$\mathbf{X}_{-}$	
4							
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		5		X	
6	Did the organization have members or stockholders?			6		X X X X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or al	ppoint	one or				
	more members of the governing body?			7a	Ì	$\mathbf{X}_{-}$	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or				
	persons other than the governing body?			7b		$\mathbf{X}_{-}$	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	ie following:				
а	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 rea	ched	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		<u> </u>	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code )				
					Yes	No_	
10a	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 cl	hapter	s, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly befo	ore filing the form?	11a		<u>X</u> _	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	12a Did the organization have a written conflict of interest policy? If "No," go to line 13						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to cor	iflicts?	12b	X		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe		ļ		
	ın Schedule O how this was done			12c	X		
13	Did the organization have a written whistleblower policy?			13	Х		
14	Did the organization have a written document retention and destruction policy?			14	Х		
15	Did the process for determining compensation of the following persons include a review and approv	-	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•					
а	The organization's CEO, Executive Director, or top management official			15a	X		
b	Other officers or key employees of the organization			15b		<u>X</u>	
	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	with a			7.5	
	taxable entity during the year?			_16a		<u>X</u> _	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nizatio	on's				
800	exempt status with respect to such arrangements? tion C. Disclosure			16b			
17	List the states with which a copy of this Form 990 is required to be filed NONE				1-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	1 (26C	uon 50 I(C)(3)s only)	avallab	10		
	for public inspection Indicate how you made these available Check all that apply.  Own website Another's website X Upon request Other (explain		hadula (1)				
10				تا اس			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or statements available to the public during the tax year.	UIIIICT	or interest policy, an	u inar	iciai		
20	State the name, physical address, and telephone number of the person who possesses the books a	nd	ordo of the areas:	tion >			
20	JANELLE BROWN - 217-331-5540	110 180	Joids of the organiza	uon. 🗩			
		NG	FIELD, IL	627	<u>01</u>		
23200 12-10	8	11/01	TUL, TH			(2012)	

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

. Check if Schedule O contains a response to an	ny question in this Part VII	

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -O- 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

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

- 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)	oiya	IIIZa		)	ilbei	isai	(D)	(E)	(F)
Name and Title	Average hours per week	box,	not cl unle: cer an	Posi heck i ss pe	ition more rson	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JOHN PENN CHAIRMAN	2.00	¥		X				0.	0.	0.
(2) JOHN REID	1.00	X		х			-	0.	0.	0.
(3) RANDY HARRIS DIRECTOR	10.00	x		Х				0.	0.	0.
(4) CHARLES SHEMPF, JR. TRUSTEE	1.00	X	-	22				0.	0.	0.
(5) GLYN RAMAGE TRUSTEE	1.00	x						0.	0.	0.
(6) GARY ELLIOTT TRUSTEE	1.00	x						0.	0.	0.
(7) FRANK DEGRAW	1.00	x						0.	0.	0.
TRUSTEE (8) JAMES BRUNER	1.00	X						0.	0.	0.
TRUSTEE (9) PAT CAHILL	1.00	X						0.	0.	0.
TRUSTEE (10) DON GREENWELL	1.00	X						0.	0.	0.
TRUSTEE (11) MICHAEL LUHR	1.00	X						0.	0.	0.
TRUSTEE (12) GARY STEWART TRUSTEE	1.00	X						0.	0.	0.
(13) EDWARD SIMONDS	1.00	X						0.	0.	0.
TRUSTEE (14) CLINT TAYLOR TRUSTEE	1.00	X	-			-		0.	0.	0.
TRUSTEE (15) RENO HAMMOND TRUSTEE	1.00			-		-		0.	0.	0.
(16) JAMES SCHWINKENDORF TRUSTEE	1.00	-						0.	0.	0,
(17) TIM BELL TRUSTEE	1.00			-		•		0.	0.	0.
232007 12-10-12	<del></del>	1 42	1	Ь		ч	Щ.		<u> </u>	Form <b>990</b> (2012)

232007 12-10-12

Part VII Section A. Officers, Director (A)  Name and title	(B) Average hours per week (list any hours for related organizations below line)	tee or director go co co	not c , unle cer ar	Posi heck r ss per id a di	tion more rson	than	one h an	(D) Reportable compensation	<b>(E)</b> Reportable compensation	1	(F) timate nount	
Name and title	hours per week (list any hours for related organizations below	offi	not c , unle cer ar	heck r ss per	more rson (	than	h an	compensation	•	1		
	week (list any hours for related organizations below	offi	, unie cer ar	ss per	rson	ıs bot	h an	1	compensation	an	nount	of
	(list any hours for related organizations below	<u> </u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	,		•			
	hours for related organizations below	rustee or direct				ı		from	from related	1	other	
	organization: below	rustee or	1	1 1		_		the organization	organizations (W-2/1099-MISC)			
	below	3 1	ᄩ			Highest compensated employee		(W-2/1099-MISC)	(***271033*****100)	1	anızat	
			Institutional trustee		yee	E E		(***			d relat	
	l line)	ugnaj	totto	ا ية ا	Key employee	est co	듷			orga	ınızatı	ons
		Ē	重	Officer	Key	皇皇	Former					
(18) SCOTT HUGHES	40.00	_	1				i .					
EMPLOYEE		-	ļ			X	_	113,300.	0.	5	<u>6,0</u>	18.
		-								1		
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		<del>                                     </del>	T							1		-
		1										
1b Sub-total						<b></b>		113,300.	0.	5	6,0	18.
c Total from continuation sheets to	Part VII, Section A							0.	0.			0.
d Total (add lines 1b and 1c)					_	<b>&gt;</b>		113,300.	0.	5	6,0	18.
2 Total number of individuals (including	ng but not limited to t	hose	liste	ed at	oove	e) wł	no r	eceived more than \$100	,000 of reportable			
compensation from the organization	n 🕨											1
											Yes	No
3 Did the organization list any former			e, ke	y en	nplo	yee	or,	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedul										3		X
4 For any individual listed on line 1a,									the organization			}
and related organizations greater th										4	X	—
5 Did any person listed on line 1a rec							elat	ed organization or indiv	idual for services	_		3.7
rendered to the organization? If "Ye Section B. Independent Contractors	es," complete Scriedu	ile J	or s	uch į	pers	son			- "	5		X
Complete this table for your five high	short componented in			nt o	ont	raata	t	that recovered more than	\$100,000 of company			
the organization Report compensa									•	sation	rom	
the organization report compensa	(A)	yeai	enu	ng v	V1(11	Oi W	1111	(B)	yeai	(0	``	
Name and b	usiness address	N	ON	FC:				Description of s	services	Compe		n
			<u> </u>							<u> </u>		
							_	-				
	<del></del>											
			_									
2 Total number of independent contr		not l	mite	d to	tho	se li	stec	d above) who received n	nore than			
\$100,000 of compensation from the	e organization					0						
232008										Form	990	(2012)

Form 990 (2012) COOPERATION & EDUCATION TRUST
Part VIII Statement of Revenue

1 41		Check if Schedule O cont		to any question i	n this Part VIII			
	•	Check if Schedule O Cont	ains a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1 a	Federated campaigns	1a					T
E E	b		1b					
اڠِي	С	Fundraising events	1c					
# j		Related organizations	1d					
S.E			ions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, gifts, gran						
		similar amounts not included abo	ve 1f	168,200.				
[음률	g	Noncash contributions included in lines	1a-1f \$					
SE	h	Total. Add lines 1a-1f		<b>•</b>	168,200.			
			•	Business Code				
e	2 a	EMPLOYER CONTRI	BUTIONS	900099	844,346.	844,346.		
Program Service Revenue	b							
S E	С							
e e e	d							
96 E	е							
ፈ	f	All other program service reve	enue				<del></del>	
	_9	Total. Add lines 2a-2f		<b></b>	844,346.			
	3	Investment income (including	dividends, inter-	est, and				
		other similar amounts)		▶	9,468.			9,468.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
ļ	5	Royalties		, <b>&gt;</b>	<del> </del>			
			(ı) Real	(II) Personal				
	6 a							
		Less rental expenses						
		Rental income or (loss)		J				
1		Net rental income or (loss)		<u> </u>	<del></del>			
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		ļ				
	þ	Less cost or other basis						
		and sales expenses		ļ				
		Gain or (loss)		<u></u>				
		Net gain or (loss)						<del></del>
ne	8 a	Gross income from fundraisin	•					
l e		including \$	of					
B.		contributions reported on line	•					
Other Revenu		Part IV, line 18	a					
ŏ		Less, direct expenses	b dravava aveate	`L				
		Net income or (loss) from fund	=					<del></del>
	y a	Gross income from gaming ac Part IV, line 19						
	h	Less direct expenses	a b					
		Net income or (loss) from gan	-					
		Gross sales of inventory, less						<del>                                     </del>
	10 0	and allowances	a	, [				
	h	Less: cost of goods sold	b					
		Net income or (loss) from sale						
ì		Miscellaneous Revenu		Business Code				
	11 a							1
	o i i a							<del>                                     </del>
	c							
	d				<del></del>			<del>                                     </del>
	_	Total. Add lines 11a-11d		<b></b>			<del> </del>	<del></del>
	12_	Total revenue See instructions.			1,022,014.	844,346.	0	9,468.
23200 12-10	9 - 12							Form <b>990</b> (2012)

01-0606353 Page 10

Form 990 (2012) COOPERATION & EDUCATION TRUST
Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).					
	Check if Schedule O contains a response to any question in this Part IX								
	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 United States. See Part IV, line 21								
2	Grants and other assistance to individuals in								
	the United States See Part IV, line 22								
3	Grants and other assistance to governments,								
	organizations, and individuals outside the								
	United States See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
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)								
7	Other salaries and wages	196,336.							
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	76,071.	· · · · · · · · · · · · · · · · · · ·						
9	Other employee benefits	35,879.							
10	Payroll taxes	15,957.							
11	Fees for services (non-employees)								
а	Management								
b	Legal	747.							
С	Accounting	3,500.							
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17								
f	Investment management fees	462.							
g	Other (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)								
12	Advertising and promotion	4,186.							
13	Office expenses	12,428.		<del></del>					
14	Information technology		<del></del>	ļ <u>.</u>					
15	Royalties								
16	Occupancy		<del></del>						
17	Travel	42,373.							
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	10.050							
19	Conferences, conventions, and meetings	19,979.							
20	Interest	250 144							
21	Payments to affiliates	259,144.		<del>                                     </del>					
22	Depreciation, depletion, and amortization	29,668. 10,027.							
23	Insurance	10,027.							
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	REIMBURSED EXPENSES	227,353.							
b		42,190.							
С		26,118.							
d	CHARITABLE DONATIONS	19,050.							
е	All other expenses	14,790.							
25	Total functional expenses. Add lines 1 through 24e	1,036,258.							
26	Joint costs. Complete this line only if the organization								
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here I If following SOP 98-2 (ASC 958-720)			1					

01-0606353 Page 11

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 535,620 526,219. 1 1 Cash · non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net Inventories for sale or use 8 R Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 118,160. 10b 60,842. 73,248. 10c 57,318. b Less. accumulated depreciation 295,600. 316,108. Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 106. 120. 15 15 904,574. 899.765 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 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 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 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 of Schedule D 4,085. 25 2,429. Total liabilities. Add lines 17 through 25 4,085. 2,429. 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. **Net Assets or Fund Balances** 900,489. 897,336. Unrestricted net assets 27 27 Temporarily restricted net assets 28 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 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 900,489. 897,336. Total net assets or fund balances 33 904,574. Total liabilities and net assets/fund balances 899,765. 34

Form 990 (2012)

	1990 (2012) COOPERATION & EDUCATION TRUST	<u>01-060</u>	<u>6353</u>	Pag	<sub>le</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		_		
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,02		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,03		
3	Revenue less expenses Subtract line 2 from line 1	3	<1	<u>4,2</u>	<u>44.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	900	0,4	<u>89.</u>
5	Net unrealized gains (losses) on investments	5	1	1,0	<u>91.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	89'	7,3	<u>36.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual X Other MODIFIE				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	·		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	·		
	separate basis, consolidated basis, or both:		ŀ	}	
	Separate basis Consolidated basis Both consolidated and separate basis		•		
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs,			
	consolidated basis, or both:				•
	Separate basis Consolidated basis Both consolidated and separate basis				
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			

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

Form **990** (2012)

### **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

➤ See separate instructions.

OMB No 1545-0047

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.

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

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

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

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

f the organization answered "Yes," to  Section 501(c)(4), (5), or (6) organization		y Tax), or Form 990-E	Z, Part V, line 35c (Proxy	Tax), then
	REGION LABORERS	'-EMPLOYERS	' Emp	oloyer identification number
	TION & EDUCATION			01-0606353
Part I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 527 of	
<ol> <li>Provide a description of the organiz</li> <li>Political expenditures</li> <li>Volunteer hours</li> </ol>	ation's direct and indirect politic	cal campaign activities		\$
Part I-B Complete if the org	anization is exempt und	der section 501(c)	(3)	· · · · · · · · · · · · · · · · · · ·
1 Enter the amount of any excise tax			<b>(</b> ○).	\$
2 Enter the amount of any excise tax	, ,			* \$
3 If the organization incurred a section	, ,			Yes No
4a Was a correction made?		, , , , , , , , , , , , , , , , , , ,		Yes No
<b>b</b> If "Yes," describe in Part IV				103110
	anization is exempt und	der section 501(c)	, except section 501	(c)(3).
1 Enter the amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities	\$
2 Enter the amount of the filing organ	zation's funds contributed to of	ther organizations for s	ection 527	
exempt function activities		·	▶:	\$
3 Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	••	
line 17b			<b>.</b>	\$
4 Did the filing organization file Form	1120-POL for this year?			Yes No
5 Enter the names, addresses and en	ployer identification number (E	IN) of all section 527 pc	olitical organizations to whi	
made payments For each organiza				
contributions received that were pro-				
political action committee (PAC) If	additional space is needed, pro	vide information in Part	· IV	
(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) 2012

LHA

Schedule C (Form 990 or 990-EZ) 2012				01-0	0606353 Page 2
Part II-A Complete if the org		mpt under sectio	n 501(c)(3) and fil	ea Form 5/68	
			Dod March - March		
	-	= ::	Part IV each affiliated	group member's nar	ne, address, EIN,
. $\square$	re of excess lobbying ation checked box A ar		vyolono opply		
B Check P If the limit organiza	ation checked box A ar	nd minted control pre	ovisions apply	(a) Filing	(b) Affiliated group
•	its on Lobbying Expe ditures" means amou		)	organization's totals	totals
1a Total lobbying expenditures to infl	uence public opinion (	grass roots lobbying)			
<b>b</b> Total lobbying expenditures to infl	uence a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add i	ines 1a and 1b)				
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	es (add lines 1c and 1c	t)			
f Lobbying nontaxable amount. Ent	er the amount from the	e following table in bot	h columns		
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 \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5		00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000		
Over \$17,000,000	\$1,000,	000.			
				****	
g Grassroots nontaxable amount (er	•				
h Subtract line 1g from line 1a If zei					<u> </u>
i Subtract line 1f from line 1c. If zer	•				_1
j If there is an amount other than ze reporting section 4911 tax for this		line 1i, did the organiz	ation file Form 4720		Yes No
	zations that made a s	• •	n do not have to comp		
CC	olumns below. See th	e instructions for line	s 2a through 2f on pa	ige 4.)	
	Lobbying Exper	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
					}
d Grassroots nontaxable amount					<del> </del>
e Grassroots ceiling amount (150% of line 2d, column (e))					
	1	ŀ			1

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

01-0606353 Page 3

Schedule C (Form 990 or 990 EZ) 2012 COOPERATION & EDUCATION TRUST 01-060635

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

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	)	(t	o)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or	1			
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of.				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?		_		
d Mailings to members, legislators, or the public?			-	
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			_	
b If "Yes," enter the amount of any tax incurred under section 4912			*******	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		İ	_	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	ction 501(c)(	5), or se	ction	
501(c)(6).				
	-		Yes	N
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	·	
Dues, assessments and similar amounts from members		1		•
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	olitical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a	·	
b 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				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying ar	nd political			
expenditure next year?		4		
		5		
5 Taxable amount of lobbying and political expenditures (see instructions)	· · · · · · · · · · · · · · · · · · ·			
Part IV Supplemental Information		· -		
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
	, Part II-A (affilia	ted group	list), Part II	-A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	·A, line
Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	-A, line
Part IV Supplemental Information omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5	, Part II-A (affilia	ted group	list), Part II	-A, line

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

MIDWEST REGION LABORERS'-EMPLOYERS'

Employer identification number

	COOPERATION & EDUC				11-0606353
Par			or Other Similar Fund	is or Accounts.	Complete if the
	organization answered "Yes" to Form 990, Part IV, line		<del> </del>		<del> </del>
	·	(a) D	onor advised funds	(b) Funds ar	nd 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 t	he assets held in donor adv	ised funds	
	are the organization's property, subject to the organization's	s exclusive leg	gal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in wi	riting that grant funds can b	e used only	
	for charitable purposes and not for the benefit of the donor of	or donor advi	sor, or for any other purpos	e conferring	
	impermissible private benefit?				Yes No
Pai	t II Conservation Easements. Complete if the org	ganization an	swered "Yes" to Form 990,	Part IV, line 7	<u> </u>
1	Purpose(s) of conservation easements held by the organizati	tion (check al	that apply)		
	Preservation of land for public use (e.g., recreation or e	education)	Preservation of an h	storically important	t land area
	Protection of natural habitat		Preservation of a ce	rtified historic struc	ture
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	ified conserva	ation contribution in the fori	n of a conservation	easement on the last
	day of the tax year.				
				Held	at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
С	Number of conservation easements on a certified historic str	ructure includ	ded in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06	, and not on a historic struc	cture	
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, re	eleased, extin	guished, or terminated by t		ng the tax
_	year >	•	•	J	
4	Number of states where property subject to conservation ea	asement is lo	cated >		
5	Does the organization have a written policy regarding the pe			- f	
	violations, and enforcement of the conservation easements		J. 1		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		ng conservation easements	during the year	
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing co	nservation easements durii	ng the year > \$	
8	Does each conservation easement reported on line 2(d) above				<del></del>
	and section 170(h)(4)(B)(ii)?	•	•		Yes No
9	In Part XIII, describe how the organization reports conservati	tion easemen	ts in its revenue and expen	se statement, and b	alance sheet, and
	include, if applicable, the text of the footnote to the organiza				
	conservation easements.			Ü	•
Pa	t III Organizations Maintaining Collections o	of Art, Hist	orical Treasures, or	Other Similar A	ssets.
	Complete if the organization answered "Yes" to Form	n 990, Part IV	, line 8		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not	to report in its revenue stat	ement and balance	sheet works of art,
	historical treasures, or other similar assets held for public ex	khibition, edu	cation, or research in furthe	rance of public serv	ice, provide, in Part XIII,
	the text of the footnote to its financial statements that descr			•	
ь	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to re	eport in its revenue stateme	nt and balance she	et works of art, historical
	treasures, or other similar assets held for public exhibition, e				
	relating to these items:				<b>33</b>
	(i) Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$	
	(ii) Assets included in Form 990, Part X		•	<b>-</b> \$	
2	If the organization received or held works of art, historical tre	easures or o	ther similar assets for financ	rial dain provide	
-	the following amounts required to be reported under SFAS 1			nai gairi, provide	
-	Revenues included in Form 990, Part VIII, line 1	. 10 1/100 330	of relating to these items.	<b>▶</b> ¢	
a	Assets included in Form 990, Part X		•	<b>~</b> • •	
D	Assets included in Point 330, Pdil A	•		▶ ३	

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

Schedule D (Form 990) 2012

<u>Sche</u>		TION & EDU				· · · · · ·				Page 2
Par	t III   Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	or Other	Simila	<u>ar Asse</u>	<b>ts</b> (contint	ied)
3	Using the organization's acquisition, accessi	on, and other record	ds, check	k any of the	following tha	t are a sign	ficant u	ise of its o	collection	items
	(check all that apply)									
а	Public exhibition	c	ı 🗀 i	Loan or exc	hange progra	ams				
b	Scholarly research	e	, 🗀 (	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	in how th	ney further t	he organizati	on's exemp	t purpo	se in Part	XIII	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımılar as	sets		_	
	to be sold to raise funds rather than to be ma	aintained as part of	the orga	nization's co	ollection?				Yes	□ No
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" to Fo	rm 990,	Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not inc	luded		_	
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	table.						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	217						Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatio	n has be <u>en</u>	provided in	Part XIII				
Pai	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	rm 990, Part	IV, line 10.				
		(a) Current year	(b) P	rior year	(c) Two year	rs back (d)	Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities	<del></del>								
	and programs								L	
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	red for the	organız	ation	_	
	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 XIII the intended uses of the									
Pa	t VI Land, Buildings, and Equipm	nent. See Form 99	0, Part X	, line 10		<del></del>				
	Description of property	(a) Cost or o		(b) Cos	t or other	(c) Accı	ımulate	d	(d) Book	value
		basis (invest	ment)	basis	(other)	depre	ciation			
1a	Land									
þ	Buildings									
c	Leasehold improvements									
d	Equipment				4,106.		0,1			3,908.
e	Other			10	4,054.	5	0,6	44.		3,410.
<u>Tota</u>	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colur	nn (B), line	10(c))	_1			57	7,318.

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See  (a) Description of security or category (including name of security)	(b) Book value		aluation Cost or end	l-of-year market value
Financial derivatives	(D) BOOK VAIUE	(c) Method of v	adation Cost of end	roryear market value
2) Closely-held equity interests			<u> </u>	
B) Other			·	<del> </del>
(A)				
(B)				
(C)				
(D)			•	
(E)			,	
(F)				· · · · · · · · · · · · · · · · · · ·
(G)				
(H)				
(1)				
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. Se	e Form 990, Part X,	line 13		
(a) Description of investment type	(b) Book value	(c) Method of v	aluation Cost or end	l-of-year market value
(1)				
(2)				
(3)				
(4)				
_(5)				
(6)				
(7)	<del></del>	-		
(8)			n	
_(9)				
(10)	·			
Part IX Other Assets. See Form 990, Part X, col. (B) line 13.)	4 <i>E</i>	<u> </u>		<del></del>
	Description			(b) Book value
(1)				(b) Dook value
(2)	· · · · · · · · · · · · · · · · · · ·	<del></del> -		
(3)				
(4)				<del> </del>
(5)				
(6)	<u></u>		-	
(7)				
(8)	<del></del>	· · · · · · · · · · · · · · · · · · ·		
(9)				
(10)				
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15)		<b>•</b>	
Part X Other Liabilities. See Form 990, Part X, II	ne 25			
(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) ACCRUED PAYROLL WITHHOLDII	NGS	2,429.		
_ (3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)			ļ	
/4.43				
(11)				
otal. (Column (b) must equal Form 990, Part X, col. (B) line FIN 48 (ASC 740) Footnote In Part XIII, provide the tex		2,429.		

232053 12-10-12

Sche	dule D (Form 990) 2012 COOPERATION & EDUCATION TR	UST		01-	0606353	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statement	ents With	Revenue per R	eturr	1	
1	Total revenue, gains, and other support per audited financial statements			1	1,032	643.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.					
а	Net unrealized gains on investments	2a	11,091.			
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		<u>,091.</u>
3	Subtract line 2e from line 1			3	1,021	<u>,552.</u>
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	462.	) i		
b	Other (Describe in Part XIII)	4b				
С	Add lines 4a and 4b			4c		462.
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,022	014.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	nents With	Expenses per	Retu		
1	Total expenses and losses per audited financial statements			1	1,035	<u>,796.</u>
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				
c	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		<u> </u>
3	Subtract line 2e from line 1			3	1,035	<u>,796.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			ļ ļ		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	462.			
b	Other (Describe in Part XIII.)	4b		]		
С	Add lines 4a and 4b			4c		462.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	<del></del>	<del></del> -	5	1,036	,258.
	t XIII Supplemental Information				<del></del>	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part t				2b; Part V, line	4; Part
		<del>,</del>		<u>-</u> -		
				<u>.</u>	<u> </u>	
		<del>,, , , , , , , , , , , , , , , , , , ,</del>				
		·				
						<u> </u>

Schedule D (Form 990) 2012

**2** Schedule I (Form 990) (2012) **Employer identification number** 01-0606353 Open to Public OMB No 1545-0047 2012 Inspection (h) Purpose of grant or assistance X Yes 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 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, Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table MIDWEST REGION LABORERS'-EMPLOYERS' TRUST (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. COOPERATION & EDUCATION Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance (p) EIN cnteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part

01-0606353

MIDWEST REGION LABORERS'-EMPLOYERS'

(Form 990) (2012) COOPERATION & EDUCATION TRUST

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

Part III can be duplicated if additional space is needed Schedule I (Form 990) (2012)

Part III Grants and Other

(f) Description of non-cash assistance			formation.								
(e) Method of valuation (book, FMV, appraisal, other)			n (b), and any other additional in	AN EMPLOYEE'S	REPORTS ARE	A GRANT IS DESIGNATED	SUBMITS QUARTERLY	NAGER &	NO ADDITIONAL PAYMENTS ARE		
(d) Amount of non- cash assistance			ine 2, Part III, colum	FOR AN EM	& EXPENSE		GRANT SUBMI	ASSISTANT BUSINESS MANAGER.	DDITIONAL		
(c) Amount of cash grant			n reguired in Part I, I	A GRANT IS DESIGNATED FOR	L, BENEFIT	THE GRANT. IF	RECEIVING THE G	SSISTANT B		ED.	
(b) Number of recipients			de the information	RANT IS	, PAYROLL,	BY	NO		TED REPORTS.	D REVIEW	
(a) Type of grant or assistance			Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	ן ו	EFITS, MONTHLY ACTIV	. Fi	FOR OTHER PURPOSES, THE ORGANIZATION	REPORTS FOR REVIEW. THE VICE PRESIDENT,	PROGRAM DIRECTOR REVIEW THE SUBMITTED	SENT UNTIL REPORTS ARE RECEIVED AND REVIEWED.	

232102 12-18-12

Schedule I (Form 990) (2012)

### SCHEDULE J (Form 990)

**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.

2012

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

MIDWEST REGION LABORERS'-EMPLOYERS'

COOPERATION & EDUCATION TRUST

Employer identification number

Schedule J (Form 990) 2012

01-0606353

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			ĺ
	First-class or charter travel Housing allowance or residence for personal use			1
	Travel for companions Payments for business use of personal residence			l
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			l
	Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)			ŀ
_				
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	<u> </u>	<del></del>
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		<del> </del>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
•	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			1
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
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			
	0.1			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	ľ		
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	- · · ·	-		
	Any related organization?	5a 5b	-	
	If "Yes" to line 5a or 5b, describe in Part III	30	<del> </del>	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а		6a		
b	Any related organization?	6b	<u> </u>	
	If "Yes" to line 6a or 6b, describe in Part III.		l	
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			
	initial contract exception described in Regulations 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			
	Regulations section 53 4958-6(c)?	9		

232111 12-10-12

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Page 2

COOPERATION & EDUCATION TRUST

Schedule J (Form 990) 2012

01-0606353

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(l)(B)	reported as deferred in prior Form 990
(1) SCOTT HUGHES	Ξ	113,30	0	0	32,75	23,263.	169,318.	0.0
EMPLOYEE	9	0.	0	0	0	0.	0.	
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Schedule J (Form 990) 2012

### **SCHEDULE O**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

MIDWEST REGION LABORERS'-EMPLOYERS'
COOPERATION & EDUCATION TRUST

Employer identification number 01-0606353

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED WITH THE
CHAIRMAN OF THE BOARD AND THE ADMINISTRATOR.
FORM 990, PART VI, SECTION B, LINE 12C: THE POLICY IS DISTRIBUTED TO THE
TRUSTEES AT THE ANNUAL MEETING IN DECEMBER AND A SIGNOFF SHEET IS
COMPLETED.
FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION OF OFFICERS AND KEY
EMPLOYEES IS DETERMINED BY DELIBERATION AND VOTING BY THE BOARD MEMBERS.
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.
FORM 990, PART XII, LINE 1
THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCOUNTING.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2012 Open to Public

OMB No 1545-0047

Inspection

Employer identification number

entity

Direct controlling 01-0606353 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) End-of-year assets ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income ত্র ▶ See separate instructions. 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 LABORERS'-EMPLOYERS' ► Attach to Form 990. COOPERATION & EDUCATION TRUST Primary activity Name, address, and EIN (if applicable) of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part Part II

(g) Section 512(b)(13) ž × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) **e** Exempt Code section € 527 Legal domicile (state or foreign country) ILLINOIS EGISLATION & REGULATIONS Primary activity SUPPORT & AID IN ILLINOIS LABORERS LEGISLATIVE COMMITTEE 36-4001239, 1 N OLD STATE CAPITOL PLAZA SPRINGFIELD, IL 62701 Name, address, and EIN of related organization SUITE 525

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232181 12-10-12 LHA

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 COOPERATION & EDUCATION TRUST

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

Page 2

01-0606353

Seneral or Percentage Schedule R (Form 990) 2012 Yes Section 512(b)(13) controlled entity? 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) 3 Percentage ownership managing partner? Yes Ξ Code V-UBI amount in box 20 of Schedule Share of end-of-year assets <u>(6</u> ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets Type of entity (C corp, S corp, or trust) <u>e</u> Share of total income Ξ Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) **e** Legal domicile (state or foreign country) Ö (d)
I Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization 232162 12-10-12 Part IV

Schedule R (Form 990) 2012 COOPERATION & EDUCATION TRUST

01-0606353 Page 3

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	Š
1 During the tax year, did the organization engage in any of the following transaction	is with one or more re	fransactions with one or more related organizations listed in Parts II-IV?	ın Parts II-IV?		•	
a Receipt of (i) interest (ii) annurties (iii) royalties or (iv) rent from a controlled entity				1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> b		×
c Gift, grant, or capital contribution from related organization(s)				5		×
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)				<u>-</u>	_	×
f Dividends from related organization(s)				=		×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				ŧ	-	×
i Exchange of assets with related organization(s)				<b>;=</b>		×
j Lease of facilities, equipment, or other assets to related organization(s)				=		×
k Tease of facilities equipment or other assets from related organization(s)				÷		×
	nization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			<u>ξ</u>		×
Character of familiars of contract mailtan lets of after accept with saletal argumentation(s)	(c) (c)				>	:
	(c) (o)			= ;	4	>
				2	$\dagger$	4
<ul> <li>Beimbursement paid to related organization(s) for expenses</li> </ul>				5		×
						>
q neimbursement paid by related organization(s) for expenses				5	$\dagger$	4
r Other transfer of cash or property to related organization(s)				÷		×
s Other transfer of cash or property from related organization(s)				1s		×
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	who must complete the	ns line, including covered	relationships and transaction thresholds			
(a) Name of other organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) ILLINOIS LABORERS LEGISLATIVE COMMITTEE	N	0.				
(2)						
(3)						
(4)				:		
(5)						
(6)						
232163 12-10-12	31		Schedule R (Form 990) 2012	R (Form	990) 2	012

Page 4 01-0606353

MIDWEST REGION LABORERS'-EMPLOYERS'

COOPERATION & EDUCATION TRUST Schedule R (Form 990) 2012 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Disproportional amount in box 20 managing ownership of Schedule K-1 pariner? ownership Yes No (Form 1065) Yes No Schedule R (Form 990) 2012 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 Ξ end-of-year Share of assets Share of income total (e) Are all partners sec 501(c)(3) orgs? Predominant income parties second (related, unrelated, excluded from tax under section 512-514) Yes No Ð (state or foreign Legal domicile country) Primary activity Name, address, and EIN of entity

## MIDWEST REGION LABORERS'-EMPLOYERS' Schedule R (Form 990) 2012 COOPERATION & EDUCATION TRUST 01-0606353 Page 5 Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions)