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Form 990-EZ

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)

OMB No. 1545-1150 20**15**

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

▶ 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 www.irs.gov/form990.

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American Federation of Labor, West Central Illinois Labor Council Name change Institution Final institution Final institution Final institution American enterior American enterior American response of the province, country, and ZIP or foreign postal code American enterior America	В				
Number and street (or P.C.) box, if mals not delivered to street address) Room/suite E Telephone number Telephone number Room/suite E Telephone number Room/suite Room/suite E Telephone number Room/suite R					-0803283
Post contributions and provides 100 NF_Jefferson Ave 140 NF_J	_		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Tele		
Approximation provincy G Accounting Method Cash Accounting Method Cash Account Other (specify)	_		IAOO NE lefferson Ave	309	/674-2614
Application pending Peoria, Illinois 61603-3147 Number 338	=				
A Accounting Method:	=			mber 🕨	338
Website: Form of programs status (check only one)	G /	Account	ing Method ☐ Cash ☐ Accrual Other (specify) ☐ H Check	▶	the organization is not
K Form of organization	I V	Vebsite			
K Form of organization	JΤ	ах-ехеп	npt status (check only one) — ☐ 501(c)(3)	990, 990-	EZ, or 990-PF).
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Check if the organization used Schedule O to respond to any question in this Part I Check if the organization used Schedule O to respond to any question in this Part I 29, 20 Program service revenue including government fees and contracts 2 Program service revenue including government fees and contracts 3 34, 4 Investment income 4 Investment income 4 Investment income 5 Cain or (loss) from sale of assets other than inventory 5 Sa Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sb Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Sc Cain or (loss) from sale of assets other than inventory (Subtract line 5b Sc Sc Sc Sc Sc Sc Sc S					
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1 Contributions, gifts, grants, and similar amounts received 2 Program service revenue including government fees and contracts 2 2	Р	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instru	ctions	for Part I)
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b Less: cost or other basis and sales expenses .	ŧ	4		4	133
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	6	્ર 5a		.] [
c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	Z	b		<u> </u>	
c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	=	C		5c	
c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	5	6			
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c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	بنية ريد			4	
c Less: direct expenses from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	Š	b	· · · · · · · · · · · · · · · · · · ·	} }	
c Less: direct expenses from gaming and fundraising events 6c 573 d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	ركل		aum of such areas income and another transport A45 000)		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 7a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7b Total revenue (describe in Schedule O) 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors OGDEN, UT 14 Occupancy, rent, utilities, and maintenance 15 Printing, publications, postage, and shipping 16 Other expenses (describe in Schedule O) 17 Total expenses. Add lines 10 through 16 18 Excess or (deficit) for the year (Subtract line 17 from line 9) Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 42,0 20 Other changes in net assets or fund balances (explain in Schedule O) 21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Net assets or fund balances at end of year. Combine lines 18 through 20	_	1	0,000	1 1	
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C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 Other revenue (describe in Schedule O)		1 .		4]	
8 Other revenue (describe in Schedule O)			<u> </u>	70	
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Benefits paid to or for members Salaries, other compensation, and employee benefits Professional fees and other payments to independent contractors . OGDEN,.UT Professional fees and other payments to independent contractors . OGDEN,.UT Printing, publications, postage, and shipping		 	Grants and similar amounts paid (list in Schedule O)		69,766 18.367
Salaries, other compensation, and employee benefits		1	Paratta and the arter manufacture [12] MAY 1 % /UID ICI	\rightarrow	18.367
Professional fees and other payments to independent contractors . GGDEN,	S	12		 	7,443
16 Other expenses (describe in Schedule O)	nse	1	Professional fees and other payments to independent contractors . OGDEN. UT	-	19,974
16 Other expenses (describe in Schedule O)	be	1	Occupancy, rent, utilities, and maintenance	\vdash	14,217
Other expenses (describe in Schedule O)	ŭ			_	890
Total expenses. Add lines 10 through 16		16			10,243
18 Excess or (deficit) for the year (Subtract line 17 from line 9)		17		-	71,134
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	Ŋ	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	+	(1,368)
21 Net assets or fund balances at end of year. Combine lines 18 through 20	set	19			1-1-4-7
21 Net assets or fund balances at end of year. Combine lines 18 through 20	let As		end-of-year figure reported on prior year's return)	19	42,059
21 Net assets or fund balances at end of year. Combine lines 18 through 20		20	Other changes in net assets or fund balances (explain in Schedule O)	20	0
For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 10642I	<u>_</u>	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	40,691
	For	Paperv	work Reduction Act Notice, see the separate instructions. Cat. No 10642I		Form 990-EZ (2015)

Form	990-EZ (2	2015)						Page 2
Pa	rt II	Balance Sheets (s				, <u>, , , , , , , , , , , , , , , , , , </u>		
		Check if the organiz	ation used Schedule	O to respond to a	ny question in this			
	_					(A) Beginning of year	L.,	(B) End of year
22		n, savings, and investn			<i>.</i> [42,059		40,691
23		and buildings					23	
24		r assets (describe in S	•				24	
25 26		l assets				42,059		40,691
27		assets or fund balance	•		· · · · · ·	42,059	26	40.004
Par		Statement of Progr					21	40,691
		Check if the organiz		•		•	1	Expenses
Wha	t is the	organization's primary		- 10 10 point 10 th	,, q===================================			quired for section
		e organization's progr		shments for each o	f its three largest n	rogram services		(c)(3) and 501(c)(4) anizations, optional for
		d by expenses. In a					. ~	ers.)
pers	ons ber	nefited, and other relev	ant information for ea	ch program title.	·		l	
28								
						••••		
					•••••			
	(Grants	s \$) If this amount	includes foreign gra	ints, check here .	<u>., ▶ □</u>	288	
29		•						
	(C		\	!				
30	(Grants	S \$) If this amount	includes foreign gra	ints, check here .	<u>P []</u>	298	1
30			***************************************					
	(Grants	 s \$) If this amount	includes foreign gra	ints, check here .	▶ □	302	,
31		program services (des					1	
	(Grants			ıncludes foreign gra			31a	3
32	Total p	orogram service exp					32	
Par	t IV	List of Officers, Direct					nstru	ctions for Part IV)
		Check if the organiz	ation used Schedule	O to respond to ar	, 	·		🗸
		(a) Nama and titl	_	(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employ	ee (e)	Estimated amount of
		(a) Name and titl	е	hours per week devoted to position	(Forms W-2/1099-MISC (if not paid, enter -0-)	benefit plans, and	- [17	other compensation
				-	(ii not paid, enter -0-)	deterred compensatio	<u>''</u>	
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Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	$\overline{}$	
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	Yes	No ✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
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		1
b b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 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	35b		✓
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		1
37a b 38a	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] 1250 Did the organization file Form 1120-POL for this year? 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?	37b		√
b 39 a b 40a	If "Yes," complete Schedule L, Part II and enter the total amount involved	38a		
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		
С	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 sections 4912, 4955, and 4958		İ	
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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		/
41	List the states with which a copy of this return is filed ▶ none			
42a	The organization's books are in care of ▶ Nancy Gardner Telephone no. ▶ 3 8 9	7-6	97-6	<u> </u>
		61603		
b	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)?	42b	Yes	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).			.
С	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶	42c		<u> </u>
43	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	• •	Yes	► □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	res	No
b	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		<u> </u>
c d	Did the organization receive any payments for indoor tanning services during the year?	44c 44d		√
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√

Form 990-E	EZ (2015)						Page 4
46 D	id the organization engage, directly or in candidates for public office? If "Yes," of	ndirectly, in political c	ampaign activities on Part I	behalf of or	in opposit	ion	es No
Part VI	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	s only is must answer que	estions 47–49b and	52, and con			lines
	Check if the organization used Sc	hedule O to respond	I to any question in t	his Part VI	<u> </u>	<u> </u>	_ , 🗆
	id the organization engage in lobbying ear? If "Yes," complete Schedule C. Par		section 501(h) election			tax	es No
•	the organization a school as described i						_
49a D b If	id the organization make any transfers t "Yes," was the related organization a se complete this table for the organization's	o an exempt non-cha ection 527 organization	ritable related organian?	zation?		. 49a . 49b	and key
	mployees) who each received more that						
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health b contributions to benefit plans, a compens	employee nd deferred	(e) Estimated a other compe	
51 C	otal number of other employees paid over omplete this table for the organization 100,000 of compensation from the organical Name and business address of each independent	's five highest compo anization. If there is no	ensated independent			received m	ore than
						<u> </u>	
			-				
	otal number of other index and and and						
52 D	otal number of other independent contr od the organization complete Sched ompleted Schedule A	-	•	inizations mu		 ı a .▶[]Yes [] No
	alties of perjury, I declare that I have examined this ct, and complete Declaration of preparer (other that					owledge and be	elief, it is
Sign	Nancy M Larden Signature of officer			S Date	[9]16		· <u>·</u>
Here	Nancy M Gardner Financial Sector Type or print name and title	etary-Treasurer					
Paid Prepar	Print/Type preparer's name	Preparer's signature	Da	ate	Check Self-employ		
Use Or	nly Firm's name >				sEIN▶		
May the	Firm's address ► IRS discuss this return with the prepare	r shown above? See	Instructions	Phon	e no.	► ☐ Yes [□ No

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on 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," on 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," on 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

- 0.		Acceptance Complete Dart III			
	ection 501(c)(4), (5), or (6) orga of organization	inizations Complete Part III.		Employer ide	entification number
Ameri	can Federation of Labor We	est Central Illinois Labor Council			37-0803283
Part		e organization is exempt und	er section 501(c) or is a section 527	
1		the organization's direct and indire	<u>`</u>		
2	Political expenditures .			. .	\$ 1,250
3	Volunteer hours				0
					······································
Part		e organization is exempt und			<u> </u>
1		excise tax incurred by the organization			\$
2		excise tax incurred by organization			\$(
3		ed a section 4955 tax, did it file Fo		ear?	
4a b	If "Yes," describe in Part		· · · · · ·		LYes LNo
Part		e organization is exempt und	er section 501/	c) except section 50	1(a)(3)
1		ly expended by the filing organization			1(0)(0).
-				•	\$
2		filing organization's funds contrib			*
	527 exempt function acti	vities		. .	\$
3		expenditures. Add lines 1 and 2			
	line 17b			<i></i> > :	\$
4	Did the filing organization	n file Form 1120-POL for this year	?		🗌 Yes 📝 No
5		ses and employer identification nu			
		ents. For each organization listed,			
		ontributions received that were pro			
	as a separate segregated			That space is freeded, pro	The mornation in art iv.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization if
					none, enter -0
(1)	one				
(2)					
(2)					
(3)					
			<u> </u>		
(4)		ļ			
	<u> </u>		 		
(5)		ļ	-		
/G)	· · · · · · · · · · · · · · · · · · ·				
(6)			1	1	

n	2
Page	~

Schedule	C /Earm	gan or	990-E7	1 2016
scneaule	C (FORD	990 01	330-62	.) 2013

Pa	t II-A Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ► ☐ if the filing organization beloname, address, EIN, expense					up member's
D	Check ► ☐ If the filing organization che				•	
<u> </u>	Limits on Lobby			ioi provisions a	(a) Filing	(b) Affiliated
	(The term "expenditures" mea	• .)	organization's totals	group totals
1:			<u> </u>	·	-	
	Total lobbying expenditures to influence a	•		-		
,	Total lobbying expenditures (add lines 1a	~				·
	Total exempt purpose expenditures (add l	ines 1c and	1d)			· · · · ·
1	 Lobbying nontaxable amount. Enter the columns. 	e amount	from the following	table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbyin	g nontaxable amoun	t is:		
	Not over \$500,000	20% of the a	mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.]	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	is 5% of the excess o	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
9	Grassroots nontaxable amount (enter 25%	•				
	 Subtract line 1g from line 1a. If zero or les 					
į	Subtract line 1f from line 1c. If zero or less	•			L	
į	If there is an amount other than zero or reporting section 4911 tax for this year?	n either line		the organization		☐Yes ☐ No
	4-Yea (Some organizations that made a sect	ion 501(h) e	Period Under sec	tion 501(h) e to complete all		s below.
	Lobbying I	Expenditure	s During 4-Year A	veraging Period	T	
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2	a Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
ı	Total lobbying expenditures					
	d Grassroots nontaxable amount					
	Grassroots ceiling amount (150% of line 2d, column (e))					
	Grassroots lobbying expenditures					

Part	II-B . Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	i 5768	1	
For e	each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed	(a	a)		(b)	
	ription of the lobbying activity.	Yes	No	A	moun	t
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?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
9 h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
i	Total. Add lines 1c through 1	\vdash				-
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					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		<u> </u>
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	L	<u> </u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."		Part		line	3, is
1 2	Dues, assessments and similar amounts from members	of	1			
а	Current year		2a	i		
b	Carryover from last year		2b			
С	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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	/ing				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
2 (see	Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated grown instructions); and Part II-B, line 1. Also, complete this part for any additional information. A Line1	up list	t); Par	t II-A, I	ines	and
J			·	•		
Donat	ions were made and tickets purchased to fundraisers for candidates or office holders who supported work	cing fa	mily i	ssues.		
			-			
			·			
	······		·			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 2015

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Department of the Treasury Internal Revenue Service ► 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	<u> </u>	Employer identification number
American Federation of Labor, West Central Illinois Labor Council		37-0803283
501 (c)(3) donations Part	1 Line 10	
PACE - Peoria Area Community Events - Peoria, IL	\$2,000	
Thomas Jefferson Educational Foundation- Peoria, IL	500	
Heart Of Illinois United Way - Peoria, IL	2,820	
Union Sportsman's Alliance	500	
Interfaith Workers' Justice - Chicago, IL	200	••••
Children's Hospital of Illinois - Peoria, IL	100	
Peoria County Veteran's Memorial - Peoria, IL	1,000	
Dream Center of Peoria	100	•••••
Heart of IL Skating Club - Peoria, IL	100	
NAACP - Peoria Chapter	100	
Heart of Illinois Gold Star Families	_100	\$7,520
SUPPORT OF UNION ACTIVITIES	·	
IBEW 2 - Charity Fundraiser	200	••••••
West Central IL Building Trades - Charity Golf Outing for United Way	500	
IBEW 34 Charity Golf Outing - Galesburg, IL B/B B/S	100	
Operating Engineers 649 Scholarship fundraiser	100	
Laborers 996 Charity Golf Outing (DAD'S)	100	
Special Assistance to help working families	5,500	
Peoria Labor Temple Association	500	57,000
COMMIUNITY SUPPORT	·	
Assistance to Military Families	500	
Local & State Political candidates or office holders support	1,250	
Worker's Memorial Event - OSHA -4/28 - Peoria	197	
Heart of Illinois Fair - Peoria Sponsorships	1,850	33,797
Affiliation Fee: Illinois AFL-CIO - annual		\$ 50 Totals \$18,367
For Panerwork Reduction Act Notice see the Instructions for Form 6	200 or 200 E7 Cat No. 51	0ECV Cabadida O /Fa 000 000 ET /004F

Name of the organization ,			Employer identification number
American Federation of Labor - West Central Illinois Labor Council			37-0803283
.			
Part 1 - Line 16			
PALM - Peoria Area Labor/Management - annual membership	500		
COSTCO - annual membership	110		
miles and the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the second of the se			
Illinois Labor History Society - annual membership	200	-	·····
Cincinnati Insurance Company - Business package insurance policy	1,233		
Conferences and workshops	148		
Mode and Travel representing the Laker Council	0.053		
Meals and Travel representing the Labor Council	8,052		
Totals	\$10,243		
			

chedule O (Form 990 or 990-EZ) (2015)	Page 2
lame of the organization	Employer identification number
merican Federation of Labor, West Central Illinois Labor Council	37-0803283
015 Part III	
organization's primary exempt purpose	
communication, education and community service for affiliated unions. Educate on labor issues, provid	e programs and do what we can
be a good neighbor in our communities.	
conations received specifically to: Sponsor events at the Heart of Illinois Fair, sponsor and host the	Labor Day Parade, Negotiation
ducation workshop for high school students (115), Provide emergency assistance to members (5 members)	ers), Provide home repair
ssistance for Military Families when a family member is on active duty (10 families), participate in the Ad	opt a school program providing a
thristmas party for all the students at our adopted school and also needed supplies for students and teach	chers and we support workers in our
ommunity.	
dopt a school program through school district and Chamber of Commerce at a Pre K through 8th grade	public school provide assistance,
nentoring, supplies, books and a Christmas Party with gifts for the children. The school has 750 students	<u> </u>
abor Day Parade on Labor Day to educaate community about unions, union employers and union produc	cts in the Greater Peoria area.
communicate with union members and unions on issues concerning labor various times throughout the	year. this is accomplished with
orkshops, faxes, mailings, emails and facebook.	
ducate high school students on the process of negotiations. This was accomplished with a workshop for	or 115 high school students from
our area high schools who participated in a mock negotiations situation.	
ponsor two event (kiddy pedal pull and Kids Ride Day) at our local Heart of Illinois Fair.	
continue our program to assist Military Families who have a spouse serving active duty, with home repair	's such as water heaters/furnaces/
ir conditioners/pipes or other plumbing, roofs, carpentry, electrical issues or other items necessary to be	e repaired. We assisted ten
amilies in 2015.	
leld a fundraiser to raise funds to assist working families with an emergency situation.	

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Name of the organization **Employer identification number** American Federation of Labor, West Central Illinois Labor Council 37-0803283 Officers - Trustees and Executive Board Part IV Michael Everett **President** 5 \$1,320 **Ronald Cox Executive Vice President** \$240 **Todd Holzinger Vice President** \$240 **Nancy Gardner** \$2,400 Financial Sec'y-Treasurer Phillip Salzer Recording Secretary \$1,200 0 **Evonne Fleming** Trustee \$240 0 **Martin Helfers** Trustee \$240 0 Thomas McLaughlin Trustee \$240 William Purcell Sgt at Arms \$120 Arnulfo Carranza **Executive Board** \$90 **Gregory Daniel Executive Board** \$110 William Halstead **Executive Board** \$90 Bonn ie Hester **Executive Board** \$100 Connie Higgins **Executive Board** \$120 **Anthony O'Brian Executive Board** \$60 Shari Royer \$110 **Executive Board** Randy Smith **Executive Board** \$0 0 Alison Watson **Executive Board** \$110