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DLN: 93492233007015

OMB No 1545-1150

Form 990-EZ

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at $\underline{www.irs.gov/form990}$.

Open to Public Inspection

		iue Selvice					
			r year, or tax year beginning 01-01-2014 , and ending 12-31-	2014			
		f applicable change	C Name of organization FOX VALLEY BUILDING & CONSTRUCTION TRADES COUNCIL		D Employ	er ide	ntification number
	lame c	-	Number and street (or P=0 box, if mail is not delivered to street address) Room/si	ute	36-379		
	nıtıal re	-	PO BOX 186	anc	E Telepho	ne num	iper
	inal					(630)	978-4501
_	n/term	inated ed return	City or town, state or province, country, and ZIP or foreign postal code AURORA, IL 60507		F Group E: Number		on
_		on pending	,		Number	-	
	фрисат	ion penaling					
		iting Method	▼ Cash	required	· 🔽 If the to attach 90,990-E	Sched	
			nly one) - 501(c)(3) 501(c)(5) 4(insert no) 4947(a)(1) or 527				
K Fo	orm of	organızatıon	Corporation Trust Association Other UNION				
			7b to line 9 to determine gross receipts If gross receipts are \$200,00) or more, file Form 990 instead of Form 990-EZ	0 or more, or	f total ass + \$ 6!		•
Pa	art I		, Expenses, and Changes in Net Assets or Fund Balanc e organization used Schedule O to respond to any question in this Part	es (see the in	structions	for P	art I)
-	1		, gifts, grants, and similar amounts received			1 1	
	2		ice revenue including government fees and contracts			2	
	3	•	lues and assessments			3	38,884
	4	Investment in				4	
	5а		1	5a		-	_
a)	b		 	5b		1	
Revenue	c		from sale of assets other than inventory (Subtract line 5b from line 5a			5c	
Š	6		undraising events	,			
	а	-	from gaming (attach Schodulo G if greater than \$15,000)	_ [
	_		L	6a		- 1	
	b		from fundraising events (not including \$ of contribution ng events reported on line 1) (attach Schedule G if the	ıs			
			1	6b	26,460		
	c	Less direct e	xpenses from gaming and fundraising events	6c	13,509	- 1	
	d	Net income or	ـــــــــــــــــــــــــــــــــــــ	ubtract line 6 c		6d	12,951
	7a		finventory, less returns and allowances	1			<u></u>
	ь	Less cost of	-	7b		1	
	c	Gross profit o				7c	
	8		e (describe in Schedule O)			8	
	9		Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		•	9	51,835
	10		milar amounts paid (list in Schedule O)			10	<u> </u>
	11		to or for members			11	
	12	Salaries, othe	r compensation, and employee benefits			12	8,409
Š	13	Professional f	ees and other payments to independent contractors			13	8,577
Expenses	14		ent, utilities, and maintenance			14	700
Š	15		cations, postage, and shipping			15	973
ш	16	- , .	es (describe in Schedule O)			16	41,636
	17	•	es. Add lines 10 through 16		.	17	60,295
~	18	<u> </u>	ficit) for the year (Subtract line 17 from line 9)			18	-8,460
etAssets	19		fund balances at beginning of year (from line 27, column (A)) (must ag		-		-,
ą.			gure reported on prior year's return)			19	12,127
Ne.	20	•	s in net assets or fund balances (explain in Schedule O)			20	0
	21		fund balances at end of year Combine lines 18 through 20		•	21	3,667
				106421			990-F7 (2014)

Form 990-EZ (2014) Part II Balance Sheets (see the	e instructions for Part II)				Page 2
	sed Schedule O to respond to	any question in this	Part II	<u></u>	<u></u>
		Г	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments		[12,127	22	3,667
23 Land and buildings				23	
24 Other assets (describe in Schedule	0)			24	
25 Total assets			12,127	-	3,667
26 Total liabilities (describe in Schedu			0		0
27 Net assets or fund balances (line 27	or column (B) must agree wi	tn line 21)	12,127	27	3,667
	n Service Accomplishr sed Schedule O to respond to		· —		Expenses equired for section 501
What is the organization's primary exem TO ENCOURAGE AND FORM LOCAL OOF SUCH POWER AND AUTHORITY UIINTEREST AND WELFARE OF THE BUIPRACTICAL LINES AS THEY ARISE ALEMPLOYEE	RGANIZATION OF BUILDI PON THE LOCALS OF THE C LDING INDUSTRY, TO ADJ	COUNCIL AS MAY . UST TRADE DISPU	ADVANCE THE TES ALONG	org	(3) and 501(c)(4) panizations, optional for lers
Describe the organization's program ser measured by expenses In a clear and c benefited, and other relevant information	oncise manner, describe the				
28 COUNCIL OPERATIONS- ALL MEM COUNCIL IS TO ENCOURAGE AND FO (Grants \$ 0)		N OF BUILDING TE	RADESMEN	28a	0
29					
(Grants \$) If	this amount includes foreign	grants, check here	▶┌	29a	
30		<u> </u>	,		
(Grants \$) If	this amount includes foreign	grants, check here	▶┌	30a	
31 Other program services (describe in			L		
(Grants \$) If 32 Total program service expenses (add	this amount includes foreign	<u>- </u>		31a 32	
Part IV List of Officers, Directors, 1	Frustees, and Key Employees	(list each one even if no	ot compensated — see the in:	structio	ns for Part IV)
Check if the organization us	sed Schedule O to respond to	any question in this	s Part IV	• •	<u> </u>
(a) Name and title	(b) A verage hours per week devoted to position	(c)Reportable compensation (Forms W-2/109 MISC) (if not pa enter -0-)		o olans,	(e) Estimated amount of other compensation
SCOTT ROSCOE PRESIDENT	4 00	2,0	96	0	0
BRIAN DAHL VICE PRESIDENT	4 00	1,1	08	0	0
JOEL PYLE FINANCIAL SEC/TREASURER	1 00	2,1	77	0	0
CHUCK RUEGGE RECORDING SECRETARY	1 00	1,0	48	0	0
RICHARD LANGE SERGEANT AT ARMS	1 00		0	0	420
BRYAN LONG TRUSTEE	1 00		0	0	420
GREG ELSBREE TRUSTEE	1 00		0	0	420
JEFF FROST TRUSTEE	1 00		0	0	420

	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part	<u>v</u>		<u>l~</u>		
			Yes	No		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed cope of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)					
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No		
ь	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b				
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		No		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No		
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions \rightharpoonup 37a 5,865					
ь	Did the organization file Form 1120-POL for this year?	37b				
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were					
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		Νo		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b					
39	Section 501(c)(7) organizations Enter					
а	Initiation fees and capital contributions included on line 9					
b	Gross receipts, included on line 9, for public use of club facilities 39b					
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under					
	section 4911 •, section 4912 •, section 4955 •					
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b				
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections4912, 4955, and 4958					
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization					
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		Νo		
41	List the states with which a copy of this return is filed 🕨					
42a	The organization's books are in care of SCOTT ROSCOE Telephone no	• <u>(63</u>	0)978-	4501		
	Located at PO BOX 186 AURORA, IL ZIP + 4	<u>60</u>	0507			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	ı				
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No No		
	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
C	At any time during the calendar year, did the organization maintain an office outside the U S ?	42c		Νo		
	If "Yes," enter the name of the foreign country					
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. •	Г		
			Yes	No		
44-	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of		res	140		
44a	Form 990-EZ	44a		NI o		
L		-14 d		No		
D	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		Νo		
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No		
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an					
	explanation in Schedule O	44d				
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Νo		
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b				

orm 990-EZ (2	2014)						Page 4
						Yes	No
	ganization engage, directly s for public office? If "Yes,"			behalf of or in opposition to	i i	.,	
	ection 501(c)(3) orga	<u> </u>			46	Yes	
Al	ll section 501(c)(3) orga nd 51		questions 47-49b a	nd 52, and complete th	e tables	for lir	nes 50
	neck if the organization use	d Schedule O to respond t	o any question in this l	Part VI			Γ
						Yes	No
	ganızatıon engage ın lobbyı complete Schedule C, Part 1		tion 501(h) election ir	n effect during the tax year	[?] . 47		
8 Is the org	anızatıon a school as descr	ribed in section 170(b)(1)((A)(II)? If "Yes," compl	ete Schedule E	. 48		
9a Did the or	ganization make any transf	ers to an exempt non-char	ritable related organiza	tion?	. 49a		
b If"Yes," v	was the related organization	n a section 527 organizatio	on?		. 49b		
O Complete	this table for the organizati s) who each received more	on's five highest compens	ated employees (other	r than officers, directors, tr			
	nd title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099- MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred	(e) Est	timated r compe	
			,	compensation			
of compen	this table for the organizations at the organization from the organization. Name and business address.	n If there is none, enter "I	None "	(b) Type of service		ompen	•
Did the	mber of other independent organization complete Schoted Schoted Schoted A	-	• •	•	. ▶	┌ Yes	s 「No
	of perjury, I declare that I hav elief, it is true, correct, and c						
*	*****			2015-08-11			
ore	Signature of officer			Date			
1 2	SCOTT ROSCOE PRESIDENT Type or print name and title						
1.5	Print/Type preparer's name ANDREW T TWARDOWSKI CPA	Preparer's signature	e Da	CHECK II DOOR	377357		
aid	Firm's name SIKICH LLP	<u> </u>		self-employed P003 Firm's EIN ► 36-3168			
reparer	Firm's address ► 1415 W DIEF	IL RD SUITE 400		Phone no (630) 566-	-8400		
se Only		IL 605632349		(122, 300			
		anarar chawn aboya? Saa			<u> </u>	Г	No

DLN: 93492233007015

OMB No 1545-0047

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SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4) (5) or (6) organizations. Complete Part III.

Na	me of the organization X VALLEY BUILDING & CONSTRUCTION 1	·		Employer iden	tification number
FU	A VALLET BUILDING & CONSTRUCTION I	36-3799396			
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign act	ivities in Part IV	
2	Political expenditures			▶	\$\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	.	\$
2	Enter the amount of any excise	e tax incurred by organization mar	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	er section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exemp	ot function activities 🕨	\$5,865
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	\$ 5,865
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes
	amount of political contribution	For each organization listed, enterns received that were promptly an political action committee (PAC)	d directly delivered	to a separate political orga	nization, such as a tion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	-	ion under section 501(h)).	(;	a)		(b)	
For e activ	_	elow, provide in Part IV a detailed description of the lobbying	Yes	No	/	Moun	nt
1		on attempt to influence foreign, national, state or local uence public opinion on a legislative matter or referendum,					
а	Volunteers?						
b	Paid staff or management (include com	pensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?						
d	Mailings to members, legislators, or the	·					
е	Publications, or published or broadcast	<u> </u>					
f	Grants to other organizations for lobbyi	- · · · ·					
g		affs, government officials, or a legislative body?					
h		ventions, speeches, lectures, or any similar means?					
i	Other activities?	-					
j	Total Add lines 1c through 1i			ı			
2a		ganization to be not described in section 501(c)(3)?					
Ь	If "Yes," enter the amount of any tax in						
С		curred by organization managers under section 4912		i			
d		ion 4912 tax, did it file Form 4720 for this year?	-04/-	\			
Par	501(c)(6).	zation is exempt under section 501(c)(4), section 5	01(C)(5),	or s	ectio	n
	301(0)(0).					Yes	No
1	Were substantially all (90% or more) d	ues received nondeductible by members?		ſ	1		
2		e lobbying expenditures of \$2,000 or less?		ļ	2		
3	Did the organization agree to carry ove	lobbying and political expenditures from the prior year?		Ì	3		
Pai	t IIII-B Complete if the organi	zation is exempt under section 501(c)(4), section 5	501(c)(5),	or s	ectio	n
		(a) BOTH Part III-A, lines 1 and 2, are answered "	No" C)R (b)	Par	t III-	-А,
	line 3, is answered "Ye						
1	Dues, assessments and similar amount		1				
2	expenses for which the section 527(f)	and political expenditures (do not include amounts of political					
а	Current year		2a				
ь	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in section 6	033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		line 2c exceeds the amount on line 3, what portion of the excess					
		er to the reasonable estimate of nondeductible lobbying and	,				
_	political expenditure next year? Taxable amount of lobbying and political	d evenedatures (see instructions)	5				
5	art IV Supplemental Informa)				
	<u> </u>						
		A , line 1 , Part l-B , line 4 , Part l-C , line 5 , Part II-A (affiliated grou so, complete this part for any additional information	ıp lıst),	Part I	I-A,I	ines 1	and
	Return Reference	Explanation					
PAR	,	RIBUTIONS TO CAMPAIGNS FOR STATE AND LOCAL REPRESTRADES	ENTA	TIVES	SUPI	ORTI	NG
	1						

Part IV Supplemental Information (continued)									
Return Reference	Explanation								

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93492233007015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

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

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ame of the organization	DUCTION TRAD		CIL			Employer iden	tification number
OX VALLEY BUILDING & CONST	RUCTION TRAD	ES COUN	CIL			36-3799396	
art I Fundraising Activit			janızatıo	n answered "Yes" to	Form	990, Part IV,	line 17. Form 990-E.
Indicate whether the organiza	tion raised funds	through ar	ny of the 1	ollowing activities Che	eck all th	hat apply	
a Mail solicitations			e	Solicitation of non	n-govern	ment grants	
$f b$ $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	ations		f	☐ Solicitation of gov	ernment	t grants	
c Phone solicitations			g	Special fundraisin	g events	5	
d In-person solicitations							
a Did the organization have a w or key employees listed in Fo							Г _{Yes} Г м
b If "Yes," list the ten highest p to be compensated at least \$			fundraise	rs) pursuant to agreem	ents und	der which the fu	ndraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(or r	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
2							
3							
4							
5							
6							
7							
8							
9							
.0							
otal			. .				
List all states in which the org registration or licensing	janization is regis	tered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from

		more than \$15,000 of fundr events with gross receipts g		ions and gross income	e on Form 990-EZ, iii	ies I aliu ob. List
			(a) Event #1 GOLF OUTING	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	. (6)
₽	1	Gross receipts	26,460			26,460
Revenue	2	Less Contributions				
쬬	3	Gross income (line 1				
		minus line 2)	26,460) 		26,460
	4	Cash prizes				
မွာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	10,844	1		10,844
ă	7	Food and beverages .	300			300
Direct	8	Entertainment				
à	9	Other direct expenses .	2,365	5		2,365
	10	Direct expense summary Add lin	es 4 through 9 in column	ı(d)		(13,509)
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)	🕨	12,951
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Teg	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	☐ Yes	┌ Yes% ┌ No	_
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)		
9 a b	Is	ter the state(s) in which the organize the organization licensed to conduct 'No," explain	t gaming activities in eac	h of these states?		「Yes 「No
10a b		re any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?	· · 「Yes 「No

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity		
	formed to administer charitable gaming	J ²		Г _{Yes} Г	— No
13	Indicate the percentage of gaming acti		1 1	,	
а	The organization's facility		13a		%
b	An outside facility				%
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records		
	Name ▶				
	Address ►				
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming		
154				┌ Yes 「	– _{No}
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the		
C	If "Yes," enter name and address of the	e third party			
	Name ►				
	Address 🏲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation 🕨 \$		······		
	Description of services provided				
	Director/officer	_ Employee	☐ Independent contractor		
17	Mandatory distributions				
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to		
	retain the state gaming license?			Γ _{Yes} [Γ _{No}
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent		
	ın the organization's own exempt activi		·		
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr		
	Return Reference		Explanation		

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93492233007015

OMB No 1545-0047

2014

Open to Public Inspection

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.

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

Name of the organization
FOX VALLEY BUILDING & CONSTRUCTION TRADES COUNCIL

36-3799396

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	

TY 2014 Transfers Personal Benefits Contracts Declaration

Name: FOX VALLEY BUILDING & CONSTRUCTION TRADES COUNCIL

EIN: 36-3799396

Declaration: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY

FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY,

ON A PERSONAL BENEFIT CONTRACT.