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Form **990** 

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

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

Department	of the	Treasury
Internal Rev	enue S	Service

ļr —	ternal Rev	enue Service	► Informatio	n about Form 990 an	d its instructions i	s at www.i	rs.gov/form990!, /U	Inspection
7	A For th	e 2014 calend	dar year, or tax year begii				MAY 31, 2015	5
_	Check if applicat	C Name o	of organization				D Employer identif	
	Addr chan Name	36 <u> </u>	INOIS PIPE TRA	DES ASSOCI	ATION		]	
	Llchan	Doing t	ousiness as	<del> </del>				080375
	Initia returi	Numbe	er and street (or P.O. box if m		•	Room/suite		
	Final returi		SOUTH SECOND	STREET		311	217-	<u>-528-1945</u>
	termi ated	n- City or	town, state or province, co	ountry, and ZIP or fore	ign postal code		G Gross receipts \$	<u>2,052,155.</u>
	Amer	DPK	INGFIELD, IL	62701		<u> </u>	H(a) Is this a group i	
	Appli tion pend	100	and address of principal of AS C ABOVE	ficer:KEVIN MO	RRISSEY	G	for subordinate <b>H(b)</b> Are all subordinates	— — — — — — — — — — — — — — — — — — —
_	Tay.ex	empt status:	501(c)(3) X 501(c	) ( 5 ) <b>◀</b> (insert i	no.) 4947(a)(1)	or	<b>-</b>	a list. (see instructions)
_			.IPTAPP.COM_	/( 3 / 4 (1136)(1)	10.) - 4047(0)(1)	<u>01                                    </u>		on number ► 0297
_		f organization:	Corporation Tru	st X Association	Other >	I Vas		M State of legal domicile: IL
	Part I	Summary		or 12 recondition	J.	Lica	TOTIOTHIAMON. IDIO	VI Ctate of legal dofficie. 11
_			be the organization's miss		TPAD	E ACC	OCT MTTON	
	venue Activities & Governance Activities & Governance 2 4 2 4 2 4 2 5 6 4 7 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7	Briefly descri	be the organization's miss	on or most significant	activities IRAB	E ADD	OCIATION	<del></del>
	au au	Ob a state of b					to the DEOL of its not a	
	2	Check this be	<del>-</del>			sea or mo	re than 25% of its net a ا م	1
	ල්   3		oting members of the gove	• • •			3	9
	og 4		dependent voting member	-			4	7
	5   <u>şi</u>		r of individuals employed in	,	Part V, line 2a)		5	8
	<u>}</u>   6		r of volunteers (estimate if i	•••			6	0
Q	<b>₽</b> 7 a		ed business revenue from			•	<u>7a</u>	<del></del>
£	) <u>b</u>	Net unrelated	d business taxable income	from Form 990-T, line	34		7b	<del> </del>
Ź				\$ <u>}</u>		ļ	Prior Year	Current Year
₹	<u>a</u> 8		s and grants (Part VIII) line				97,000.	
- 8	ਜੂ   9		vice revenue (Party), line				<u>1,877,173.</u>	1,927,070.
	.e.   1∪		ncome (Part VIII) column (			<u> </u>	0,	0.
j, a.l	_   11		ie (Part VIII collimn (A), line				18,786.	
ے۔ ت	12		e · add lines 8/through 11 (				1,992,959	
۷.	13	Grants and s	similar/amounts paid (Part)	Column (A), lines 1-	3)	<u> </u>	<u> </u>	21,351.
	14	Benefits paid	to of for members (Part)	column (A), line 4)			0,	0.
2015	g 15	Salaries, other	er compensation employe	e benefits (Part IX, col	lumn (A), lınes 5-10)	<u> </u>	<u>1,387,772.</u>	
C	Expenses 15	Professional	fundraising fees (Part IX, c	olumn (A), line 11e)		_	0.	0.
	Š t	Total fundra	sing expenses (Part IX, col	umn (D), line 25) 🕒	·	<u> </u>		
	ш   17	Other expens	ses (Part IX, column (A), lın	es 11a·11d, 11f·24e)			<u>525,878</u>	
LED	18	Total expens	ses Add lines 13-17 (must	equal Part IX, column	(A), line 25)	<u>_</u>	<u>1,920,203</u>	
2015	19	Revenue less	s expenses Subtract line 1	8 from line 12			72,756	257,471.
~	d Balances o Balances 20					L B	eginning of Current Year	End of Year
23	종등 <b>20</b>	Total assets	(Part X, line 16)				<u>530,470.</u>	823,562.
	鍔 21	Total liabilitie	es (Part X, line 26)			L	9,991	45,612.
	21		r fund balances Subtract i	ine 21 from line 20			520,479.	777,950.
	Part II	Signatu	re Block					
Q	Jnder per	alties of perjury	, I declare that I have examine	d this return, including a	ccompanying schedule	es and state	ments, and to the best of r	ny knowledge and belief, it is
W I	rue, corre	ct, and complet	te. Declaration of preparer (oth	er than officer) is based	on all information of w	hich prepar	er has any knowledge.	
ANNE			<del>2</del>				10/8	115
	Sign	Signatu	ire of officer				Date	
i Co	Here	► KEV	IN MORRISSEY,	SECRETARY-	TREASURER			
Š		Type or	print name and title					
-		Print/Type pr	eparer's name	Preparer's	signature		Date Check	PTIN
(	Paid		ANCICH	•	R ANCICH		7///J sett-emplo	pyed P00201493
	Preparer	Firm's name	LEGACY PRO				Firm's EIN	32-0043599
	Jse Only				STE. 4000			
	•		CHICAGO, II		_		Phone no. 3	L2- <u>3</u> 68-0500
i	May the	IRS discuss th	his return with the prepare		nstructions)			X Yes No
-			E Denominado Deductio	- A - A N - A A - A - A	congrate instructi			Form 990 (2014)

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Form	1890 (2014) ILLINOIS PIPE TRADES ASSOCIATION	<u>36-6080375</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:	·····	
•	TO PROMOTE, PROTECT, AND SERVE THE MEMBER UNIONS BY ESTA	ARI.TCHTNC ANT	<b>-</b>
	MAINTAINING MINIMUM WAGE STANDARDS, PROTECTING MEMBERS		
	COMPETITION, AND OVERSEEING LABOR AGREEMENTS WITHIN THE	STATE OF	<del></del>
	ILLINOIS.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		io, the total expenses, a	
	revenue, if any, for each program service reported.	<del></del>	<del></del>
4a	(Code) (Expenses \$) (Revenue) (Revenue) (Revenue)		
	TO ESTABLISH AND MAINTAIN A MINIMUM STANDARD OF DAILY WA		
	MAINTAIN THE HOURS OF LABOR AS DEFINED IN AGREEMENTS IN		
	LOCALITIES OF THE STATE; AND TO ELEVATE BY LEGAL AND PRO		
	MORAL, INTELLECTUAL AND SOCIAL CONDITIONS OF ALL MEMBERS		
	AND FOSTER JUST AND EQUITABLE ACTION IN ALL DEALINGS WI'	TH OTHERS AND	
	EMPLOYERS.		
		<del></del>	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	.e \$	)
		· · · · · · · · · · · · · · · · · · ·	
		<del></del>	
		<del></del>	
		<del></del>	
		<del></del>	
		<del></del>	
4c	(Code ) (Expenses \$) (Revenue	ue \$	)
		<del></del>	
		<del></del>	
		<del></del>	
			<del></del>
4d	Other program services (Describe in Schedule O.)		
40		ì	
	(Expenses \$ including grants of \$ ) (Revenue \$		
<u>4e</u>	Total program service expenses		20 (001.4)

11-07-14

Form 990 (2014) ILLINOIS PIP
Part IV Checklist of Required Schedules ILLINOIS PIPE TRADES ASSOCIATION

6	0	8	0	3	7	5	Page	3

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
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	j	1	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			••
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
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.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	Part VI	11a	x	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	110	**	
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	j	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	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		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			₹.
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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	4.5		х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16	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,			
"	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			_ <del>-</del> _
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
- •	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2014)

Form 990 (2014) ILLINOIS PIPE TRADES ASSOCIATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
- '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
04-	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
24a	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		х
	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	240		
C		24c		
	any tax-exempt bonds?  . Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del> </del>
		240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	230		
D	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			
		25b		
~~	Schedule L, Part I	200		
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 "Yes,"			
		26		x
^-	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27				
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		х
	of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
28	instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
a	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
30	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		-	
٠.	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
-	Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		İ	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	<u> </u>
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	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2014)

	990 (2014) ILLINOIS PIPE TRADES ASSOCIATION 36-6080	375	_ P	age 5
Par				
	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			ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c_	X	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_		X
b	If "Yes," enter the name of the foreign country:	-	- ~	İ
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
С	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		i	
	any contributions that were not tax deductible as charitable contributions?	6a	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	}		ł
	were not tax deductible?	6b_	X	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	]		ļ
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		L
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	_	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ŀ		ŀ
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b_		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	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)	l	}	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L	ļ	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	L	L
	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			1
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	<u> </u>		<u> </u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	Щ.
		Earn	, മമറ	/2014

Form 990 (2014) ILLINOIS PIPE TRADES ASSOCIATION 36-6080375 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  $\mathbf{x}$ Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 9			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		_X
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			ŀ
	in Schedule O how this was done	12c		7,
13	Did the organization have a written whistleblower policy?	13_		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	4==		
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
40.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	160		x
<b>L</b>	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		
D	In yourt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	İ		
		16b	j	j
Sec	exempt status with respect to such arrangements?	LION	<u> </u>	<u> </u>
	List the states with which a copy of this Form 990 is required to be filed NONE			
17 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)	availah	le le	
10	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	i finan	cial	
. •				

statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: LYNN KARNER, EXECUTIVE DIRECTOR - 217-528-1945

SPRINGFIELD 534 SOUTH SECOND STREET

Form 990 (2014)

## 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

### 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.

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

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

(A) Name and Title	(B) Average hours per	box	not c	Pos heck ss pe	rson	than is bot	th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) CURTIS CADE	10.00							0	0.	0
INTERNATIONAL REPRESENTATIVE	1 00	├	-	X		-	├	0.	U .	0.
(2) CHARLES BAILEY	1.00	-		٦,			ŀ	F 000	_	_
PRESIDENT	1.00	├—	├	X		-	┢	5,000.	0.	0.
(3) KEVIN MORRISSEY	1.00	+		x				5,000.	0.	^
SECRETARY-TREASURER		-	-	X			⊢	5,000.	J	0.
(4) JAMES COYNE	$\begin{array}{c c} 1.00 \\ \hline 1.00 \end{array}$	1		х				0.	0.	0.
VICE PRESIDENT	1.00	╁		^	-		-			
(5) WILLIAM WEINHOFFER	1.00	┨		х				0.	0.	0.
VICE PRESIDENT - PAST	1.00	┼─	-	Λ		_	<del>                                     </del>	0.	· · ·	
(6) JOHN HAINES	1.00	1	1	x				0.	0.	0.
VICE PRESIDENT (7) TOM MCCUNE	1.00	╁┈		A	├			- 0.	<u></u>	
(7) TOM MCCUNE VICE PRESIDENT	1.00	1		x	l			0.	0.	0.
(8) DENNIS FLEMING	1.00	†			•	1	<del> </del>			
VICE PRESIDENT	1.00	1		$\mathbf{x}$				0.	0.	0.
(9) MICHAEL TONER	1.00	1		-						
VICE PRESIDENT - PAST	1.00	1		x	ì			0.	0.	0.
(10) PAT HARDESTY	1.00		ſ							
VICE PRESIDENT	1.00	1		x	!			0.	0.	0.
(11) MATT LANGENDORF	1.00					П				
VICE PRESIDENT	1.00	1		X	i	1		0.	0.	0.
(12) ROBERT LAWLESS	1.00									
VICE PRESIDENT - PAST	1.00	]	<u> </u>	X	}	_		0.	0.	0.
(13) CHAD DAWSON	40.00									
ORGANIZER					<u>L</u>	X		127,994.	0.	86,363.
(14) WILLIAM HITE JR.	40.00	]								
ORGANIZER		<u> </u>				X	L	128,485.	0.	86,176.
(15) JOSEPH NAGLE	40.00	]		}						
ORGANIZER		$\perp$	<u> </u>	_	<u> </u>	X	<u> </u>	133,227.	0.	82,963.
(16) RICK TERVEN JR.	40.00	1							_	
POLITICAL DIRECTOR		-	-			X	$\vdash$	123,695.	0.	73,940.
		1								
422007 11.07 14								···		Form 990 (2014)

Form **990** (2014)

	Section A. Oπicers, Directors, Trus	-1	pioy	ees,			gne	sı <u>C</u>						
	(A)	(B) (C) Average Position							(D)	(E)	(F) ble Estimated			
	Name and title	hours per		(do not check more than one box, unless person is both an					Reportable compensation	Reportable compensation	,		timate nount	
		week					or/trus		from	from related	'		other	01
		(list any	ctor						the	organizations	- 1	com	pensa	ition
		hours for	- E	, ,			ated		organization	(W-2/1099-MIS	C)		om th	
		related organizations	ustee	truste		<b>9</b> 2	bens		(W-2/1099-MISC)		ŀ	_	anızat d relat	
		below	Individual trustee or director	institutional trustee	_	yold r	stco	   ==					ınızatı	
		line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Бтт						
											- 1			
			ļ.,				ļ.,	<u> </u>						
			ļ											
			-		<u> </u>	-	-		<u> </u>					
			-								Ì			
					<del> </del>		-							
			{								1			
			<del>                                     </del>	ļ			-	<del>                                     </del>						
			1											
		<del> </del>					$\vdash$	<del>                                     </del>						
											ŀ			
		1												
			1											
				L			<u>l</u>							
1b	Sub-total							ightharpoons	523,401.		0.	32	<u>9,4</u>	42.
С	Total from continuation sheets to Part \	/II, Section A							0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	523,401.		0.	32	9,4	42.
2	Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportable	€			5
	compensation from the organization												Yes	No
_	Did the organization list any former office	r director or tr	uete	م ارد		mole	01/00	or	highest compensated s	mplovee on	[			
3	line 1a? If "Yes," complete Schedule J for			e, K	y ei	прк	Јуее	, 01	riigilest compensated e	inployee on		3		x
4	For any individual listed on line 1a, is the s			omp	ens	atioi	n an	d ot	her compensation from	the organization	Ì			
7	and related organizations greater than \$19											4	х	
5	Did any person listed on line 1a receive or									idual for services				
	rendered to the organization? If "Yes," col											5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest of										pens	ation 1	from	
	the organization. Report compensation fo	r the calendar	/ear	end	ıng v	with	or v	/ithii		year.				
	(A) Name and busines	e addrace			_				(B) Description of	services	С	ompe	C) nsatic	)n
	ivalie and busines	addiess	N	ON.	<u> </u>				<u> </u>	55,7,655				
		· · · · · · · · · · · · · · · · · · ·												-
											_			
											_			
	<u> </u>								<u> </u>					
2	Total number of independent contractors		not l	ımıte	ed to			iste	d above) who received i	nore than				
	\$100,000 of compensation from the orga	nization >					0		<del></del>				000	<u> </u>
												Form	<b>330</b>	(2014

	<u> </u>		Check if Schedule O cont	ains a response	or note to any lin	ne in this Part VIII			[ <del></del> -]
			Gridon ii Gariadaia e garin	ams a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a			-		
irar our		b	Membership dues	1b					
s, G			Fundraising events	1c					
ar /		d	Related organizations		105,000.		j		
S,E			Government grants (contribut		···				
ion Si			All other contributions, gifts, gran		-				
but			similar amounts not included above	i i i					
iği 1 O		a	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts		_	Total. Add lines 1a-1f		<b>•</b>	105,000.	İ		
					Business Code				
e)	2	а	DUES ASSESSMENT			1,829,873.	1,829,873.		
ار کن	-		PER CAPITA		900099	97,197.	97,197.		
Program Service Revenue		c				<u> </u>	7-2		
e a		d						-	
ğ.		e							
<u>P</u>	ļ		All other program service reve	enue					
	Ì		Total, Add lines 2a-2f	,,,,,,		1,927,070.			
	3	7	Investment income (including	dividends, intere					
			other similar amounts)		<b>&gt;</b>				
	4		Income from investment of ta	x-exempt bond n	roceeds				
	5		Royalties	x oxompt bond p					
	ľ		, to juited	(ı) Real	(II) Personal				
	6	a	Gross rents	, , , , , , , , , , , , , , , , , , ,	(ii) i oroona.	1			
	ľ	-	Less: rental expenses						
	ļ		Rental income or (loss)			1			
			Net rental income or (loss)		<b>•</b>				
			Gross amount from sales of	(i) Securities	(II) Other				
	'		assets other than inventory	(1) 00000111100	(1) 0 11.10.	-			
		h	Less, cost or other basis			1			
		٠	and sales expenses						
		c	Gain or (loss)	-		1			
	1	d	Net gain or (loss)		<b></b>	1			
-	۵		Gross income from fundraisin	a events (not					
п	١	a	including \$	of					
Š			contributions reported on line	<del></del>			:		
Other Reven			Part IV, line 18	a a					
Ē		h	Less. direct expenses	b		1			
Ö			Net income or (loss) from fund		<b></b>	†			
			Gross income from gaming a	-					
	"	-	Part IV, line 19	a a					
		h	Less direct expenses	b		1			
			Net income or (loss) from gan	• -	<b>•</b>	1			
	10		Gross sales of inventory, less	-				* -	
	.0	4	and allowances	а		1	1		1
		h	Less: cost of goods sold	b		1			
	1		Net income or (loss) from sale		<b></b>	1			
	_		Miscellaneous Revenu		Business Code			<del></del>	
	11		GOLF OUTING REC		900099	13,900.			13,900.
	''		OTHER INCOME		900099	6,185.		<del></del>	6,185.
			OTHER THOUSE		70000	1 3,200.			1
		G	All other revenue						
		ū	Total. Add lines 11a-11d			20,085.			
	12		Total revenue See instructions.			2,052,155.	1.927.070.	0.	20,085.
4320 11-0			Total leveline Coo mon denoms.				,_,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Form <b>990</b> (2014)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (D) Fundraising (A) Total expenses (B) Program service Do not include amounts reported on lines 6b. 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 20,786 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 565 individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 241,514 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 662,634 Other salaries and wages Pension plan accruals and contributions (include 329,848 section 401(k) and 403(b) employer contributions) 97,466. Other employee benefits 58,880 10 Payroll taxes Fees for services (non-employees) Management 5,190 Legal 21,758 Accounting C 75,000 d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 9,768 12 Advertising and promotion 28,833. Office expenses 13 14 Information technology Royalties 15 18,789 Occupancy 16 44,880. Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 89,476. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 31,089 22 Depreciation, depletion, and amortization 19,170. 23 Insurance Other expenses, Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 30,000 APPRENTICESHIP CONTEST 9,038. DUES AND SUBSCRIPTIONS C All other expenses 1,794,684 Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

Check here

Part X	Charle if Cahadula O contains a reasonable or note to any line in this Bott V			
•	Check if Schedule O contains a response or note to any line in this Part X .	(A)		(B)
		Beginning of year		End of year
1	Cash · non·interest-bearing	485,352.	1	790,527
2	Savings and temporary cash investments	· · · · · · · · · · · · · · · · · · ·	2	
3	Pledges and grants receivable, net		3	_ <del>.</del>
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
2	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	<del></del>
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	·
9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment, cost or other			
	basis. Complete Part VI of Schedule D 10a 177, 308.			
Ь	Less: accumulated depreciation 10b 144,273.	44,223.	10c	33,035
11	investments · publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	895.	15	0
16	Total assets, Add lines 1 through 15 (must equal line 34)	530,470.	16	823,562
17	Accounts payable and accrued expenses		17	<u></u>
18	Grants payable	<u></u>	18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	<del> </del>
21	Escrow or custodial account liability Complete Part IV of Schedule D	<u> </u>	21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
J 23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	9,991.		45,612
26	Total liabilities. Add lines 17 through 25	9,991.	26	45,612
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
g l	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	490,280.	27	747,771
28	Temporarily restricted net assets	30,199.	28	30,179
29	Permanently restricted net assets		29	
<b>∄</b>	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
- -	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	520,479.	33	777,950
34	Total liabilities and net assets/fund balances	530,470.	34	823,562

Form **990** (2014)

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

Form 990 (2014)

### SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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.

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

OMB No 1545-0047

Open to Public Inspection

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

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

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

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

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

, (and copulate mode deticine), then				
<ul> <li>Section 501(c)(4), (5), or (6) organizat</li> </ul>	ions: Complete Part III			
Name of organization			Emplo	oyer identification number
ILLINOI	<u>S PIPE TRADES ASS</u>	OCIATION		<u> 36-6080375</u>
Part I-A Complete if the org	anization is exempt unde	r section 501(c) o	r is a section 527 or	rganization.
<ol> <li>Provide a description of the organiz</li> <li>Political expenditures</li> <li>Volunteer hours</li> </ol>	ation's direct and indirect political	campaign activities in	Part IV.	
Part I-B Complete if the org	enization is avament undo	r coation 501/a)/3	1	
	anization is exempt unde		<i>).</i> ▶\$	
1 Enter the amount of any excise tax	• •		<b>→</b> \$	
2 Enter the amount of any excise tax	. •		. • •	Yes No
3 If the organization incurred a section 4a Was a correction made?	1 4955 tax, did it life Form 4720 to	n triis year r	•	Yes No
			•	. Lites Lino
Part I-C Complete if the org	anization is exempt unde	r section 501(c).	except section 501(c	c)(3).
1 Enter the amount directly expended	<del></del>			-X-/-
<ul> <li>Enter the amount directly expended</li> <li>Enter the amount of the filing organiexempt function activities</li> <li>Total exempt function expenditures line 17b</li> </ul>	zation's funds contributed to other	er organizations for sec	tion 527	
<ul> <li>Did the filing organization file Form</li> <li>Enter the names, addresses and en made payments. For each organization contributions received that were propolitical action committee (PAC). If a</li> </ul>	nployer identification number (EIN) tion listed, enter the amount paid omptly and directly delivered to a	from the filing organiza separate political organ	tion's funds. Also enter the nization, such as a separat	e amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
ILLINOIS PIPE TRADES PEF	SPRINGFIELD, IL 62701	91-2100007	0.	501,976.

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

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14 SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990 EZ) 2014 II Part II-A Complete if the organ section 501(h)).	LLINOIS I	PIPE TRADES A xempt under section	SSOCIATION n 501(c)(3) and file	36- ed Form 5768	6080375 Page 2 (election under
	n belongs to an	affiliated group (and list ii	Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share			·		
	<del>-</del>	A and "limited control" pro	ovisions apply		
Limits	on Lobbying Ex ures" means an	penditures nounts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	nce public opinio	on (grass roots lobbying)	-		
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add line	-	, (,,,,,, -	Ī		
d Other exempt purpose expenditures	•,		Ī		
e Total exempt purpose expenditures (	add lines 1c and	1 1d)	Ì		
f Lobbying nontaxable amount Enter		·	th columns.		
If the amount on line 1e, column (a) or (		lobbying nontaxable am	·		<del>-   </del>
Not over \$500,000		of the amount on line 1e	11		
Over \$500,000 but not over \$1,000,0	- +	0,000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,500		5,000 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000		5,000 plus 5% of the exce			
Over \$17,000,000		00,000 plas 570 of the exec	σος στοι φτισσος,σσσ.		
Over \$17,000,000		00,000.			
g Grassroots nontaxable amount (ente	r 25% of line 1ft				
h Subtract line 1g from line 1a. If zero o			ľ	<del></del>	· <del>-   ·- · · · · · · · · · · · · · · · · ·</del>
i Subtract line 1f from line 1c. If zero o				**************************************	
j If there is an amount other than zero		or line 1, did the organiz	ation file Form 4720		L
reporting section 4911 tax for this ye		of life 11, ald the organiz	ation life i on i 4720		Yes No
(Some organizations tha	4-Year t made a sectio	Averaging Period Under n 501(h) election do not parate instructions for li	have to complete all o	of the five columns	<u></u>
	Lobbying Ex	penditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	( <b>d)</b> 2014	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount				<del>_</del>	
e Grassroots ceiling amount (150% of line 2d, column (e))					
6 Greenwoods labbums expanditures					

Schedule C (Form 990 or 990-EZ) 2014

# Schedule C (Form 990 or 990-EZ) 2014 ILLINOIS PIPE TRADES ASSOCIATION 36-608037 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(k	<b>b</b> )
	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?				_
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				_
i	Other activities?				_
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		_		
b	If "Yes," enter the amount of any tax incurred under section 4912				_
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	i i			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)	(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		Х
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OI	R (b) Par	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		. 1	<del></del>	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
a	Current year		2a_		
þ	Carryover from last year		2b		
¢	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and i				
	expenditure next year?		4		
_5_	Taxable amount of lobbying and political expenditures (see instructions)		5		~
Par	t IV Supplemental Information				
ınstn	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	o list); Part I	I-A, lines 1 a	and 2 (see	
	SUPPORT STATE, COUNTY AND LOCAL POLITICAL CANDIDAT	 ਾਸ <b>਼</b>			
10	SUPPORT STATE, COUNTY AND DOCAL POLITICAL CANDIDAT	<u> </u>			
PAI	RT I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INF	'ORMAT	ION:		
IL	JINOIS PIPE TRADES PEF				<del></del>
<u>53</u>	4 S SECOND STREET, SUITE 311 SPRINGFIELD, IL 62701				

### SCHEDULE D

(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.lrs.gov/form990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

	ILLINOIS PIPE TRAD		36-6080375
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts. Complete if the
_	organization answered "Yes" to Form 990, Part IV, lin	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's	_	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	· — —
•	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?		Yes No
Pai		ganization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or	· — — · · · · · · · · · · · · · · · · ·	y important land area
	Protection of natural habitat	Preservation of a certified h	•
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
ď	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	nization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		L Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(	
	and section 170(h)(4)(B)(ii)?	•	L Yes L No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the o	rganization's accounting for
	conservation easements. t III   Organizations Maintaining Collections o	Ant Historical Traceures or Other	Similar Assats
Pa	<u>† III</u> Organizations Maintaining Collections of Complete of the organization answered "Yes" to Form		Sillilai Assets.
<del>_</del>			and belongs about works of out
та	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		r public service, provide, in Part Alli,
	the text of the footnote to its financial statements that described as a second of the control o		halanaa ahaat warka of art. historiaa
D	If the organization elected, as permitted under SFAS 116 (A	•	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public se	arvice, provide the following amount
	relating to these items.		▶ ¢
	(i) Revenue included in Form 990, Part VIII, line 1		▼
•	(ii) Assets included in Form 990, Part X		provide
2	If the organization received or held works of art, historical tre the following amounts required to be reported under SFAS		, provide
_	·	TO (AGO 300) relating to these items.	<b>S</b>
a	Revenue included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X	•	► \$ ► \$
U		• •	· ·

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Schedule D (Form 990) 2014

		S PIPE TRA								Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, c	or Othe	<u>er Simil</u>	<u>ar Asse</u>	<b>ts</b> (contini	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	t are a s	ignificant	use of its	collection	ıtems
	(check all that apply):									
а	Public exhibition	d	ı 🛄 ı	Loan or exc	hange progra	ams				
b	Scholarly research	е		Other						
C	Preservation for future generations									
4	Provide a description of the organization's co							ose in Pari	XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or oth	er sımıla	r assets		_	
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran	-	ete if the	organizatio	n answered '	"Yes" to	Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	included		٦	
	on Form 990, Part X?			•					Yes	L No
b	if "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:						
									Amount	<del></del>
C	Beginning balance						<u>tc</u>		<del>.</del>	
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	L	<del> </del>	
2a	Did the organization include an amount on Fe						lity?	L	」Yes	⊢ No
	If "Yes," explain the arrangement in Part XIII									
Par	t V Endowment Funds. Complete r	f the organization ar			1					<del></del>
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three	years back	(e) Four	years back
1a	Beginning of year balance					_				
b	Contributions							<del></del>		
С	Net investment earnings, gains, and losses				<del> </del>					
d	Grants or scholarships .				<del> </del>					
е	Other expenditures for facilities									
	and programs				<del></del>					
f	Administrative expenses		_							
g	End of year balance		1		\\ h = !d = = :	_				
2	Provide the estimated percentage of the curr			g, column (a	a)) neid as:					
a	Board designated or quasi-endowment		_%							
Ь	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c should be a second at the second		-4 45-		and administr	rod for	bo organi	zation		
За	Are there endowment funds not in the posses.	ession of the organiz	ation the	at are rielu a	ina administe	eled loi	ine organi	Zation	Ţ,	Yes No
	by:								3a(i)	169 110
	(i) unrelated organizations								3a(ii)	<del></del>
L	(ii) related organizations  If "Yes" to 3a(ii), are the related organizations	e hetad ae ragurad a	on Sabar	dula R2					3b	
	Describe in Part XIII the intended uses of the								<u> </u>	
Par	t VI Land, Buildings, and Equipm		<u>Jwinent</u>	iurius						
	Complete if the organization answere		) Part IV	/ line 11a. S	See Form 990	. Part X.	line 10.			
	Description of property	(a) Cost or o			or other		ccumulat	ed	(d) Book	value
	bescription of property	basis (investi		, , ,	(other)		preciation		(-, -00)	<b>-</b>
	Land				• /		•			
	Land				<del></del> -					
	Leasehold improvements	-		2	2,991.		22,9	91.		0.
	Equipment				3,256.		23,9			,262.
	Other	•	<u>-</u>		1,061.			88.		3,773.
	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colui					. •	33	3,035.

Schedule D (Form 990) 2014

Part VII	Investments - Other Securities.	t - F 000 Part IV ha	- 445 Can Faura 000 Dark V Inc	. 10
(a) Deceru	Complete if the organization answered "Yes" ption of security or category (including name of security)	to Form 990, Part IV, line (b) Book value		Cost or end-of-year market value
		(b) Book value	(c) Method of Valuation.	oost of end-of-year market value
	ial derivatives	<del></del>		
(2) Closely (3) Other	/-held equity interests		·	
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
	I Investments - Program Related.			
	Complete if the organization answered "Yes"	to Form 990, Part IV, line	e 11c. See Form 990, Part X, line	13
	(a) Description of investment	(b) Book value	(c) Method of valuation. C	Cost or end-of-year market value
(1)				
(2)				
(3)		·-		
(4)		-		
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.)		<u> </u>	
Part IX		. F 000 Deat N/ lea	- 44 - 0 Farm 000 Port V Inc	. 15
	Complete if the organization answered "Yes"	to Form 990, Part IV, III Description	e 11d See Form 990, Part X, line	(b) Book value
	(a)	Description		(b) Dook value
(1)		<del></del>		
(2)				
(3)				
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)		<del></del>		
	umn (b) must equal Form 990, Part X, col (B) lin	e 15.)		
Part X	Other Liabilities.			
<u></u>	Complete if the organization answered "Yes"	to Form 990, Part IV, Im	e 11e or 11f. See Form 990, Part	t X, line 25.
1.	(a) Description of liability		(b) Book value	
	deral income taxes			
(2) P	AYROLL WITHHOLDINGS		11,118.	
	UE TO AFFILIATES		34,494.	
(4)				
(5)				
(6)				
(7)				
(8)				
			1	
(9)	lumn (b) must equal Form 990, Part X, col. (B) lin		45,612.	

432053 10-01-14

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

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 ILLINOIS PIPE TRADES AS Part XI Reconciliation of Revenue per Audited Financial Sta		<u>36–6080375</u> Page <b>4</b> Return.
Complete if the organization answered "Yes" to Form 990, Part IV, Irr		ioturii.
Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	<u> </u>
<b>b</b> Donated services and use of facilities	2b	4
c Recoveries of prior year grants	2c	_
d Other (Describe in Part XIII )	2d	۱ م
e Add lines 2a through 2d	•	2e 3
<ul><li>3 Subtract line 2e from line 1</li><li>4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:</li></ul>		3
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII )	4b	
c Add lines 4a and 4b		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	)	5
Part XII Reconciliation of Expenses per Audited Financial St		r Return.
Complete if the organization answered "Yes" to Form 990, Part IV, Iir	ne 12a	<del></del>
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.	اما	
a Donated services and use of facilities .	2a   2b	-
<ul><li>b Prior year adjustments</li><li>c Other losses</li></ul>	2c	†
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d		2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 4	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	4
b Other (Describe in Part XIII)	4b	<b>-</b>
c Add lines 4a and 4b	10.1	4c   5
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 Part XIII Supplemental Information.	(8.)	1 5 1
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a		4, 1 at X, iiio 2, 1 at X,
PART X, LINE 2:	NICOME MAYES INDER SI	ECTTON .
THE ASSOCIATION IS EXEMPT FROM FEDERAL IN		
501(C)(5) OF THE INTERNAL REVENUE CODE AS		
ALL ORGANIZATIONS AFFILIATED WITH THE UNI	ITED ASSOCIATION OF	JOURNEYMEN AND
APPRENTICES OF THE PLUMBING AND PIPE FIT	TING INDUSTRY OF THE	E UNITED STATES
AND CANADA, EXCEPT ON NET INCOME DERIVED	FROM UNRELATED BUS	INESS
ACTIVITIES. FOR THE YEAR ENDED MAY 31,	2015, THE ASSOCIATION	ON HAS
DETERMINED THAT NO INCOME TAXES ARE DUE	FOR ITS ACTIVITIES.	ACCORDINGLY,
NO PROVISION FOR INCOME TAXES HAS BEEN R	ECORDED IN THE CONS	OLIDATED
FINANCIAL STATEMENTS.		
PINANCIAL STATEMENTS.		
THE ASSOCIATION FILES FORM 990, RETURN O	F ORGANIZATION EXEM	
432054 10-01-14	12	Schedule D (Form 990) 2014
	3 LINOIS PIPE TRADES	ASSOCI 109001

Schedule Differm 9900 2014 TILLINGIS PIPE TRADES ASSOCIATION 36-6080375 Page 8 PART XIII SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE UNTIL THE APPLICABLE STATUTE OF LIMITATIONS EXPIRES.	Schedule D (Form 990) 2014 ILLINOIS PIPE TRADES ASSOCIATION	36-6080375 Page 5
TAX. THE ASSOCIATION'S RETURN IS SUBJECT TO EXAMINATION BY THE INTERNAL	Part XIII Supplemental Information (continued)	
		BY THE INTERNAL
REVENUE SERVICE UNTIL THE APPLICABLE STATUTE OF LIMITATIONS EXPIRES.		
	REVENUE SERVICE UNTIL THE APPLICABLE STATUTE OF LIMITATION	ONS EXPIRES.
	<del></del>	
	<del></del>	
		·
		<del></del>
		<del></del>
		· -

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

▶ Attach to Form 990.

2014

OMB No 1545-0047

Open to Public

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

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

ILLINOIS PIPE TRADES ASSOCIATION

General Information on Grants and Assistance

Part

criteria used to award the grants or assistance?

**Employer identification number** 36-6080375 Inspection

**%** 

X Yes

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for mont	oring the use of grant	funds in the United	States	1			1
	Domestic Organi	zations and Domestic	Governments. Co	omplete if the orga	ınızatıon answered "Y	es" to Form 990, Part	V, line 21, for any	
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if additive	onal space is need	pe				-1
1 (a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	- 1
ILLINOIS AFL-CIO REGISTRATION AND EDUCATION FUND - 534 SOUTH SECOND SMERE, SPRINGFIELD II, 62701	36-2388785	501(C)5	20 786.	0			CONTRIBUTION	i
								,
	and government or	rganizations listed in th	ne line 1 table					l •l
3 Enter total number of other organizations listed in the line 1 table	is listed in the line	1 table						•1 :

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

432101 10-15-14

Schedule I (Form 990) (2014)

Schedule I (Form 990) (2014)

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432102 10-15-14

Page 2

36-6080375

ILLINOIS PIPE TRADES ASSOCIATION

Schedule 1 (Form 990) (2014)

### **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.

Open to Public

**Employer identification number** 

OMB No 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

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

Inspection

	ILLINOIS PIPE TRADES ASSOCIATION	36-608037	7 <u>5</u>	_
Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form	990,		
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for perso	nal use		
	Travel for companions Payments for business use of personal re	sidence		
	Tax indemnification and gross-up payments  Health or social club dues or initiation feet	s		
	Discretionary spending account Personal services (e.g., maid, chauffeur, c	:hef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	ıtıon's		
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization	on to	1 .	}
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation of	ommittee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			
а	Receive a severance payment or change-of-control payment?	<u>4a</u>	-	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n		
	contingent on the revenues of	_		
	The organization?	<u>5a</u>	+	
b	Any related organization?	<u>5b</u>	<del> </del>	ļ
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n		
	contingent on the net earnings of			
	The organization?	6a	+	
b	Any related organization?	<u>6b</u>	-	
_	If "Yes" to line 6a or 6b, describe in Part III.		}	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	<b>├-</b>	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	1	]	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8_	+	<u> </u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			l

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

Schedule J (Form 990) 2014

Regulations section 53 4958-6(c)?

36-6080375

Page 2

ILLINOIS PIPE TRADES ASSOCIATION

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2014

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-MIS	and/or 1099-MISC compensation	(C) Retirement and	ple	(E) Total of columns	m.
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benetits	(c)-(i)(g)	in column (B) reported as deferred in prior Form 990
(1) CHAD DAWSON	8	117,024.	0.	10,970.	67,643.	18,720.	214,357.	0.
Z	∷≣	0	0	0.	1 1	0	0	0.
(2) WILLIAM HITE JR.	Θ	117,024.	0.	11,461.	67,456.	18,720.	214,661.	0
ORGANIZER	<b>(II)</b>	0	0	0.		0	0	0.
(3) JOSEPH NAGLE	€	129,744.	0	3,483.	62,68	17,280.	216,190.	0
	(ii)	• 0	0			0	0	0.
(4) RICK TERVEN JR.	()	117,024.	0.	6,671.	59,100.	14,840.	197,635.	0
POLITICAL DIRECTOR	(ii)	0	0.	0.	0	0.	0.	0.
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Schedule J (Form 990) 2014

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### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

ILLINOIS PIPE TRADES ASSOCIATION

**Employer identification number** 36-6080375

FORM 990, PART VI, SECTION A, LINE 6:
THE ASSOCIATION'S MEMBERSHIP CONSISTS OF ANY ORGANIZED UNIONS OF THE
JOURNEYMEN AND APPRENTICES OF THE PLUMBING AND PIPE FITTING INDUSTRY OF THE
STATE OF ILLINOIS ATTACHED TO THE UNITED ASSOCIATION.
FORM 990, PART VI, SECTION A, LINE 7A:
NOMINATIONS FOR OFFICE ARE MADE BY MEMBERS OF THE ASSOCIATION FROM THE
FLOOR AT A REGULAR CONVENTION OF THE ASSOCIATION. MEMBERS ELECT THE
GOVERNING BODY OF THE ASSOCIATION FROM THE NOMINEES.
FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND PROVIDED TO
THE SECRETARY-TREASURER FOR REVIEW. THE SECRETARY-TREASURER PROVIDES THE
FORM TO THE ENTIRE EXECUTIVE BOARD FOR THEIR CAREFUL REVIEW AND APPROVAL.
THE FORM IS THEN SIGNED AND FILED.
FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
AT THE ASSOCIATION'S OFFICE.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Identification of Disregarded Entities Complete If the organization answered "Yes" on Form 990, Part IV, line 33.

TRADES ASSOCIATION

ILLINOIS PIPE

Name of the organization Department of the Treasury internal Revenue Service

Part

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2014

▶Information about Schedule R (Form 990) and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

**Employer identification number** 

36-6080375

▶ Attach to Form 990.

(g) Section 512(b)(13) controlled ŝ × entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Direct controlling End-of-year assets e status (if section Public charity 501(c)(3)) Total income Exempt Code ত্ত section Legal domicile (state or Legal domicile (state or foreign country) foreign country) LLINOIS CANDIDATES FOR POLITICAL ROVIDES SUPPORT FOR Primary activity Primary activity <u>e</u> **PFICE** ILLINOIS PIPE TRADES POLITICAL EDUCATION COMMITTEE - 91-2100007, 534 S SECOND ST. Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity SPRINGFIELD, IL 62701 Part II

Schedule R (Form 990) 2014

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Schedule R (Form 990) 2014 ILLINOIS PIPE TRADES ASSOCIATION

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant income (related, unrelated,		(f) Share of total income	(g) Share of end-of-year	-	(h) Disproportionate allocations?	(i) Code V-UBI amount in bo	General of managin	General or Percentage managing ownership	age ,
		foreign country)		sections (	512-514)		assets		2	K-1 (Form 1065)	5) Yes No		
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or frust during the tax year.	ganizations Taxable irporation or trust duri	as a Corport	ration or Trust Co	omplete if the	e organization	answered "Ye	ss" on Form	990, Part IV,	line 34 b	ecause it had	one or m	ore related	
(a)			(q)	(0)	<del>(</del> 0)		(e)	€		(b)	Ξ	()	
Name, address, and EIN of related organization	N. c	Prim	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity		Type of entity (C corp, S corp, or trust)	Share of total income		Share of Fend-of-year assets	Percentage ownership	512(b) contro	2 ge (3)
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Schedule R (Form 990) 2014

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Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ž
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ons with one or more r	elated organizations listed	ın Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	ıty			<b>1</b> a		×
b Gift, grant, or capital contribution to related organization(s)				<del>Q</del>	×	
c Gift, grant, or capital contribution from related organization(s)				15		×
d Loans or loan guarantees to or for related organization(s)		٠		19		×
e Loans or loan guarantees by related organization(s)				<del>1</del>		×
f Dividends from related organization(s)				<b>*</b>		×
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				ŧ		×
i Exchange of assets with related organization(s)				;=		×
j Lease of facilities, equipment, or other assets to related organization(s)				<b>;</b> -	1	×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
I Performance of services or membership or fundraising solicitations for related organization(s)	janization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	Janization(s)			Ę		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ation(s)			£	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	1	×
<ul> <li>P Reimbursement paid to related organization(s) for expenses</li> </ul>	:			10	_	$\sim$
<ul> <li>Reimbursement paid by related organization(s) for expenses</li> </ul>		•				×
r Other transfer of cash or property to related organization(s)	:		:	÷		×
s Other transfer of cash or property from related organization(s)		•		18		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	is line, including covered	relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) ILLINOIS PIPE TRADES PEF	В	501,976.TO	TO FULFILL PRIMARY ACTIVITY	VITY		
(2)						
(3)						
(4)						i
(9)						1
(9)						
432163 08-14-14	33		Schedule R (Form 990) 201	R (Form	990) 2	01

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Schedule R (Form 990) 2014 ILLINOIS PIPE TRADES ASSOCIATION

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

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

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(a)	<b>②</b>	<u> </u>	<del>©</del>		(6) (7)	<u> </u>	<b>3</b>	3	(¥)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated, 501(c)(3)	Share of total	Share of end-of-year	Dispropor- tronate allocations?	Dispropor- Code V-UBI General or Percentage bonate amount in box 20 managing ownership allocations? of Schedule K-1 partner?	General or managing partner?	Percentage ownership
		country)	sections 512-514)	Ncome Income	assets	Yes No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2014

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Part VII	(Form 990) 2014 Supplemental Info	ormation	
		nation for responses to questions on Schedule R (see instructions)	
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