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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2012

Open to Public Inspection

Department of the Treasury
internal Revenue Service

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

JUN 1. 2012 and ending MAY 31, 2013 A For the 2012 calendar year, or tax year beginning D Employer identification number C Name of organization Check If Address CONSTRUCTION BUSINESS GROUP 39-1703979 Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number (608)240-4170 Termin-4702 S. Biltmore Ln. 1384771. Amende City, town, or post office, state, and ZIP code Applica-tion pending Madison, WI 53718 H(a) is this a group return Yes X No for affiliates? F Name and address of principal officer: same as C above H(b) Are all affiliates included? Yes L I Tax-exempt status: 501(c)(3) X 501(c) (If "No," attach a list. (see instructions) J Website: ► N/A H(c) Group exemption number Year of formation: 1992 M State of legal domicile: WI K Form of organization: Corporation Trust X Association Other > Part I Summary Briefly describe the organization's mission or most significant activities: INDUSTRY ADVANCEMENT Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 8 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2012 (Part V, Ilne 2a) 0 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 8 Contributions and grants (Part VIII, line 1h) 1388932 1366804. Program service revenue (Part VIII, line 2g) 13117 17967. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1384771. 1402049 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . 106060. 150238 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0. Benefits paid to or for members (Part IX, column (A), line 4) <u>594121</u> 655374. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Ō. 16a Professional fundraising fees (Part IX, column (A), the tree to be Total fundraising expenses (Part IX, column (D), line 25) 454238. 381382. Other expenses (Part IX, column (A), lines 112 11d, 11f-24e) 1198597. 1142816. Total expenses. Add lines 13-17 (must equal part IX Addung) (A) 110 (25) 241955. 203452. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 1306561. 1551164. Total assets (Part X, line 16) 22866. 25514. Total liabilities (Part X, line 26) 1525650. 1283695. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is Otrue, correct, and complete. Declaration of preparate (other than officer) is based on all information of which preparer has any knowledge Sign B Ka Executive Director Here Print/Type preparer's name P00499751 Paid COREY BILKEY CALIBRE CPA GROUP Preparer Firm's EIN Firm's name 566 W, LAKE STREET Use Only Phone no. 3126550037 CHICAGO, IL 60661-141 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2012)

| | n 990 (2012) CONSTRUCTION BUSINESS GROUP | 39-1703979 _P |
|--|--|---|
| | Check if Schedule O contains a response to any question in this Part III | |
| 1 | Briefly describe the organization's mission: | |
| | INDUSTRY ADVANCEMENT | |
| | | |
| _ | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | Yes 🖸 |
| | the prior Form 990 or 990-EZ? | L_Yes L& |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services | s? Yes 🖸 |
| | If "Yes," describe these changes on Schedule O. | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to or revenue, if any, for each program service reported. | thers, the total expenses, and |
| 4a | | venue \$ |
| | TO PROVIDE JOINT LABOR-MANAGEMENT ACTIVITES CONDUCTED | BY AN AREA AND |
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| | ACHIEVED BY THE PARTIES. | |
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| 4d | Other program services (Describe in Schedule O.) | |
| | TO PROVIDE JOINT LABOR-MANAGEMENT ACTIVITES CONDUCTED BY AN AREA A INDUSTRY-WIDE COMMITTEE DESIGNED TO IMPROVE LABOR-MANAGEMENT RELATIONSHIPS, JOB SECURITY, COMPETITIVENESS, PRODUCTIVITY, ORGANIZATIONAL EFFECTIVENESS, ECONOMIC DEVELOPMENT AND SPECIFICAL ENSURE THAT EMPLOYERS PAY THEIR EMPLOYERS THE APPLICABLE CERTIFIES BENEFIT RATES AND FOR SUCH OTHER PURPOSES AS MAY BE LAWFULLY SOUGH ACHIEVED BY THE PARTIES. D (Code:) (Expenses \$ |) |
| the prior If "Yes," 3 Did the country of the prior of th | Total program service expenses ► | - 000 |
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| | | | 162 | NO |
|-----|--|--------------|----------|---------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1_ | <u> </u> | X |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2_ | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | x |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | - | | |
| | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | X | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | | | l |
| _ | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6_ | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | l _ | | ↓ |
| . 8 | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | 7 | | X |
| . 0 | Schedule D, Part III | 8 | L | X |
| 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 IV | 9 | | x |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | |
| | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | ; . | - i yas | .27 |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | `` |
| | Part VI | 11a | X | <u> </u> |
| 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 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| 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 16? If "Yes," complete Schedule D, Part VIII | 11c | | <u>X</u> |
| a | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | x |
| • | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | X | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | x | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | $\overline{}$ |
| | 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 | 13 | • | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | _ | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | <u> </u> |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals | | | |
| | located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| 40 | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | <u> </u> |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| 20- | complete Schedule G, Part III | 19 | | $\frac{x}{x}$ |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | 990 | 2012) |
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Form 990 (2012) CONSTRUCTION BUSIN
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 27 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 | | Х |
| 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 | | | |
| | Cohadula V. H. Walah, so to line OF | 24a | | х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| - | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | 2.40 | | |
| · | any tax-exempt bonds? | 240 | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24c 24d | | |
| 25a | | 240 | | |
| 200 | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | 1 | |
| | disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | |
| 0 | 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 | | | |
| 00 | 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 | | | 7.5 |
| ~- | 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 | | | 72 |
| | 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 | 4 | , ' | ٠. |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | <u> X</u> |
| Ь | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X |
| C | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | |
| | 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 | | | |
| | contributions? If "Yes," complete Schedule M | 30 | | <u> </u> |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | <u> </u> |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | <u> </u> |
| 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 | 33 | | <u> </u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | | <u> </u> |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | <u> </u> |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | Ī | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | l | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | |
| | Note. All Form 990 filers are required to complete Schedule O | 38 | Х | |
| | | Form | 990 (| 2012) |

| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a form 930-Ti for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an Interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4b If "Yes," that the financial control in the foreign country (such as a bank account, securities account, or other financial accounts. 5c Was the organization that from TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5c Was the organization that or the shelter transaction at any time during the tax year? 5c Did any taxable party notify the organization that it was or is a party to a prohibited out whether transaction? 5c Did have granization that were not tax deductible as charitable contributions? 5c Did the organization that were not tax deductible as charitable contributions? 6c Did the organization that may receive deductible contributions under section 170(c). 8c Did the organization receive a payment in access of \$75 made party as a contribution and partly for goods and services provided to the payor? 8c Did the organization receive as promet in access of \$75 made party as a contribution and partly for goods and services provided to the payor? 8c Did the organization receive as payment in access of \$75 made party as a contribution and partly for goods and services provided to the payor? 8c Did the organization receive as orthibution of qualified intellectual property, of which it was required? 8c Did the organization or contribution of organization the payor and pay | | Check if Schedule O contains a response to any question in this Part V | | | |
|--|-----|--|---------------------------------------|--------------|--|
| b Enter the number of Forms W-20 included in line 1a. Enter O-If not applicable | | | | Yes | No |
| b Enter the number of Forms W-20 included in line 1a. Enter 0-If not applicable | 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | / :s | 7 2 | |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (gambhing) winnings to prize winners? 2a. Exter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, [2a 7] b if at least one is reported on ine 2a, clid the organization file all required federal employment tax returns? 2b. If the sax one is reported on line 2a, clid the organization file all required federal employment tax returns? 2c. X b if Yes, *Ines it filed a Form 990-T for this year? If No, *provide an explanation in Schedule O 3b. If Yes, *Ines it filed a Form 990-T for this year? If No, *provide an explanation in Schedule O 3c. At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4c. At any time of fing requirements for Form 10 F 90 22.1, Report of Foreign Bank and Financial Accounts. 5d. Was the organization payor to a prohibit data whether transaction at any time during the tax year? 5d. Was the organization and provide the organization have an explanation at any time during the tax year? 5d. Was the organization have annual gross necepits that are normally greater than \$100,000, and did the organization addict any contributions that were not tax deductible? 5d. X b Did any taxable party notify the organization hist R was or is a party to a prohibited tax ehelter transaction? 5d. X b If Yes, * To the Sa or Sb, did the organization hist R was or is a party to a prohibited tax ehelter transaction? 5d. X b If Yes, * To the sa or Sb, did the organization hist R was or is a party to a prohibited tax ehelter transaction? 6d. X b If Yes, * To the same of the organization history solution and party for goods and services provided to the promoter of the organization history solution and party for goods and services provided to the payor? 5d. If Yes, * India th | _ | | ֓֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | 1 1 1 | [3] |
| gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 5 If at least one is reported on line 2a, did the organization life all required federal employment tax returns? 2 B X X Note. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 3 B Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 If Yea,* enter the name of the foreign country: ▶ 5 See instructions for filing requirements for Form TD F00.22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization aparty to a prohibited tax ehelter transaction at any time during the tax year? 5 L Yea,* on the Sec of St, did the organization life it was or is a party to a prohibited tax shelter transaction? 5 L Yea,* on the Sec of St, did the organization the it was or is a party to a prohibited tax shelter transaction? 5 L Yea,* of the Sec of St, did the organization the remarks of the organization and achieves the any contributions that were not tax deductibles of the organization and achieves a contributions? 6 L Yea,* did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelt was returned to the Foreign and the organization shelt may receive deductible contributions and exercise provided? 7 L Organizations that may receive deductible contributions under section 170(c). 8 L Yea,* did the organization nettile with the dornor of the value of the geods or services provided? 9 L Yea,* did the organization receive a pymentil excess of \$75 made party as a contribution of quanty for goods and services provid | | |] :, \ | 5 | |
| 2a Erter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. [2a 7] b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | | 1c | X | [|
| filed for the calendary was ending with or within the year covered by this return by if at least one is monoted on line 28, did the organization file all required tederal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Did Tyes, the stifled a Form 990 Tof this year? If 'No, 'provide an explanation in Schedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountry (such as a bank account, securities account, or other financial accountry or the same of the forsign country; by the same of the same of the forsign country; by the same of the forsign country; by the same of the same of the forsign country; by the same of the same of the forsign country; by the same of the forsign country; by the same of th | 2a | | | | |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If Yes, *has it filed a form 990-T for this year? If *No, *provide an explanation in Schedule O 3b A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a At any time during the calendar year, did the organization was an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5b If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited tax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited fax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited fax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization that It was or is a party to a prohibited fax shelter transaction? 5c If Yes, *to line 5a or 5b, did the organization include with every solidation an express statement that such contributions or gifts were not tax deductible? 6c If Yes, *to line 5a or 5b, did the organization include with every solidations an express statement that such contributions or gifts were not acceptable to the organization received accordible contributions under section 170(c). 6c If Yes, *to line 5a or 5a or 5a or 5a | | | 7 🗒 | | |
| Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions) 3 | b | | 2b | | _ |
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| 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | c | | 1 - 1 | . | |
| b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | | | 14a | \vdash | X |
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| | | | | n 990 | (2012 |

Form 990 (2012) CONSTRUCTION BUSINESS GROUP 39-1703979 Page 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 | | | 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 8 | | | ' مُن |
| | If there are material differences in voting rights among members of the governing body, or if the governing | ` | | 350 |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. | | | 13 |
| ь | Enter the number of voting members included in line 1a, above, who are independent | | | ``` |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | , | |
| _ | officer, director, trustee, or key employee? | 2 | , - | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| · | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | х |
| A | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| _ | | 6 | X | 1 |
| 6 | | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | x |
| | more members of the governing body? | 7a_ | | <u> </u> |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or |] | | ., |
| | persons other than the governing body? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | - ' | | ľ |
| а | The governing body? | 8a_ | X | ļ |
| 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 reached at the | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X |
| <u>Sec</u> | tion B. Policies (This Section B requests Information about policies not required by the Internal Revenue 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 chapters, affiliates, | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 118 | | X |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | · . |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | in Schedule O how this was done | 12c | X | l |
| 13 | Did the organization have a written whistleblower policy? | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | <u> </u> | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | - } | • | l |
| _ | The organization's CEO, Executive Director, or top management official | 15a | x | |
| 2 | Characteristics and the appropriate of the appropri | | X | <u> </u> |
| В | Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | 15b | | \vdash |
| 48_ | · · · · · · · · · · · · · · · · · · · | | • | l ' |
| IOB | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | ' | x |
| | taxable entity during the year? | 16a | | <u> </u> |
| D | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | 1 | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | Į | ŀ | l |
| | exempt status with respect to such arrangements? | 16b | | L |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed None | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) | availat | le | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | |
| | Own website Another's website Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar | d fina | ncial | |
| | statements available to the public during the tax year. | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization | tion: | _ | |
| | Robb Kahl - 608-240-4170 | - | | |
| | 4702 S. Biltmore Lane, MADISON, WI 53718 | _ | | |
| 23200 12-10- | | Form | 990 | (2012) |
| | 6 | | | |

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -O in columns (Ď), (E), and (F) if no compensation was paid.

 • List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

| (A) | (B) | | | (C | C) | | | . (D) | (E) | . (F) | |
|-----------------------|--|--------------------------------|---|---------|----------------|------------------------------|----------------|----------------------|------------------------------|-----------------|--|
| Name and Title | Average | (do | Position o not check more than one ox, unless person is both an | | | than | one | Reportable | Reportable | Estimated | |
| | hours per week | offi | cer ar | as pe | rson lirect | ls bot or/trus | n an tee) | compensation from | compensation from related | amount of other | |
| | (list any | Ē | | | Γ. | | Г | the | organizations | compensation | |
| | hours for | Indevidual trustae or director | | | | - | | organization | (W-2/1099-MISC) | from the | |
| | related | 2 | 夏 | | | | | (W-2/1099-MISC) | (| organization | |
| | organizations | 1 | | | 1 | Ĕ | 1 | | | and related | |
| | below | 를 | | • | 를 | esto | <u>=</u> | ļ | | organizations | |
| | line) | 튵 | Institutonal trustee | Officer | Š | Highest compensated employee | Ē | <u>_</u> | | | |
| (1) BUGLASS, WILLIAM | 3.00 | | | | | | | | | | |
| Trustee | | X | | | L | | | 0. | 0. | 0 | |
| (2) KAHL, WILLIAM | 3.00 | | | | | | | | | | |
| Treasurer | | X | | L | | | | 0. | 0. | 0 | |
| (3) LUEDTKE, MURRAY | 3.00 | | | | | Γ | | | | | |
| Trustee | | X | | | l | 1 | | 0. | 0. | 0 | |
| (4) SCHOLZ, BARRY | 3.00 | Γ | | | | | | | | | |
| Trustee | | X | | | | | İ | 0. | . 0. | 0 | |
| (5) MCGOWAN, TERRANCE | 3.00 | Г | | | | | Г | | | | |
| Chairman | | X |] | | | İ | | 0. | 0. | 0 | |
| (6) OEHLHOF, RYAN | 3.00 | | | | | | | - | | | |
| Trustee | | X | | | l | | | 0. | 0. | 0 | |
| (7) BESSETT, RODNEY | 3.00 | Ī | | | | | | | | | |
| Trustee | | X | | ļ | | | | 0. | 0. | 0 | |
| (8) BUFFALO, STEVE | 3.00 | | | | Г | | | | | | |
| Truster | | X | | ĺ | l | | | 0. | 0. | 0 | |
| (9) WARNER, CHARLES | 3.00 | | | | | | | | | | |
| FRMR TRUSTEE | | X | | | l | | 1 | 0. | 0. | 0 | |
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CONSTRUCTION BUSINESS GROUP

Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

39-1703979

Page 8

| | | | Check if Schedule O cont | ains a response | to any question | in this Part VIII | ****** * ****** ******* * | · · · <u> </u> | <u></u> |
|--|------|----------|---|--|---------------------------------------|---|--|--|--|
| ************************************** | | ÷ 1 | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | Revenue excluded from tax under sections 512, 513, or 514 |
| ts, Grants Amounts | 1 | a | Federated campaigns | 1a | | 1.00 | , , , , , , | | 1. W |
| <u> </u> | | b | Membership dues | 1b | | | | | a tanana Tanana arawa |
| Ę., | 1 | C | Fundraising events | | | | | | |
| Giffs, ilar Ar | ł | ď | Related organizations | | · · · · · · · · · · · · · · · · · · · | | | A Think The Committee of the Committee o | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |
| 0.5 | | _ | Government grants (contribut | | | | * 3 | | are the rest of the same |
| Šiž | | | • | · | | | | \vec{j} | |
| きを | | T | All other contributions, gifts, gran | - | | | | | |
| 든통 | | | similar amounts not included abo | ve <u> 1f </u> | | | 1.37 | | 300 |
| Contributions, and Other Sim | | - | Noncash contributions included in fines | | | | | | |
| <u>3 g</u> | | h | Total. Add lines 1a-1f | | <u></u> | | | A Secondary Secondary | <u>像分配外的</u> |
| | ł | | | | Business Code | | 1 | , , | |
| ě | 2 | а | EMPLOYER CONTRI | BGENE | 900099 | 1366804. | 1366804. | | |
| ž | ĺ | ь | | | | | | | |
| 20 2 | l | _ C | | | | | | | |
| ₹ ₹ | l | <u>-</u> | | _ | | | | | |
| ڇڇ | | _ | | | | | | | |
| Program Service Revenue | 1 | | | | | | | | |
| _ | | T | All other program service reve | | | 1366804. | 3 Car 2 Car 2 | error and the | J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | Ь. | <u>g</u> | | ······································ | | 1300004. | 2 3 40 2 4 3 2 | | 1774673 |
| | 3 | | Investment income (including | | - | 7006 | | | 700 <i>c</i> |
| | | | other similar amounts) | | | 7206. | | | 7206. |
| | 4 | | Income from investment of ta | x-exempt bond p | proceeds | | | | |
| | 5 | | Royalties | | <u></u> | | | | |
| | | | | (i) Real | (ii) Personal | and the Control | 2 344 3 | The said to | |
| | 6 | а | Gross rents | | | | | | The principal start |
| | - | b | Less: rental expenses | | | | | 18 18 500 | |
| | ı | c | Rental income or (loss) | | | | 3,, | | |
| | | | Net rental income or (loss) | L | · | | · ^ · · · · | | |
| | | | | | | 1 A. 6 . 5 . 6 . 7 | £ 1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | · | |
| | 7 | a | Gross amount from sales of | (i) Securities | (ii) Other 10761. | | | | |
| | | | assets other than inventory | <u> </u> | 10/01. | | | Aught to the | |
| | | b | Less: cost or other basis | Į. | | 1 - | 66, 1 | | |
| | | | and sales expenses | | 0. | | | | 1 3 6 mg |
| | | C | Gain or (loss) | L | 10761. | | | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 | |
| | | d | Net gain or (loss) | | <u></u> | 10761. | | | 10761. |
| • | | | Gross income from fundralsin | | | \$ 15 P. S. | | | |
| venue | 1 | | including \$ | of | | | | | |
| Š | | | contributions reported on line | 1c), See | | | | | |
| Œ | | | Part IV, line 18 | | | | | | |
| Other Re | | h | Less: direct expenses | | | 1 | - | · . | . * * . |
| ō | | | Net income or (loss) from fund | | | 1 | ić e | ' | |
| | | | | | | | | • | \ \ \ |
| | ٦ | a | Gross income from gaming ac | | 1 | | | | |
| | | | Part IV, line 19 | | | | | | # 8 g1 F |
| | 1 | | · | b | <u> </u> | | , , , , | ٠. | |
| | | | Net income or (loss) from gam | _ | <u></u> | | | | |
| | 10 | a | Gross sales of inventory, less | | 1 | 111. 111. | | | 107 |
| | 1 | | and allowances | .,,,, a | | | |]. | |
| | 1 | b | Less: cost of goods sold | b | | | | | The second secon |
| | | | Net income or (loss) from sale | | |] ' | " " | | L |
| | | | Miscellaneous Revenu | | Business Code | | ••• | | |
| | 11 | я | | | ` | 1 | 1 | · | • |
| | | a b | | | | | i | | |
| | | | | | | | | | |
| | | ت. | All -4b | | | - | | | |
| | | đ | All other revenue | | | | <u> </u> | | |
| | | 0 | Total. Add lines 11a-11d | | | 1204004 | 120000 | | 10000 |
| nance. | 12 | _ | Total revenue. See instructions. | ····· | <u></u> | 1384771. | 1366804. | 0. | 17967. |
| 23200 12-10 | - 12 | | | | | | | | Form 990 (2012) |

| | rt IX Statement of Functional Expense | | | | |
|----------------|--|-----------------------------|------------------------------|-------------------------------------|--------------------------------|
| Sect | ion 501(c)(3) and 501(c)(4) organizations must comp | plete all columns. All othe | er organizations must (| complete column (A). | |
| | Check if Schedule O contains a respon | | Part IX | | <u></u> |
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | 106060. | | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | | | 73 × 2 | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 5 | Benefits paid to or for members 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) Other salaries and wages | 385306. | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 139721. | | | |
| 9 | Other employee benefits | 98424. 31923. | | | |
| 11 a b | Fees for services (non-employees): Management | 18398. | | | |
| c d | Accounting | 15250. | 9 | | |
| e f g | Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, | | *** - 1 | | |
| 12 | column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion | 14443. 9239. | | | |
| 13 14 15 | Office expenses Information technology | 71614. | | | |
| 16 17 | Royalties Occupancy Travel | 45029. 34092. | | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings | 28114. | | | |
| 19 20 21 | Interest Payments to affiliates Payments and filiates | 20114. | | | |
| 22 23 | Depreciation, depletion, and amortization | 30506. 19698. | | | |
| 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 0.) | | | | |
| a b c | REIMB SALARIES AND TAXE | 94999. | | | |
| d | All other expenses | | | | |
| 25 26 | Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization | 1142816. | | | |
| | reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

| Part A | Datatice Street | | | | |
|----------------------------------|--|---------------------------------------|---|-------------|--|
| | Check if Schedule O contains a response to any question | in this Part X | <u></u> | | |
| | | | (A) Beginning of year | | (B) End of year |
| 1 | Cash - non-interest-bearing | | | 1 | |
| 2 | Savings and temporary cash investments | | 1066640. | 2 | 1294030. |
| 3 | Pledges and grants receivable, net | | | 3 | |
| 4 | Accounts receivable, net | | 158680. | 4 | 164492 |
| 5 | Loans and other receivables from current and former offic | | 67 4. 1. 2. 2. 2. 2. | \$ 7 | |
| Į. | trustees, key employees, and highest compensated employees | 3 4 24 | 152 | | |
| | Part II of Schedule L | - | , ,,,, | 5 | ' ' ' ' ' |
| 6 | Loans and other receivables from other disqualified perso | | | | 14 grant 12 mg-3 |
| | section 4958(f)(1)), persons described in section 4958(c)(3 | • | | ′ຸ• | |
| | employers and sponsoring organizations of section 501(c) | - | | ' . | |
| 1 | employees' beneficiary organizations (see instr). Complete | • • • | • | 6 | ' |
| } 7 | Notes and loans receivable, net | | | 7 | |
| 7 8 | Inventories for sale or use | | | 8 | |
| , 9 | Prepaid expenses and deferred charges | | 21483. | _ | 11276 |
| _ | Land, buildings, and equipment: cost or other | | , , , | <u> </u> | |
| ''' | basis. Complete Part VI of Schedule D 10a | 285637. | | `. | 1 |
| ١, | Less: accumulated depreciation 10b | 204271. | l' 16 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | 10c | 01266 |
| 111 | Investments - publicly traded securities | | | 11 | |
| 12 | Investments - other securities. See Part IV, line 11 | | | 12 | ···- |
| 13 | Investments - program-related. See Part IV, line 11 | | | 13 | |
| 14 | | | | 14 | |
| 15 | • | | | 15 | |
| 16 | Other assets. See Part IV, line 11 | | 1306561. | 16 | 1551164 |
| 17 | Total assets. Add lines 1 through 15 (must equal line 34) | | 22866. | | 25514 |
| 18 | Accounts payable and accrued expenses | | | 18 | 25514 |
| 19 | Grants payable | · ··· ··· · · · · · · · · · · · · · · | | 19 | |
| 1 | Deferred revenue | | | | |
| 20 | Tax-exempt bond liabilities | 0 | | 20 | |
| 21 22 | Escrow or custodial account liability. Complete Part IV of | ** | | 21 | |
| 22 | Loans and other payables to current and former officers, | | | ₹ ` | |
| | key employees, highest compensated employees, and dis | | | · | |
| | | | | 22 | · |
| 23 | Secured mortgages and notes payable to unrelated third | | | 23 | |
| 24 | Unsecured notes and loans payable to unrelated third par | | | 24 | |
| 25 | Other liabilities (including federal income tax, payables to | | | | |
| | parties, and other liabilities not included on lines 17-24). O | • | | l | |
| | Schedule D | | 22066 | 25 | 25514 |
| 26 | Total liabilities. Add lines 17 through 25 | | 22866. | 26 | 25514 |
| | Organizations that follow SFAS 117 (ASC 958), check I | nere 📂 🕰 and | | | |
| 27 28 29 30 31 32 | complete lines 27 through 29, and lines 33 and 34. | | 1102605 | | 1505650 |
| 27 | Unrestricted net assets | | 1283695. | 27 | 1525650 |
| 28 | Temporarily restricted net assets | | | 28 | |
| 29 | Permanently restricted net assets | | | 29 | · · · · · · · · · · · · · · · · · · · |
| | Organizations that do not follow SFAS 117 (ASC 958), | check here 🕨 📖 | | Ι΄ | I |
| j | and complete lines 30 through 34. | | , | ' | |
| 30 | Capital stock or trust principal, or current funds | | <u></u> | 30 | |
| 31 | Paid-in or capital surplus, or land, building, or equipment f | | | 31 | |
| 32 | Retained earnings, endowment, accumulated income, or | | 48884 | 32 | 4545254 |
| 2 33 | Total net assets or fund balances | | 1283695. | 33 | 1525650 |
| 34 | Total liabilities and net assets/fund balances | ····· | 1306561. | 34 | 1551164. |

| | 990 (2 | | 39-170 | 3979 | Pa | ge 12 |
|------------|--------|--|------------|------------------|----------------|-------------|
| Pai | t 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 | | | 71. |
| 2 | Total | expenses (must equal Part IX, column (A), line 25) | 2 | | | <u> 16.</u> |
| 3 | | nue less expenses. Subtract line 2 from line 1 | 3 | | 419 | |
| 4 | Net a | ssets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 128 | <u> 836</u> | 95. |
| 5 | Net u | nrealized gains (losses) on investments | 5 | | | |
| 6 | Dona | ted services and use of facilities | 6 | | | |
| 7 | Inves | tment expenses | 7 | | | |
| 8 | Prior | period adjustments | 8 | | | |
| 9 | Other | r changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net a | ssets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | • | | | |
| | | nn (B)) | 10 | 15 | <u> 256</u> | <u>50.</u> |
| Pai | t XII | Financial Statements and Reporting | | | | _ |
| | | Check if Schedule O contains a response to any question in this Part XII | | | | X |
| | | | | \Box | Yes | No |
| 1 | | unting method used to prepare the Form 990: L Cash X Accrual C Other | | | | |
| | If the | organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | О. | | | 8.0 |
| 2a | Were | the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | X |
| | If "Ye | s," check a box below to indicate whether the financial statements for the year were compiled or reviewed | l on a | 14 | | 1.3. |
| | separ | rate basis, consolidated basis, or both: | | | # | * 12 |
| | | Separate basis | | | 1 2 | |
| þ | | the organization's financial statements audited by an independent accountant? | | 2b | X | |
| | | s," check a box below to indicate whether the financial statements for the year were audited on a separat | e basis, | | () | , , |
| | | olidated basis, or both: | | | , | • |
| | | Separate basis | | , | <u>بَ</u> ﴿ وَ | 4.7 |
| C | | s" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | | : | ٠٠٠ ۽ | . 4 |
| | | w, or compilation of its financial statements and selection of an independent accountant? \dots | | 2c | X | |
| | | organization changed either its oversight process or selection process during the tax year, explain in Scho | | [. `.] | • | · |
| 3 a | | result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir | igle Audit | $[\cdot, \cdot]$ | ٠, | |
| | Act a | nd OMB Circular A-133? | ••••• | 3a | | X |
| b | | s," did the organization undergo the required audit or audits? If the organization did not undergo the requi | | | | |
| | or auc | dits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |
| | | | | 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

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

Open to Public

• Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. **Employer identification number** Name of organization CONSTRUCTION BUSINESS GROUP 39-1703979 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities **▶**\$_ 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (a) Name (b) Address (c) EIN (e) Amount of political contributions received and filing organization's promptly and directly funds. If none, enter -0-. delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2012

| Schedule C (Form 990 or 990-EZ) 2012 | CONSTRUCTI | ON BUSINESS G | ROUP | 39-1 | 703979 Page 2 |
|--|---|--|--|---|----------------------|
| Part II-A Complete if the org | | empt under section | 501(c)(3) and fil | ed Form 5768 | |
| (election under sec | | <u> </u> | | | |
| | - | ffiliated group (and list in F | art IV each affiliated | group member's nam | e, address, EIN, |
| | e of excess lobbying | . . | | | |
| B Check Lift the filing organiza | tion checked dox A | and "limited control" provi | sions apply. | (a) Filing | (b) Affiliated group |
| | ts on Lobbying Exp ditures" means amo | enditures ounts paid or incurred.) | | organization's totals | totals |
| 1a Total lobbying expenditures to influ | uence public opinior | (grass roots lobbying) | | | |
| b Total lobbying expenditures to influ | uence a legislative b | ody (direct lobbying) | | | |
| c Total lobbying expenditures (add li | nes 1a and 1b) | | | | |
| d Other exempt purpose expenditure | | | | | |
| Total exempt purpose expenditure | s (add lines 1c and | 1d) | | | |
| f Lobbying nontaxable amount. Enter | | he following table in both | columns. | | |
| if the amount on line 1e, column (a) o | r (b) is: The lo | obbying nontaxable amou | ınt is: | | |
| Not over \$500,000 | 20% (| of the amount on line 1e. | | 2 | |
| Over \$500,000 but not over \$1,000 | | 000 plus 15% of the exces | s over \$500,000. | ٠, | |
| Over \$1,000,000 but not over \$1,5 | | 000 plus 10% of the exces | | , , , , , , | |
| Over \$1,500,000 but not over \$17, | | 000 plus 5% of the excess | over \$1,500,000. | 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Over \$17,000,000 | \$1,00 | 0,000. | | | |
| | ro on either line 1h o year? 4-Year A ations that made a | | on file Form 4720 ection 501(h) do not have to com | plete all of the five | Yes No |
| | Lobbying Exp | enditures During 4-Year | Averaging Period | | |
| Calendar year (or fiscal year beginning in) | (a) 2009 | (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 | | | | <u> </u> | |
| | | | | | |
| d Grassroots nontaxable amount | | | | | |
| Grassroots ceiling amount | , | | | | |
| (150% of line 2d, column (e)) | | | | | |
| | |] | | | |
| f Grassroots lobbying expenditures | | <u> </u> | | L | |
| | | | | Schedule C (Form | 990 or 990-EZ) 2012 |

Schedule C (Form 990 or 990-EZ) 2012 CONSTRUCTION BUSINESS GROUP 39-1703979 Page 3

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

| 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (Include compensation in expenses reported on lines 1c through 1i)? | Yes | No | Am | ount |
|--|-----------------|------------|-----------------|-------------|
| local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? | * * * ; | | | |
| local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? | * * * 7 | | 1, 1, 1, | Y |
| or referendum, through the use of: a Volunteers? | | 1 | | |
| a Volunteers? | | | 31,000 | |
| | 1 | Ì | * * 1 | |
| | | | 1.5 | . 潜流等 |
| c Media advertisements? | | | | |
| d Mailings to members, legislators, or the public? | | | | |
| 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 | | | | |
| d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | 14 |
| Part III-A Complete if the organization is exempt under section 501(c)(4), sect | ion 501(c |)(5), or s | ection | - |
| 501(c)(6). | | | | |
| | | | Yes | No |
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | 1 | X | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | | X |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | | | | X |
| answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures) | | 1 | | |
| expenses for which the section 527(f) tax was paid). | | | | |
| a Current year | | 2a | | |
| b Carryover from last year | | | | |
| c Total | | | | |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | | | |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex | | | | |
| does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and | political | | | |
| expenditure next year? | | . 4 | , | |
| 5 Taxable amount of lobbying and political expenditures (see instructions) | | 5 | | |
| | | | • | |
| 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; Fand Part II-B, line 1. Also, complete this part for any additional information. | Part II-A (affi | | o list); Part I | I-A, line 2 |
| | | | | |
| | | | | |
| | | | - | |
| | | | | |
| | Caha- | ule C (Ec- | n 990 or 99 | n.F7\ 201 |

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

CONSTRUCTION BUSINESS GROUP

Employer identification number

| Pa | rt I Organizations Maintaining Donor Advise | | or Accounts. Complete if the |
|-------|--|--|---|
| | organization answered "Yes" to Form 990, Part IV, line | | |
| | - | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate contributions to (during year) | | |
| 3 | Aggregate grants from (during year) | | |
| 4 | Aggregate value at end of year [| | |
| 5 | Did the organization inform all donors and donor advisors in | writing that the assets held in donor advis | ed funds |
| | are the organization's property, subject to the organization's | exclusive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | | |
| | for charitable purposes and not for the benefit of the donor of | or donor advisor, or for any other purpose | conferring |
| | impermissible private benefit? | | Yes No |
| Pa | rt II Conservation Easements. Complete if the org | | |
| 1 | Purpose(s) of conservation easements held by the organization | | |
| | Preservation of land for public use (e.g., recreation or e | | torically important land area |
| | Protection of natural habitat | Preservation of a certi | - • |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | fied conservation contribution in the form | of a conservation easement on the last |
| _ | day of the tax year. | THE CONTROL CONTRIBUTION IN THE POINT | or a conservation easement on the last |
| | day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conceniation assembnts | | |
| _ | Total agrees restricted by agreements | | |
| b | Total acreage restricted by conservation easements | · ···································· | 2b |
| C | Number of conservation easements on a certified historic str | | |
| d | | | |
| _ | listed in the National Register | | |
| 3 | Number of conservation easements modified, transferred, rel | leased, extinguished, or terminated by the | organization during the tax |
| _ | year > | | |
| 4 | Number of states where property subject to conservation eas | | |
| 5 | Does the organization have a written policy regarding the per | | |
| _ | violations, and enforcement of the conservation easements it | | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | _ | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and | _ | |
| 8 | Does each conservation easement reported on line 2(d) above | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| | and section 170(h)(4)(B)(ii)? | | |
| 9 | In Part XIII, describe how the organization reports conservation | | |
| | include, if applicable, the text of the footnote to the organizat | tion's financial statements that describes | the organization's accounting for |
| | conservation easements. | | |
| Pa | rt III Organizations Maintaining Collections of | f Art, Historical Treasures, or O | ther Similar Assets. |
| | Complete if the organization answered "Yes" to Form | 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under SFAS 116 (AS | C 958), not to report in its revenue staten | nent and balance sheet works of art, |
| | historical treasures, or other similar assets held for public exh | nibition, education, or research in furthera | nce of public service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that describ | | |
| b | If the organization elected, as permitted under SFAS 116 (AS | C 958), to report in its revenue statement | and balance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, ed | | |
| | relating to these items: | • | ,, |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | ▶ \$ |
| | | | |
| 2 | If the organization received or held works of art, historical treatments | asures, or other similar assets for financia | l gain, provide |
| _ | the following amounts required to be reported under SFAS 1: | | . g(provide |
| а | B | · · · · · · · · · · · · · · · · · · · | > \$ |
| | Accests included in Form COO. Dark V | | L A |
| | Assets included in Form 990, Part X | ······································ | |
| LHA | For Paperwork Reduction Act Notice, see the Instructions | ter Form 000 | Oakadul - D/F 000 004 |
| 23205 | | ior Form 990. | Schedule D (Form 990) 2012 |

| Sche | dule D (Form 990) 2012 CONSTRU | CTION BUSI | NESS GR | OUP | | 39-1 | 703979 | Pag | _{le} 2 |
|-------|--|-----------------------------|------------------|---|--------------|----------------------|---------------|--------------|-----------------|
| Par | t III Organizations Maintaining C | Collections of A | rt, Historic | al Treasures, e | or Other | Similar As | sets(contin | ued) | |
| 3 | Using the organization's acquisition, accessi | ion, and other record | ds, check any | of the following tha | t are a sig | nificant use of i | ts collection | items | |
| | (check all that apply): | | | | | | | | |
| а | Public exhibition | | b Loan | or exchange progra | ams | | | | |
| b | Scholarly research | | Other | | | | | | |
| C | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's c | ollections and expla | in how they fu | rther the organizati | on's exem | pt purpose in F | Part XIII. | | |
| 5 | During the year, did the organization solicit of | | | | | | | | |
| | to be sold to raise funds rather than to be m | | | | | | Yes | | No |
| Par | t IV Escrow and Custodial Arran | | | | | | V, line 9, or | | _ |
| | reported an amount on Form 990, Pa | rt X, line 21. | _ | | | | | | |
| 1a | Is the organization an agent, trustee, custod | ian or other interme | diary for contri | butions or other as | sets not in | cluded | | | |
| | on Form 990, Part X? | | | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII | | | | | | | | |
| | | • | J | | | | Amount | | _ |
| C | Beginning balance | | | | | 1c | - | | |
| | Additions during the year | | | | | 1d | | | |
| | Distributions during the year | | | | | 1e | | | |
| f | Ending balance | | | | | 1f | | | |
| 2a | Did the organization include an amount on F | orm 990, Part X, line | 217 | | | | Yes | | No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | | |
| Pa | t V. Endowment Funds. Complete | if the organization a | nswered "Yes' | to Form 990, Part | IV, line 10 | | | | |
| | | (a) Current year | (b) Prior ye | | |) Three years ba | ck (e) Four | years ba | ack |
| 1a | Beginning of year balance | | | | | | | | |
| ь | Contributions | | | | | | | | |
| C | Net investment earnings, gains, and losses | | | | | | | | |
| đ | Grants or scholarships | | | | | | | | |
| | Other expenditures for facilities | | | | | | | | |
| | and programs | <u> </u> | | | | | | | |
| f | Administrative expenses | | | | | | | | |
| g | End of year balance | | | | | | | | |
| 2 | Provide the estimated percentage of the cur | rent year end balan | ce (line 1g, col | umn (a)) held as: | | | | | |
| a | Board designated or quasi-endowment | _ | % | | | | | | |
| b | Permanent endowment | % | _ | | | | | | |
| C | Temporarily restricted endowment ▶ | % | | | | | | | |
| | The percentages in lines 2a, 2b, and 2c show | uld equal 100%. | | | | | | | |
| 3a | Are there endowment funds not in the posse | ession of the organiz | ation that are | held and administe | ered for the | organization | _ | | |
| | by: | | | | | | | Yes i | No |
| | (i) unrelated organizations | | | ******** ****************************** | | | 3a(i) | | |
| | (ii) related organizations | | | | | | 3a(ii) | | |
| b | If "Yes" to 3a(ii), are the related organization | s listed as required (| on Schedule R | ı? | | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | | | | _ | | | | _ |
| Par | t VI Land, Buildings, and Equipn | nent. See Form 99 | 0, Part X, line | 10. | | | | | |
| | Description of property | (a) Cost or obasis (investi | |) Cost or other basis (other) | | umulated eciation | (d) Book | value | |
| 1a | Land | | | | | | | | |
| | Buildings | | | | | | | | |
| | Leasehold improvements | | | | | | | | |
| d | Equipment | | | 235733. | | 156042. | | 7969 | |
| | Other | | | 49904. | | 48229. | | 167 | |
| Total | . Add lines 1a through 1e. (Column (d) must e | equal Form 990, Par | t X, column (B) | , line 10(c).) | | | | <u> 3136</u> | 6. |
| | | | | | | | _ | | |

CONSTRUCTION BUSINESS GROUP

232053 12-10-12

| Schedule D (Form 990) 2012 CONSTRUCTION BUSINESS GROUP | 39-1 | 703979 Page 4 |
|--|----------------|------------------------|
| Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per I | Return | |
| 1 Total revenue, gains, and other support per audited financial statements | 1 | 1384771. |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | -5. | |
| a Net unrealized gains on investments | | |
| b Donated services and use of facilities 2b | | |
| c Recoveries of prior year grants |], | |
| d Other (Describe in Part XIII.) |] : [| _ |
| e Add lines 2a through 2d | 20 | 0. |
| 3 Subtract line 2e from line 1 | 3 | 1384771. |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 1:1 | |
| a Investment expenses not included on Form 990, Part VIII, line 7b | <i>▎</i> ૿ૼ. ┃ | |
| b Other (Describe in Part XIII.) | ∤ | 0 |
| c Add lines 4a and 4b | 4c | 0. 1384771. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per | 5 | |
| <u></u> | T | 1142816. |
| 1 Total expenses and losses per audited financial statements | 1 | 1142010. |
| a Donated services and use of facilities | | |
| b Prior year adjustments 2b | 1 | |
| c Other losses | 1. `` | |
| d Other (Describe in Part XIII.) | 1.1 | |
| e Add lines 2a through 2d | 2e | 0. |
| 3 Subtract line 2e from line 1 | 3 | 1142816. |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: | | - |
| a Investment expenses not included on Form 990, Part VIII, line 7b | 7 | |
| b Other (Describe in Part XIII.) | | |
| c Add lines 4a and 4b | 4c | 0. |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 1142816. |
| Part XIII Supplemental Information | | |
| Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines | | ; Part V, line 4; Part |
| X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information of the state of th | | |
| Part X, Line 2: AS OF MAY 31, 2013, THERE WERE NO UNCERTAIN | POST. | LIONS |
| TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION | 1 OF 2 | A |
| LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMEN | TS. | THE PLAN |
| IS SUBJECT TO ROUTINE AUDITS BY THE TAXING JURISDICTIONS; HO | WEVE | R THERE |
| ARE CURRENTLY NO AUDITS FOR ANY TAX PERIOD IN PROGRESS. AT | MAY | 31, 2013 |
| THE PLAN IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR | R YEA | RS PRIOR |
| TO THE FISCAL YEAR ENDED MAY 31, 2010. | | |

Schedule D (Form 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I General Information on Grants and Assistance

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

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. CONSTRUCTION BUSINESS GROUP

Employer identification number 39-1703979

| | 2 | |
|--|--|--|
| | X Yes | |
| 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | criteria used to award the grants or assistance? | |

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 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Commendation

| recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. | 5,000. Part II can | be duplicated if additi | ional space is need | led. | | | |
|---|--------------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| BUILDING A STRONGER WI PO BOX 66 WAUNAKEE, WI 53597 | 26-0640889 | 501 C 4 | 25000. | 0 | | | DRG FOR PUB EDUC ON JOBS HEALTH TAX |
| JOBS FIRST COALITION PO BOX 2071 BROOKFIELD, WI 53008 | 27-0755923 | 501 C 4 | 45000. | 0. | | | PUB EDUC FOR CREAT & RETENT OF JOBS |
| GREATER WISCONSIN COMMITTEE PO BOX 2719 MADISON, WI 53701 | 20-0938084 | 501C 4 | 25000. | 0 | | | DRG EDUC PUBLIC ON ECON,HEALTH, SOC |
| AMERICANS FOR JOB SECURITY 107 SOUTH WEST STREET, PMB 551 ALEXANDRIA, VA 22314 | 52-2062978 | 501 C 6 | 10000. | 0 | | | ORG FOR PUB EDUC ON JOBS R ECON |
| | | | | | | | |
| | | | | | | | |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | nd government or | ganizations listed in th | | | | | 0 |

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

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

Page 2 Schedule I (Form 990) (2012) (f) Description of non-cash 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. (book, FMV, appraisal, other) 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. Part I, Line 2: THE ORGANIZATION PROVIDES ASSISTANCE TO VARIOUS ORGANIZATIONS THROUGH DONATIONS DURING THE YEAR. DONATIONS ARE APPROVED BY THE GOVERNING BODY UPON REVIEW OF SUBMITTED DONATION REQUESTS FROM VARIOUS (d) Amount of non-cash assistance (c) Amount of cash grant CONSTRUCTION BUSINESS GROUP (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2012)

| Part III | Grants and Other ORGANIZATIONS Schedule I, 232102 12-18-12

39-1703979

SCHEDULĘ O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service 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:

Name of the organization

CONSTRUCTION BUSINESS GROUP

Employer identification number

| CONSTRUCTION BUSINESS GROUP | 39-1/039/9 |
|---|--------------------|
| Form 990, Part III, Line 4d, Other Program Services: | |
| TO PROVIDE JOINT LABOR-MANAGEMENT ACTIVITIES CONDUCTED BY | AN AREA AND |
| INDUSTRY-WIDE COMMITTEE DESIGNED TO IMPROVE LABOR-MANAGEM | ENT |
| RELATIONSHIPS, JOB SECURITY, COMPETITIVENESS, PRODUCTIVIT | Ψ, |
| ORGANIZATIONAL EFFECTIVENESS, ECONOMIC DEVELOPMENT AND SP | ECIFICALLY TO |
| ENSURE THAT EMPLOYERS PAY THEIR EMPLOYEES THE APPLICABLE | CERTIFIED WAGE |
| BENEFIT RATES AND FOR SUCH OTHER PURPOSES AS MAY BE LAWFU | LLY SOUGHT AND |
| ACHIEVED BY THE PARTIES. | |
| | |
| Form 990, Part VI, Section A, line 6: Line 6 explanation | - THE |
| ASSOCIATION'S MEMBERS CONSIST OF PARTICIPANTS WHO BENEFIT | FROM THE IMPROVED |
| COMMUNICATION BETWEEN LABOR AND MANAGEMENT, WHO MAKE DECI | SIONS THAT AFFECT |
| THEIR WORKING LIVES. | |
| | |
| Form 990, Part VI, Section B, line 11: THE TRUSTEES AUTHO | RIZE THE |
| EXECUTIVE DIRECTOR AND DESIGNATED TRUSTEE TO REVIEW THE F | FORM 990 BEFORE IT |
| IS FILED. | |
| | |
| Form 990, Part VI, Section B, Line 12c: PER THE ORGANIZAT | TION'S GOVERNING |
| DOCUMENT IN NO EVENT MAY THE DIRECTORS OR ANY FIDUCIARY O | OF CBG ENGAGE IN |
| "PROHIBITED TRANSACTIONS". ANY TRANSACTIONS THAT MAY BE | POTENTIAL |
| CONFLICTS OF INTEREST OR POTENTIAL PROHIBITED TRANSACTION | NS ARE REQUIRED TO |
| BE BROUGHT TO THE ATTENTION OF THE ENTIRE BOARD FOR REVIE | W AND DISCUSSION |
| WITH THE ORGANIZATION LEGAL COUNSEL | |
| | |

Form 990, Part VI, Section B, Line 15: EACH EMPLOYEE COMPENSATION IS

LHA: For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

Form .8868

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No. 1545-1709

| | - c.c cpp | | | | |
|--|------------|--------------------------------------|--------------|----------------------|-----------------|
| • If you are filing for an Automatic 3-Month Extension, comple | | | | | ▼ X |
| If you are filing for an Additional (Not Automatic) 3-Month Ex | - | | • | | |
| 20 110 Complete 1 2 11 11 2 11 11 2 11 11 2 11 11 2 11 11 | | atic 3-month extension on a previous | • | | omoration |
| Electronic filing (e-file). You can electronically file Form 8868 if y required to file Form 990-T), or an additional (not automatic) 3-mo | | | | | |
| of time to file any of the forms listed in Part I or Part II with the ex | | - | | | |
| Personal Benefit Contracts, which must be sent to the IRS in page | - | | | | |
| visit www.irs.gov/efile and click on e-file for Charities & Nonprofits | | (356 matridations). For more details | A1 11 10 010 | on or no niming of a | 110 1011.1, |
| Part I. Automatic 3-Month Extension of Time | | submit original (no copies nee | eded). | | |
| A corporation required to file Form 990-T and requesting an autor | | | | _ | |
| Part I only | | | | | |
| All other corporations (including 1120-C filers), partnerships, REM to file income tax returns. | ICs, and t | rusts must use Form 7004 to reques | t an exter | nsion of time | |
| Type or Name of exempt organization or other filer, see instru | ctions. | | Employe | r identification n | umber (EIN) or |
| CONSTRUCTION BUSINESS GROUP | P | | | 39-1703 | 979 |
| File by the due date for filing your 4702 S. Biltmore Ln. | ee instruc | tions. | Social se | curity number (S | SN) |
| City, town or post office, state, and ZIP code. For a formation Madison, WI 53718 | oreign add | Iress, see instructions. | | | |
| Enter the Return code for the return that this application is for (file | e a separa | te application for each return) | | | 01 |
| Application | Return | Application | | | Return |
| ls For | Code | Is For | | | Code |
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | | | 07 |
| Form 990-BL | 02 | Form 1041-A | | | . 08 |
| Form 4720 (individual) | 03 | Form 4720 | | | 09 |
| Form 990-PF | 04 | Form 5227 | | | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | | | 12 |
| Robb Kahl | T-: | WARTON WE F | 2710 | | |
| • The books are in the care of \searrow 4702 S. Biltmon | ге пал | | 3/10 | | |
| Telephone No. ► 608-240-4170 | - ! 41 11- | FAX No. D | _ | | - — |
| If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digit | | | | | , P L |
| . \square | 7 | | | _ | - |
| box . If it is for part of the group, check this box . I request an automatic 3-month (6 months for a corporation | | | _ | 1012 II IO GYLGIISIO | 11 13 101. |
| January 15, 2014 , to file the exemp | | | | The extension | |
| is for the organization's return for: | | | | 1110 011101101011 | |
| calendar year or | | | | | |
| ► X tax year beginning JUN 1, 2012 | , an | d ending MAY 31, 2013 | | | |
| 2 If the tax year entered in line 1 is for less than 12 months, or | | | Final retur | _ m | |
| Change in accounting period | | | | | |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, | or 6069, e | enter the tentative tax, less any | | | |
| nonrefundable credits. See instructions. | | | 3a | \$ | 0. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, | enter any | refundable credits and | | | _ |
| estimated tax payments made. Include any prior year overg | | | 3b_ | \$ | 0. |
| Balance due. Subtract line 3b from line 3a. Include your pa by using EFTPS (Electronic Federal Tax Payment System). | • | | 3c | \$ | 0. |
| Caution. If you are going to make an electronic fund withdrawal | | | | EO for payment | instructions. |
| LHA For Privacy Act and Paperwork Reduction Act Notice, | | | - | | 3 (Rev. 1-2013) |
| 223841 01-21-13 | | | | | |
| | | 24 | | | |