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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

nterna	Revenue	Service	Information about Form 990 and its instructions is at www.irs.gov/form990		inspection
A Fo	r the 20	013 calend	dar year, or tax year beginning JUN 1, 2013 and ending MAY 31,		
3 Ch app	eck if olicable.	C Name o	of organization D Employer	r identifica	ation number
	Address change	CONS	STRUCTION BUSINESS GROUP		
	Name change	Doing E	Business As	39-17	03979
	Initial return	Numbe	r and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephon	e number	
	Termin- ated	4702	2 S. Biltmore Ln.	(608)	240-4170
ــــــا	Amended return		town, state or province, country, and ZIP or foreign postal code	ts \$	1,649,088.
	Applica- Ition pending	Madi	Lson, WI 53718 H(a) Is this a	ı group ret	
	pending			ordinates?	
			as C above H(b) Are all sul		
		pt status:			st. (see instructions)
		► N/A	H(c) Group		
		ganization:		- 334 M	State of legal domicile: WI
Pal		Summary		AENT.	
9	1 Br	refly descri	be the organization's mission or most significant activities: INDUSTRY ADVANCEM	11714 1	
Activities & Governance	•	anali thin h	ox In the organization discontinued its operations or disposed of more than 25% of	ite net acc	eate
Ver			ox printing in the organization discontinued its operations of disposed of more than 25% of operations of the governing body (Part VI, line 1a)	3	8
යි [idependent voting members of the governing body (Part VI, line 1b)	4	8
8			r of individuals employed in calendar year 2013 (Part V, line 2a)	5	9
iţi			r of volunteers (estimate if necessary)	6	0
흉			ed business revenue from Part VIII, column (C), line 12	7a	0.
4			d business taxable income from Form 990-T, line 34	7b	0.
			Prior Yea	ar	Current Year
6	8 C	ontribution	s and grants (Part VIII, line 1h)	0.	0.
ğ	9 Pi	rogram ser	vice revenue (Part VIII, line 2g)		1,627,493.
Revenue	10 in	vestment i	ncome (Part VIII, column (A), lines 3, 4, and 7d)	,967.	21,595.
<u> </u>	11 0	ther revenu	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 To	otal revenu	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,649,088.
	13 G	irants and s	similar amounts paid (Part IX, column (A), lines 1-3)	,060.	77,005.
	14 B	enefits paid	d to or for members (Part IX, column (A), line 4)	0.	0.
S	15 S	alaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	,374.	893,885.
Expenses			fundraising fees (Part IX, column (A), line 11e)	0.	0.
Š			ising expenses (Part IX, column (D), line 25)	-303	300 606
	1		1 140	,382.	390,686.
	ſ	-	ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	,816. ,955.	1,361,576.
드였	19 R	levenue les			
Net Assets or Fund Balances					End of Year 1,875,042.
Sag	20 T		(9)	,514.	61,880.
E et	21 T		es (Part X, line 26) or fund balances. Subtract line 21 from the 20 AN 1 6 2015 O 1,525		1,813,162.
ئظر	art II		ire Block	70301	2,020,2020
Clind	er penalt		y, I declare that I have examined this return, including accompanying schedules and statements, and to the	e best of m	v knowledge and belief, it is
ะนั้นe	. correct	and comple	ete. Daclaration of preparer other than officer; is based on all information of which preparer has any know	ledge.	
5	T			118/1	,
Sig Her	n	Signat	ure proficer Dat	e // 	 -
Her	e	N R	obb B Kanl, Executive Director		
T		Type o	or print name and title		······································
.		Print/Type p	reparer's name Preparer's signature Date	Check	PTIN
∉ Pai			BILKEY (1/5/15	if self-employe	
		Firm's name	CALIBRE CPA GROUP PLLC	n's EIN 🛌	47-0900880
⊃Use	Only	Firm's addre			
ਤੌ			CHICAGO, IL 60661-141 Pho	one no.31	26550037
Ma	v the IR	S discuss	this return with the preparer shown above? (see instructions)		X Yes No

art			X
	The organization undertake any significant program services are significant changes in how it conducts, any program services? INDUSTRY ADVANCEMENT Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E2? If 'Yes,' describe these new services on Schedule O. Did the organization undertake any significant program services are significant changes in how it conducts, any program services? If 'Yes,' describe these changes on Schedule O. Did the organization's program service accomplishments for each of its three largest program services, as meas section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the revenue, if any, for each program service reported. (Code		
-			
	Did the organization undertake any significa	nt program services during the year which w	ere not listed on
	f "Yes," describe these new services on Sc		Yes X No
	If "Yes," describe these changes on Schedu	ule O.	
	Section 501(c)(3) and 501(c)(4) organization	s are required to report the amount of grants	
	TO PROVIDE JOINT LABOR INDUSTRY-WIDE COMMITTE RELATIONSHIPS, JOB SECONGANIZATIONAL EFFECTS ENSURE THAT EMPLOYERS BENEFIT RATES AND FOR	R-MANAGEMENT ACTIVITES EE DESIGNED TO IMPROVE CURITY, COMPETITIVENESS EVENESS, ECONOMIC DEVEL PAY THEIR EMPLOYEES THE SUCH OTHER PURPOSES AS	CONDUCTED BY AN AREA AND LABOR-MANAGEMENT , PRODUCTIVITY, OPMENT AND SPECIFICALLY TO E APPLICABLE CERTIFIED WAGE
)	(Code) (Expenses \$	including grants of \$) (Revenue \$
	(Code) (Expenses \$	including grants of \$) (Revenue \$
		cruie ())	
4d	Other program services (Describe in Scher (Expenses \$	ncluding grants of \$	(Revenue \$

Form 990 (2013) CONSTRUCTION BUSINESS GROUP
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		}	
	If "Yes," complete Schedule A	_1		X
	Is the organization required to complete Schedule B, Schedule of Contributors	2		X
	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
	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			
	sımılar amounts as defined ın Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
	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 I	6		х
	Did 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	7		х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			ĺ
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			7.
10	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, VII, VIII, IX, or X	.,		
	as applicable.			
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			x
С	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b		
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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			T
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
θ	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	110		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	├ ──
124	Schedule D, Parts XI and XII	12a	x	ł
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	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,	1	l	1
	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	1	x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		 	+=
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u>L</u> _	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? 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,			X
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17	+	+^-
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	 "	f	†
-	complete Schedule G, Part III	19	<u>L</u> _	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Forn	n 990	(2013)

Form 990 (2013) CONSTRUCTION BUSINESS GROUP
Part IV Checklist of Required Schedules (continued)

			163	140
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		7,	
	government 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 or other assistance to individuals in the United States on Part IX,		l	X
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
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	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
LTG	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
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			
	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			
	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		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			[
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		ł	
	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	ł		l
	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	ĺ	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		
20	instructions for applicable filing thresholds, conditions, and exceptions):]	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	İ	X
b		28b		X
	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	į	İ	
	contributions? If "Yes," complete Schedule M	30	↓	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32	├	+^
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	}	x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33	+	†==
-	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	1	X
	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	<u>L</u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	1	
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	↓	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			Ì
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Forr	n 990	(2013

CONSTRUCTION BUSINESS GROUP 39-1703979 Form 990 (2013) Page 5 Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 9 filed for the calendar year ending with or within the year covered by this return 2a X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с 7d d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? **7**f 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 intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the

Form **990** (2013)

14a

X

13b

13c

organization is licensed to issue qualified health plans

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 Enter the amount of reserves on hand

39-1703979 CONSTRUCTION BUSINESS GROUP 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. XCheck if Schedule O contains a response or note to any line in this Part VI Section 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 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. 8 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 X 6 Did the organization have members or stockholders? 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a X X 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 10h and branches to ensure their operations are consistent with the organization's exempt purposes? $\overline{\mathbf{x}}$ 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 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 c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization 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 arrangement with a X 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section	C.	Disc	losure
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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) available
	for muchic increasion, ladicate house, and there available. Check all that canks

for public inspection. Indicate how you made these available. Check all that apply

W Upon request ☐ Own website Another's website → Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: Robb Kahl - 608-240-4170

4702 S. Biltmore Lane, MADISON, WI 53718

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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 -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organia (A)	(B)	(B) (C)						(D)	(E)	(F)
Name and Title	Average	Position			l than	000	Reportable	Reportable	Estimated	
	hours per	(do not check more than of box, unless person is both officer and a director/trust			is both	h an	compensation	compensation	amount of	
	week	offic	er an	dad	recto	or/trus	tee)	from	from related	other
	(list any	sctor				ļ		the	organizations	compensation
	hours for	흉	ا ا		l	ed		organization	(W-2/1099-MISC)	from the
	related	뢡	as a			Sua	l	(W-2/1099-MISC)		organization
	organizations	를	nal t) je	e com	ļ	}		and related
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BUGLASS, WILLIAM	1(ne) 3.00	트	Ē	5	32	至島	Ē			
TRUSTEE	3.00	x			{		1	٥.	0.	0.
(2) KAHL, WILLIAM	3.00		-	-	┢	+	 			
TREASURER		X		l	1	1	ł	0.	0.	0.
(3) LUEDTKE, MURRAY	3.00	Г				\vdash				
TRUSTEE		X	•	1	}	•	}) 0.	0.	0.
(4) SCHOLZ, BARRY	3.00					П				
TRUSTEE		X		<u> </u>		<u></u>	<u> </u>	0.	0.	0.
(5) MCGOWAN, TERRANCE	3.00				1					
CHAIRMAN		X	L		╙	丄	L	σ.	0.	0
(6) OEHLHOF, RYAN	3.00	┧		1			l			
TRUSTEE		X	┞-	↓_	↓_	1	1_	0.	0.	0 .
(7) BESSETT, RODNEY	3.00	١.,	}	}	}	}				
FRMR TRUSTEE	3 00	X	┼	├	┼	╀	╄	0.	0.	0 .
(8) BUFFALO, STEVE	3.00	$ _{\mathbf{x}}$	1	1	1	1	ĺ	0.	0.	0
TRUSTEE (9) PATROW, RANDY	3.00		╀	╂─	╁	╁	╀	ļ <u>u.</u>	· · ·	
TRUSTEE	3.00	$ _{\mathbf{x}}$		1	1	1	1	0.	0.	0
(10) ROBB KAHL	40.00	+	╁╴	╁╌	十	+-	十	 	 	<u>-</u>
EXECUTIVE DIRECTOR	20.00	┨	1	}	x	.]	i	150,987.	0.	40,314
		十	+	╁	╀	╁	十		<u> </u>	1
		1	1	1	ſ		į .			{
			Τ	Т	T	T		Ţ		
		1	L	1_	L	\perp	L		<u> </u>	
		_				1	1			}
		↓_	↓_	╀	1	_	\perp		ļ <u> </u>	<u> </u>
		4	1		-					
		+-	╁	+-	╬	┿	+-	 	 	
		+				}	1	}		
		十	+	\top	†	+	十	†	<u> </u>	
		1		1_						
		J								
		1							<u> </u>	600
332007 10-29-13										Form 990 (201

Part	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per	(do	not c	(C) Position t check more than one aless person is both an			one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimat		
		week (list any hours for related organizations below line)	tee or director		dad	irecto	insated trus	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	com	other pensa rom the ganizati d relate	tion e ion ed
			-										
			\vdash		-						-	· · · ·	
		<u> </u>	╁╴	-	-	-	╁╌	┢					
			 -	-	-	-	+	-			+-		
			}-	-	-	-	╁	-					
			-	-	-	-	+-	-					
			}	-	-	\vdash	+-	├	<u> </u>		+-		
			1	├-	-	-	}-	_					
415	Cub Askel		1_	_	<u> </u>	_	1		150,987.	0	1-2	0,3	11
	Sub-total Total from continuation sheets to Part \	/II, Section A							0.	0	1		0.
d 2	Total (add lines 1b and 1c) Total number of individuals (including but	not limited to t	hos	e list	ed a	abov	ve) w	ho r	150,987. eceived more than \$10		• 4	10,3	14
	compensation from the organization											Yes	No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, k	ey e	mpl	loye	ə, or	highest compensated	employee on	3	†	x
4	For any individual listed on line 1a, is the sand related organizations greater than \$1	sum of reportal	ble d	-						the organization	4	x	
5	Did any person listed on line 1a receive or	r accrue compe	ensa	ition	fror	n ar	ny ur	rela		vidual for services		 ^	x
Sec	rendered to the organization? If "Yes," co										5	.l	
1	Complete this table for your five highest of the organization. Report compensation for										ensation	from	
	(A) Name and busines			ION					(B) Description of			(C) ensati	on
							-						
							_						
2	Total number of independent contractors		not	lımıt	ed t	to th	_	liste	d above) who received	more than			
	\$100,000 of compensation from the orga	inization >					0				Forr	n 990	(2013
3320 10-29	08 3-13												,

			Check if Schedule O conta	uns a response	or note to any lin		/At		
				•	, ,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts st	1 :	a I	Federated campaigns	1a					
등회		b	Membership dues	1b		` `			`
P.S.		c i	Fundraising events	1c					1
ii ii	(đ	Related organizations	1d					
S,E			Government grants (contributi	ons) 1e					1
P S			All other contributions, gifts, grant			•	1		
EE			similar amounts not included abov	1 1			į į		
들임		a	Noncash contributions included in lines	L			ļ		
Contributions, Gifts, Grants and Other Similar Amounts		-	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·	>				
			·		Business Code				
ا بو	2	а	EMPLOYER CONTRI	BGENE	900099	1,627,493.	1,627,493.		1
اھ ج		b							
8 5		c							
E al		d							
Program Service Revenue		е					f		
ا تة		f	All other program service reve	nue					
1			Total. Add lines 2a-2f			1,627,493.			
	3		Investment income (including	dıvidends, ınter	est, and			1	
1			other similar amounts)		▶	17,586.			17,586.
1	4		Income from investment of tax	x-exempt bond (proceeds 🕨				
1	5		Royalties		>				
į				(ı) Real	(II) Personal				
ſ	6	а	Gross rents				, ,	-	- [
l		b	Less: rental expenses			,			ł
ì		С	Rental income or (loss)				,		
		d	Net rental income or (loss)		>				
	7	а	Gross amount from sales of	(i) Securities	(II) Other	•			
1			assets other than inventory		4,009.				
1		b	Less: cost or other basis	}			!		,
			and sales expenses	L	0.		}		
		C	Gain or (loss)	L	4,009.	, ,	,	1	
		d	Net gain or (loss)			4,009	.]	<u> </u>	4,009
e l	8	a	Gross income from fundraising	g events (not			[1	
	}		including \$	of	1				
ě			contributions reported on line	1c). See	ļ) ,		1
Other Reven	}		Part IV, line 18	ŧ	a <u></u>		}		ľ
돌		b	Less: direct expenses		ــــــا۰	· ·	1]	j
	İ	C	Net income or (loss) from fun-	draising events			<u> </u>		
	9) a	Gross income from gaming a	ctivities. See	Ì			ì	Ì
	Ì		Part IV, line 19		a		Ì	`	
	1		Less: direct expenses		b[[1		{
			Net income or (loss) from gar	_				<u> </u>	
	10) a	Gross sales of inventory, less	returns	į	{			ļ
			and allowances		a (ę	
	1	b	Less: cost of goods sold	1	b[1			İ
	_	_ <u>c</u>	Net income or (loss) from sale					ļ	
	<u> </u>		Miscellaneous Reveni	ue	Business Code			1	
	111	t a			 	 _		<u> </u>	
	1	b	' _ 			<u> </u>		<u> </u>	
		C					ļ	<u> </u>	
		d					<u> </u>	ļ	
		9	Total. Add lines 11a-11d		>	4 6 10 222	.1,627,493.	<u> </u>	
		2	Total revenue. See instructions.		_	н кач пхх	II 677 /193	. (21,595

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must c	omplete column (A).					
Check if Schedule O contains a response or note to any line in this Part IX									
	ot include amounts reported on lines 6b, b, 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	77,005.			,				
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			<u> </u>					
5	Compensation of current officers, directors,	4.4.							
	trustees, and key employees	191,301.							
	Compensation not included above, to disqualified	ļ							
	persons (as defined under section 4958(f)(1)) and	}		}					
_	persons described in section 4958(c)(3)(B)	303 060		<u> </u>					
	Other salaries and wages	393,068.		 	 				
8	Pension plan accruals and contributions (include	164,097.		}					
	section 401(k) and 403(b) employer contributions) Other employee benefits	103,292.		 					
9	Payroll taxes	42,127.			 				
10 11	Fees for services (non-employees):	42,127.		 	 				
	Management								
ь	Legal	87,424.		 					
	Accounting	13,150.		 	 				
	Lobbying			 					
е	Professional fundraising services. See Part IV, line 17								
f	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)	16,958.		<u> </u>					
12	Advertising and promotion	17,338.			<u> </u>				
13	Office expenses	93,079.			<u> </u>				
14	Information technology			<u> </u>	 				
15	Royalties	45 655	L	 	ļ				
16	Occupancy	45,967.		 	 				
17	Travel	28,522.		<u> </u>					
18	Payments of travel or entertainment expenses			1	1				
40	for any federal, state, or local public officials	34,534.	 	 	 				
19	Conferences, conventions, and meetings	34,334.	 	 	 				
20 21	Interest Payments to affiliates			 	 				
21	Depreciation, depletion, and amortization	32,662.	 	 	 				
23	Insurance	21,052.		 	 				
24	Other expenses, Itemize expenses not covered				 				
_,	above. (List miscellaneous expenses in line 24e. If line	į							
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)								
а	· · · · · · · · · · · · · · · · · · ·								
b									
c									
d									
е		1 364 ===			 				
25	Total functional expenses. Add lines 1 through 24e	1,361,576.	ļ		 				
26	Joint costs. Complete this line only if the organization			{					
	reported in column (B) joint costs from a combined	1	1	1					
	educational campaign and fundraising solicitation.			1					
	Check here if following SOP 98-2 (ASC 958-720)	<u></u>	L		Far. 000 (0040)				
3320	10 10-29-13				Form 990 (2013)				

Form 990 (2013) (Part X | Balance Sheet

art .	X_	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	4 004 000	1	4 530 404
1	2	Savings and temporary cash investments	1,294,030.	2	1,530,401
- (3	Pledges and grants receivable, net		3	404-660
	4	Accounts receivable, net	164,492.	4	191,669
}	5	Loans and other receivables from current and former officers, directors,		}	
		trustees, key employees, and highest compensated employees. Complete	1		
-		Part II of Schedule L		5	
ı	6	Loans and other receivables from other disqualified persons (as defined und	· · · · · · · · · · · · · · · · · · ·		
- [section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribut	ing (• •
- (employers and sponsoring organizations of section 501(c)(9) voluntary	٠,		
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7	Notes and loans receivable, net		7	
·	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	11,276.	9	4,293
[1	10a	Land, buildings, and equipment: cost or other		1 1	
1		basis. Complete Part VI of Schedule D 10a 311,54	'		127 207
	b	Less: accumulated depreciation 10b 174,24	4. 81,366.		137,297
1	11	Investments · publicly traded securities		11	
- 1	12	Investments - other securities. See Part IV, line 11		12	
- 1	13	Investments - program-related. See Part IV, line 11		13	<u> </u>
l i	14	Intangible assets	<u> </u>	14	
1	15	Other assets. See Part IV, line 11	0.		11,382
_	<u> 16</u>	Total assets. Add lines 1 through 15 (must equal line 34)	1,551,164.	16	1,875,042
- (17	Accounts payable and accrued expenses	25,514.	17	61,880
- 1	18	Grants payable	ļ	18	
- 1	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
] 2	22	Loans and other payables to current and former officers, directors, trustees	1	ł	
1		key employees, highest compensated employees, and disqualified persons.	• }	1	
		Complete Part II of Schedule L	<u> </u>	22	
- 13	23	Secured mortgages and notes payable to unrelated third parties	 	23	<u> </u>
	24	Unsecured notes and loans payable to unrelated third parties	 	24	
- [3	25	Other liabilities (including federal income tax, payables to related third	. {	1	[
- (parties, and other liabilities not included on lines 17-24). Complete Part X of	1	05	
		Schedule D	25,514	25	61,880
-+	26	Total liabilities, Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶		26	01,000
		, "	na)	}	·
ő	~~	complete lines 27 through 29, and lines 33 and 34.	1,525,650	27	1,813,16
	27	Unrestricted net assets	1,323,030		1,013,10
	28	Temporarily restricted net assets	<u> </u>	28	
	29	Permanently restricted net assets	 	29	
E		Organizations that do not follow SFAS 117 (ASC 958), check here	→ } `	1	
ွ		and complete lines 30 through 34.)		}
Set	30	Capital stock or trust principal, or current funds		30	
2	31	Paid-in or capital surplus, or land, building, or equipment fund	 	31	
ب ج	32	Retained earnings, endowment, accumulated income, or other funds	1 525 650	32	1,813,16
	33	Total net assets or fund balances	1,525,650		
	34	Total liabilities and net assets/fund balances	1,551,104	- 34	1,875,042 Form 990 (20

Form	990 (2013) CONSTRUCTION BUSINESS GROUP	39-170	3979	Pag	e 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	_1_	1,649	0,0	88.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,361		
3	Revenue less expenses. Subtract line 2 from line 1	3			12.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,52	5,6	50.
5	Net unrealized gains (losses) on investments	5			
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	1,81	<u>3,1</u>	<u>62.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				[X]
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Cother			,	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			٠.
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </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:		1 1		İ
	Separate basis Consolidated basis Both consolidated and separate basis		-		
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,	1 1		\
	consolidated basis, or both:			-	ì
	Separate basis Consolidated basis Both consolidated and separate basis			,] -
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,	1		,
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	redule O.			1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audıt			l
	Act and OMB Circular A-133?		3a		X
h	If "Ves." did the organization undergo the required audit or audits? If the organization did not undergo the requ	ured audit	1	1	l .

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

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 39-1703979

	CONSTRUCTION BUSINES				39-1/039/9
Par			r Other Similar Fun	as or Ac	COUNTS. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6				
		(a) Do	nor advised funds	(b)	Funds and other accounts
1	Fotal number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)			<u> </u>	
4	Aggregate value at end of year		·		
5	Did the organization inform all donors and donor advisors in wri	iting that th	e assets held in donor ac	dvised funds	·
	are the organization's property, subject to the organization's ex	kclusive leg	al control?		└─ Yes └─ No
6	Did the organization inform all grantees, donors, and donor adv	visors in wri	ting that grant funds can	be used on	ly
	for charitable purposes and not for the benefit of the donor or c	donor advis	or, or for any other purpo	se conferrin	ng
	mpermissible private benefit?				Yes No
Par	Conservation Easements. Complete if the organ	nization ans	swered "Yes" to Form 99	0, Part IV, lin	ne 7
1	Purpose(s) of conservation easements held by the organization	n (check all	that apply).		
	Preservation of land for public use (e.g., recreation or edu	ucation)	Preservation of an	historically	important land area
	Protection of natural habitat		Preservation of a	certified hist	oric structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualifie	ed conserva	tion contribution in the fo	orm of a cons	servation easement on the last
	day of the tax year.				
				_	Held at the End of the Tax Year
а	Total number of conservation easements	•		<u>_</u>	2a
þ	Total acreage restricted by conservation easements			_	2b
C	Number of conservation easements on a certified historic structure	cture includ	ed in (a)	ļ_	2c
d	Number of conservation easements included in (c) acquired aff	fter 8/17/06	, and not on a historic str	ucture	
	listed in the National Register			L	2d
3	Number of conservation easements modified, transferred, release	ased, extin	guished, or terminated by	the organiz	zation during the tax
	year ▶				
4	Number of states where property subject to conservation ease	ement is loc	ated >	_	
5	Does the organization have a written policy regarding the period	odic monito	ring, inspection, handling	of	
	violations, and enforcement of the conservation easements it is	holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a				
7	Amount of expenses incurred in monitoring, inspecting, and en				
8	Does each conservation easement reported on line 2(d) above	e satisfy the	requirements of section	170(h)(4)(B)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation	on easemen	ts in its revenue and expo	ense statem	ent, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ion's financi	al statements that descri	bes the orga	anization's accounting for
	conservation easements.		,,-		
Pa	t III Organizations Maintaining Collections of			r Other S	imilar Assets.
	Complete if the organization answered "Yes" to Form 9			··	
1a	If the organization elected, as permitted under SFAS 116 (ASC	-			
	historical treasures, or other similar assets held for public exhi	ibition, edu	cation, or research in furt	herance of p	oublic 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 (ASS				
	treasures, or other similar assets held for public exhibition, ed	lucation, or	research in furtherance of	of public serv	vice, provide the following amounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1				> \$
	(ii) Assets included in Form 990, Part X				> \$
2	If the organization received or held works of art, historical trea	asures, or o	ther similar assets for fina	ancial gain, p	provide
	the following amounts required to be reported under SFAS 11	16 (ASC 95	8) relating to these items:		
a	Revenues included in Form 990, Part VIII, line 1				> \$
b	Assets included in Form 990, Part X				▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

Schedule D (Form 990) 2013

332052 09-25-1

Part VII	Investments - Other Securities.				
(a) Descrip	Complete if the organization answered "Yes" ption of security or category (including name of security)	to Form 990, Part IV, line (b) Book value			-of-year market value
	al derivatives	(U) BOOK VAIGE	(c) Welliod of Valu	ation. Cost of end	oryear market value
· ·	-held equity interests				
2) Other	Held equity interests		 		
(A)			 		
 (B)			 		
(C)			 		
(<u>O)</u>			 		
(E)			 		
(F)			 		
(G)			 		
(H)			 		
	(b) must equal Form 990, Part X, col. (B) line 12.)			 	
	Investments - Program Related.	<u> </u>			
	Complete if the organization answered "Yes" (a) Description of investment	to Form 990, Part IV, line (b) Book value	11c. See Form 990, Pa	rt X, line 13.	i-of-year market value
(1)	(-)	(2) 2001 16160	(5)		
(2)					
(3)			 		
(4)		1			
(5)					
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered "Yes"		11d. See Form 990, Pa	ırt X, line 15.	·
	(a)	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					ļ
(5)					
(6)		 			ļ
(7)			 		
(8)					
(9)					
Part X	lumn (b) must equal Form 990, Part X, col. (B) lii Other Liabilities.	ne 15.)			<u> </u>
Partx	Complete if the organization answered "Yes	" to Form ODO. Bort IV. In	a 11a ar 11f Saa Farm (DOO Dort V line Of	•
	(a) Description of liability	to Form 990, Fait IV, IIII	(b) Book value	390, Part A, line 25).
1. (1) Fe	ederal income taxes		(b) book value	*	
(2)	ederal litcome taxes	+-			,
				^	*
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	Number (b) must a real Farm 2000 Part V of 1 (5)	70.051			
	olumn (b) must equal Form 990, Part X, col. (B) li				
2. Liabili	ity for uncertain tax positions. In Part XIII, provid	se the text of the footnote	e to tne organization's fir	nancial statements	s tnat reports the

332053 09-25-13

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

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

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

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

▶ Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of 1	Name of the organization	Employer identification number
	CONSTRUCTION BUSINESS GROUP	39-1703979
Part (Part I General Information on Grants and Assistance	
1 Doe	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	1
crite	interia used to award the grants or assistance?	X Yes No
2 Des	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	
Part II	Part II 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	rt IV, line 21, for any

1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) or government cash grant	(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
ONE WISCONSIN NOW 152 W. JOHNSON ST., SUITE 214 MADISON, WI 53703	20-3765839	501 C 4	25,000.	0.			ADVOCACY GROUP FOR PROGRESSIVE POLICY AND POLITICAL ISSUES
TRANSPORTATION DEVELOPMENT ASSOCIATION - 10 EAST DOTY ST., SUITE 201 - MADISON, WI 53703	39-1154596	501 C 6	.000,02	0.			ORG TO EDUCATE MEMBERS ABOUT SKILLS OTHER THAN CONSTRUCTION
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	nd government or listed in the line	ganizations listed in the I table	line 1 table		•		A 2.

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

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) (f) Description of non-cash assistance (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. THE GOVERNING Explanation: THE ORGANIZATION PROVIDES ASSISTANCE TO VARIOUS ORGANIZATIONS BODY UPON REVIEW OF SUBMITTED DONATION REQUESTS FROM VARIOUS ORGANIZATIONS Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information (d) Amount of non-cash assistance DONATIONS ARE APPROVED BY (c) Amount of cash grant (b) Number of recipients THROUGH DONATIONS DURING THE YEAR. (a) Type of grant or assistance 7 Part I, Line Part III

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CONSTRUCTION BUSINESS GROUP

Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions. ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2013

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Schedule J (Form 990) 2013

Name of the organization

Department of the Treasury

Internal Revenue Service

CONSTRUCTION BUSINESS GROUP

Employer identification number 39-1703979

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. Housing allowance or residence for personal use First-class or charter travel Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, 2 trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a? 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 establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Compensation survey or study independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations 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: a Receive a severance payment or change-of-control payment? 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 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: a The organization? 5a 5b **b** Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: a The organization? 6b b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 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 ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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CONSTRUCTION BUSINESS GROUP

Schedule J (Form 990) 2013

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	N-2 and/or 1099-MI	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns (By()-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 Part III Supplemental Information

Part III Supplemental Information, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE 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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.urs.gov/form990

➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CONSTRUCTION BUSINESS GROUP

Employer identification number 39-1703979

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-MANAGEMENT
RELATIONSHIPS, JOB SECURITY, COMPETITIVENESS, PRODUCTIVITY,
ORGANIZATIONAL EFFECTIVENESS, ECONOMIC DEVELOPMENT AND SPECIFICALLY TO
ENSURE THAT EMPLOYERS PAY THEIR EMPLOYEES THE APPLICABLE CERTIFIED WAGE
BENEFIT RATES AND FOR SUCH OTHER PURPOSES AS MAY BE LAWFULLY SOUGHT AND
ACHIEVED BY THE PARTIES.
Form 990, Part VI, Section B, line 11:
Explanation: THE TRUSTEES AUTHORIZE THE EXECUTIVE DIRECTOR AND DESIGNATED
TRUSTEE TO REVIEW THE FORM 990 BEFORE IT IS FILED.
TRUSTEE TO REVIEW THE FORM 330 BEFORE IT IS FILED.
Form 990, Part VI, Section B, Line 12c:
Explanation: PER THE ORGANIZATION'S GOVERNING DOCUMENT IN NO EVENT MAY THE
DIRECTORS OR ANY FIDUCIARY OF CBG ENGAGE IN "PROHIBITED TRANSACTIONS". ANY
TRANSACTIONS THAT MAY BE POTENTIAL CONFLICTS OF INTEREST OR POTENTIAL
PROHIBITED TRANSACTIONS ARE REQUIRED TO BE BROUGHT TO THE ATTENTION OF THE
ENTIRE BOARD FOR REVIEW AND DISCUSSION WITH THE ORGANIZATION LEGAL COUNSEL
Form 990, Part VI, Section B, Line 15:
Explanation: EACH EMPLOYEE COMPENSATION IS DETERMINED ANNUALLY AND
AUTHORIZED BY THE EXECUTIVE DIRECTOR AND SIGNED BY THE EMPLOYEE AND
EXECUTIVE DIRECTOR. THE BOARD OF DIRECTORS ARE NOTIFIED OF ANY INCREASES
IN THEIR QUARTERLY MEETINGS AND APPROVE ALL INCREASES.
THE COMPENSATION FOR THE EXECUTIVE DIRECTOR IS REVIEWED AND APPROVED

332211 09-04-13

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

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization CONSTRUCTION BUSINESS GROUP	Employer identification number 39-1703979
ANNUALLY BY THE BOARD OF DIRECTORS	
Form 990, Part VI, Section C, Line 19:	
Explanation: PARTICIPANTS ARE ABLE TO REQUEST THE AUDITOR	'S REPORT AND
OTHER FINANCIAL INFORMATION FROM THE FUND OFFICE.	
990, PART XIII, LINE 2C EXPLANATION	
Explanation: NO CHANGE FROM PRIOR YEAR.	
	
	
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Form **8868** (Rev. January 2014)

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.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 •

OMB No. 1545-1709

Form 8868 (Rev. 1-2014)

_	are filing for an Automatic 3-Month Extension, complet	_				
	are filing for an Additional (Not Automatic) 3-Month Ext					
	complete Part II unless you have already been granted a					
	nic filing _(e-file) . You can electronically file Form 8868 if y					
	to file Form 990-T), or an additional (not automatic) 3-mor					
	to file any of the forms listed in Part I or Part II with the exc	=				
	al Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details o	n the elect	ronic filing o	f this form,
	w.irs.gov/efile and click on e-file for Charities & Nonprofits.					
Part						
A corpo	oration required to file Form 990-T and requesting an auton	natic 6-mo	nth extension - check this box and	complete		
Part I o	•					
	r corporations (including 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reques	t an extens	ion of time	
to tile in	come tax returns.				's identifyir	
Туре о	Name of exempt organization or other filer, see instru-	ctions.		Employer	dentification	number (EIN) or
print		_			00 454	
File by the	CONSTRUCTION BUSINESS GROUP	? 			39-170	13979
due date	for Number, street, and room or suite no. If a P.O. box, so	ee instruct	tions.	Social sec	urity numbe	r (SSN)
filing your 4702 S. Biltmore Ln.						
instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions						
	Madison, WI 53718					
						(0.14.)
Enter ti	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
		Γ	,			
Applic	ation	Return	Application			Return
is For		Code	Is For			Code
	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
	720 (Individual)	03	Form 4720 (other than individual)			09
Form 9		04	Form 5227			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	990-T (trust other than above) Robb Kahl	06	Form 8870			12
		T.	WADIGON WI F	2710		
	books are in the care of \triangleright 4702 S. Biltmo	ге ца		3/10		
	ephone No. ► 608-240-4170		Fax No. ▶			
	ne organization does not have an office or place of busines					
_	nis is for a Group Return, enter the organization's four digit	~				
box					ers the exte	nsion is for.
1	I request an automatic 3-month (6 months for a corporation					
	January 15, 2015, to file the exemp	ot organiza	ation return for the organization nam	led above.	i ne extensi	on
	is for the organization's return for:					
	calendar year or x tax year beginning JUN 1, 2013		nd ending MAY 31, 2014	1		
	LAI tax year beginning UON 1, 2013	, ai	ad ending THAT SI, 2014	<u></u>	- '	
•	State and a common analysis and the first transition of the second secon	-bl	son: Initial return	Final retur	_	
2	if the tax year entered in line 1 is for less than 12 months,	cneck reas	son: mida return	rinai retur	п	
	Change in accounting period	2 6060		- 1		
3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720	o, or buby,	enter the tentative tax, less any			0.
	nonrefundable credits. See instructions.	0 - 1-		3a_	\$	
b	If this application is for Forms 990-PF, 990-T, 4720, or 606			۱.,		0.
	estimated tax payments made. Include any prior year over			3b	\$	
C	Balance due. Subtract line 3b from line 3a. Include your p					0.
	by using EFTPS (Electronic Federal Tax Payment System).			3c	\$	
	on. If you are going to make an electronic funds withdrawa	ai (direct d	ebit) with this Form 8868, see Form	8453-EO a	nd Form 887	9-EO for payment
แเรเนิน	ctions.					

For Privacy Act and Paperwork Reduction Act Notice, see instructions.