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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

	<u>A</u> F	or the	2015 calendar year, or tax year beginning J	UN 1, 2015 and	dending M	AY 31, 20	16	
	Boa	heck if pplicable	C Name of organization			D Employer ide	ntificatio	n number
		Addres change	ILLINOIS PIPE TRADES A	SSOCIATION				
		Name change	Bereit			36	-6080	375
		Initial return	Number and street (or P.O. box if mail is not de	livered to street address)	Room/suite	E Telephone nu		
		Final return/	534 SOUTH SECOND STREE		311			3-1945
		termin- ated				G Gross receipts \$		1,932,959.
		Amend return	SPRINGFIELD, IL 62701	<u> </u>		H(a) Is this a gro	up return	
		Application .	F Name and address of principal officer: LL v	IN MORRISSEY		for subordin	ates?	Yes X No
		pendin	SAME AS C ABOVE			H(b) Are all subordina	ates include	d? ☐ Yes ☐ No
			empt status: 501(c)(3) X 501(c) (5)		or 527	1		(see instructions)
			e: WWW.IPTAPP.COM			H(c) Group exem		
				ssociation Other	L Year	of formation: 191	O M Stat	e of legal domicile; IL
	Ра		Summary	MD A F	T 7000	OT 3 DT ON	 -	
	e S	1 6	Briefly describe the organization's mission or most	t significant activities: TRAL	E ASSU	CIATION_		
	nar		011-411			4h 050/ -4 h	-110	
	Governance		Check this box 🕨 📖 if the organization disco Number of voting members of the governing body	intinued its operations or dispo	sea or more	111a11 25% Of its 11	3	. 11
	ဗိ		Number of independent voting members of the go		•	•	4	9
	જ		Total number of individuals employed in calendar	- · ·			5	9
	Activities		Total number of individuals employed in calendary			• •	6	0
മ	çį		Fotal unrelated business revenue from Part VIII, co		· †		7a	0.
2016	۲		Net unrelated business taxable income from Form		701	•	7b	0.
=					781	Prior Year		Current Year
8	a	8 (Contributions and grants (Part VIII, line 1h)	E NOV. 1 8 2016	PR-0	105,00	0.	226,833.
\geq	eun	9 F	Program service revenue (Part VIII, line 2g)	101		<u>1,927,07</u>		1,686,822.
NOV	Revenue		nvestment income (Part VIII, column (A), lines 3, 4	2 (T () 1 1 1 1 1 1 1 1 1			0.	0.
_	_		Other revenue (Part VIII, column (A), lines 5, 6d, 8d	11		20,08		19,304.
SCANNED			Total revenue - add lines 8 through 11 (must equal			2,052,15		1,932,959.
Z			Grants and similar amounts paid (Part IX, column (·	21,35		30,567.
			Benefits paid to or for members (Part IX, column (·		0.	0.
	ses		Salaries, other compensation, employee benefits (• •		1,390,34	0.	1,292,117.
	Expenses		Professional fundraising fees (Part IX, column (A),		0.	·	 	
	Ä		Total fundraising expenses (Part IX, column (D), lın Other expenses (Part IX, column (A), lines 11a-11d			382,99	1 -	514,519.
			Fotal expenses. Add lines 13-17 (must equal Part l	,	-	1,794,68		1,837,203.
			Revenue less expenses. Subtract line 18 from line			257,47		95,756.
	So			·-	Beg	ginning of Current Y		End of Year
	Net Assets or Fund Balances	20 1	Fotal assets (Part X, line 16)			823,56		1,081,242.
	SB	21 1	Total liabilities (Part X, line 26)			45,61		207,536.
			Net assets or fund balances. Subtract line 21 from	line 20		777,95	0.	<u>873,706.</u>
			Signature Block					
			ties of perjury, I declare that I have examined this return,				of my know	wledge and belief, it is
	<u>true,</u>	correct	, and complete. Declaration of preparer (other than office	er) is based on all information of w	hich preparer	has any knowledge.	1-/11	
	۸.		Signature of officer			Date	1/16	
	Sign		•	TARY-TREASURER		Duto	/	
	Here	•	KEVIN MORRISSEY, SECRE Type or print name and title	TAKI-IKEASUKEK				
			Print/Type preparer's name	Preparer's signature	D	ate / / Check	k	PTIN
	Paid			VICTOR ANCICH	12	0/27/16 If self-e	mployed	00201493
	Prep		Firm's name LEGACY PROFESSIO			Firm's EIN		2-0043599
	Use (Firm's address 311 S. WACKER DR					
			CHICAGO, IL 6060	6		Phone no.	<u>312-3</u>	68-0500
	May	the IR	S discuss this return with the preparer shown abo	ove? (see instructions)		-	Ī	X Yes No

	h 990 (2015) ILLINOIS PIPE TRADES ASSOCIATION 36-6080	<u> 1375</u>	P	age 3
Pa	art IV Checklist of Required Schedules			
			Yes	No
1	' Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	х	}
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	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	<u> </u>		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	İ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ü	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,		<u> </u>	
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ĺ	X
_		_	 	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
_	Schedule D, Part III	8	<u> </u>	_^
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?			77
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			37
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	l		
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	ļ	X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ļ	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	ł		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	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	- 10	14a		Х
	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	ŀ		ļ
	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			
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
46	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		 -	
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
47	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17		17		X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
18		18		Х
40	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10	 	
19	Did the organization report more than \$15,000 or gross income from gaming activities on Fait viii, line \$47 ii Fes,	1	1	i .

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complete Schedule G, Part III

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	`Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	X	
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			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	ļ	j]
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ļ
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease]
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
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,"			
	complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		!	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31_		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 1		
	Part V, line 1	34	_X_	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	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		
	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>_X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		Ţ	
	Note, All Form 990 filers are required to complete Schedule O	<u>38</u>	X 000 /	0015
		rorm	990 (ZU15)

ILLINOIS PIPE TRADES ASSOCIATION 36-6080375 Form 990 (2015) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 6 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 9 filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3h 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 Х **b** If "Yes," enter the name of the foreign country: 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? X 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5ç 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b X were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Х Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 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 sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a 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 10a a 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 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against

13b 13c 14a X

c Enter the amount of reserves on hand

amounts due or received from them)

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Section 501(c)(29) qualified nonprofit health insurance issuers.

organization is licensed to issue qualified health plans

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

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

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12a

13a

13

11b

12b

Form 990 (2015) ILLINOIS PIPE TRADES ASSOCIATION 36-6080375 Page Part Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			[X]					
Sec	tion A. Governing Body and Management								
•			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 11								
	If there are material differences in voting rights among members of the governing body, or if the governing	}	1						
	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 9								
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	Х						
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	Х						
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	х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
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					
	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	The state of the s	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					
b	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								
	in Schedule O how this was done	12c							
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?								
а	The organization's CEO, Executive Director, or top management official	15a		X					
b	Other officers or key employees of the organization	15b		X					
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a	Ĭ	X					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		ļ						
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure		•						
17	List the states with which a copy of this Form 990 is required to be filed NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le						
	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	financ	cial						
13	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
20	LYNN KARNER, EXECUTIVE DIRECTOR - 217-528-1945								
	534 SOUTH SECOND STREET, SUITE 311, SPRINGFIELD, IL 62701								

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average	(C) Position					1136	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	box	not c , unle cer ar	ss pe	rson	is bo	th a	compensation	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CURTIS CADE	10.00									
INTERNATIONAL REPRESENTATIVE		<u> </u>	<u> </u>	X		╄	├-	0.	0.	O.
(2) CHARLES BAILEY	1.00	-						F 000		•
PRESIDENT	1.00	<u> </u>	<u> </u>	X	ļ	-	 -	5,000.	0.	0.
(3) KEVIN MORRISSEY	1.00	{						F 000		•
SECRETARY-TREASURER	1.00	<u> </u>		X			<u> </u>	5,000.	0.	0.
(4) JAMES COYNE	1.00	-								•
VICE PRESIDENT	1.00	-	ļ	X	}_		├-	0.	0.	0.
(5) RICK BECK	1.00	┨								0
VICE PRESIDENT - NEW	1.00	├		X	_	├	╀	0.	0.	0.
(6) JOHN HAINES	1.00	┨			l	ł			0	0
VICE PRESIDENT	1.00	├	-	Х		-	-	0.	0.	0.
(7) TOM MCCUNE	1.00	ļ								0
VICE PRESIDENT	1.00	<u> </u>		X		<u> </u>	├-	0.	0.	0.
(8) DENNIS FLEMING	1.00									•
VICE PRESIDENT	1.00	<u> </u>		X		ļ	├-	0.	0.	0.
(9) EVAN WOODING	1.00	-			ļ					0
VICE PRESIDENT - NEW	1.00	ļ	<u> </u>	Х		-	-	0.	0.	0.
(10) PAT HARDESTY	1.00	-								0
VICE PRESIDENT	1.00	<u> </u>	_	Х		┝	┝	0.	0.	0.
(11) MATT LANGENDORF	1.00	-				ĺ	1			0
VICE PRESIDENT	1.00	<u> </u>		X		-	├	0.	0.	<u> </u>
(12) ROB SCHNICKER	0.50	ł		,, l	l	}	ĺ		•	0
SERGEANT-AT-ARMS	40 00	 		X			-	0.	0.	0.
(13) LYNN KARNER	40.00	}			7.7			151 240	<u> </u>	02 252
EXECUTIVE DIRECTOR	15.00				X		-	151,349.	0.	92,253.
(14) CHAD DAWSON	40.00					37		120 402	_	05 200
ORGANIZER	40.00	-	_			X	├	138,492.	0.	95,289.
(15) WILLIAM HITE JR.	40.00					77		136 000	0	OF 116
ORGANIZER	10 00					X	-	136,889.	0.	95,116.
(16) CAMERON SMITH	40.00					v		126 260	0.	01 447
ORGANIZER	40.00	-				Х	-	126,260.	0.	<u>81,447.</u>
(17) RICK TERVEN JR.	40.00					x		127,959.	0.	90,447.
POLITICAL DIRECTOR 532007 12-16-15						42	-			Form 990 (2015)

532007 12-16-15

Form **990** (2015

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form 990 (2015)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events <u>1c</u> 226,833. d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 226,833 h Total, Add lines 1a-1f Business Code 2 a DUES ASSESSMENTS 900099 1,591,842,1,591,842 Program Service Revenue 94,980 b PER CAPITA 900099 94,980. f All other program service revenue 686,822 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6 a Gross rents b Less, rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less, direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code <u>13,500.</u> 900099 <u> 13,500.</u> 11 a GOLF OUTING RECEIPTS 5,804. 5,804. b OTHER INCOME 900099 d All other revenue 19,304. e Total. Add lines 11a-11d 932,959.1,686,822. 19,304. Total revenue See instructions.

Sect	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns All otl	her organizations must o	omplete column (A)	
	Check if Schedule O contains a respon		this Part IX	(0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	30,567.			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	050 074			
_	trustees, and key employees	252,974.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	604,188.			
7 8	Other salaries and wages Pension plan accruals and contributions (include	004,100.			
٥	section 401(k) and 403(b) employer contributions)	295,562.			
9	Other employee benefits	_ 83,439.			
10	Payroll taxes	55,954.			
11	Fees for services (non-employees).	00,700			
а	Management				
b	Legal	10,840.			
С	Accounting	12,823.			
d		75,000.			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	6,573.			
13	Office expenses	28,563.			
14	Information technology				
15	Royalties				
16	Occupancy	33,364.			
17	Travel	31,659.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	20E 010			
19	Conferences, conventions, and meetings	205,818.			
20	Interest				
21	Payments to affiliates Depreciation, depletion, and amortization	18,355.			 -
22 23	Insurance	22,559.			
23 24	Other expenses. Itemize expenses not covered	22,333.			
27	above. (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.) APPRENTICESHIP CONTEST	60,000.			
b	DUES AND SUBSCRIPTIONS	8,965.			
C	BOBO AND BODGERITIONS	0,303.			
d					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,837,203.			
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	Ì			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2015)
Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X		T T	
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	<u>790,527.</u>	1	1,036,471
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
1	Part II of Schedule L		5	1,299
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			
ĺ	employers and sponsoring organizations of section 501(c)(9) voluntary			
3	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	<u> </u>
7	Notes and loans receivable, net	<u> </u>	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 142,043.			
b		33,035.	10c	43,472
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	<u> </u>	13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets, Add lines 1 through 15 (must equal line 34)	<u>823,562.</u>	16	<u>1,081,242</u>
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	·
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability, Complete Part IV of Schedule D		21	<u> </u>
22	Loans and other payables to current and former officers, directors, trustees,			
22	key employees, highest compensated employees, and disqualified persons			
3	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	<u>. </u>
25	Other liabilities (including federal income tax, payables to related third			
ŀ	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	45,612.	25	207,536
26	Total liabilities. Add lines 17 through 25	45,612.	26	207,536
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
3	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	747,771.	27	<u>843,577</u>
27 28 29	Temporarily restricted net assets	30,179.	28	30,129
29	Permanently restricted net assets		29	
	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	
30 31 32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	777,950.	33	873,706
34	Total liabilities and net assets/fund balances	823,562.	34	1,081,242

Form **990** (2015)

Forn	n 990 (2015) ILLINOIS PIPE TRADES ASSOCIATION	36-608	0375	Pa	ge 12
Pa	art XI Reconciliation of Net Assets	-			
	Check if Schedule O contains a response or note to any line in this Part XI				
	` ,			_	
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	1,932	2,9	<u>59.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,83	7,2	03.
3	Revenue less expenses. Subtract line 2 from line 1	3	9!	5,7	56.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	77'	7,9	50.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			<u>0.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	_10	873	3,7	<u>06.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				ليل
			<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other	- 			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		ĺ
b	т. т. т. т. д. т.		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			1
	consolidated basis, or both				ĺ
	Separate basis X Consolidated basis Both consolidated and separate basis	فيامينم			1
С		audit,		x	ĺ
	review, or compilation of its financial statements and selection of an independent accountant?	dula O	2c	Δ	
•	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
Зa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	JIE AUGIL			Х
	Act and OMB Circular A-133?	ad audit	3a		_^
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	eu auuit	3h		

Form **990** (2015)

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.lrs.gov/form990.

2015

Open to Public Inspection

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

rax/ (see separate mstructions), then				
 Section 501(c)(4), (5), or (6) organiza 	tions Complete Part III.			
Name of organization			Empl	oyer identification number
ILLINOI	S PIPE TRADES AS:	SOCIATION		<u> 36-6080375</u>
Part I-A Complete if the org	ganization is exempt unde	er section 501(c) o	or is a section 527 o	rganization.
 Provide a description of the organiz Political expenditures Volunteer hours 	zation's direct and indirect politica	al campaign activities in		
Part I-B Complete if the ord	ganization is exempt unde	er section 501(c)(3	<u> </u>	
1 Enter the amount of any excise tax				
2 Enter the amount of any excise tax	· -		▶ \$	
3 If the organization incurred a section	•	Yes No		
4a Was a correction made?		Yes No		
b If "Yes," describe in Part IV				
Part I-C Complete if the org	ganization is exempt unde	er section 501(c),	except section 501(c)(3).
1 Enter the amount directly expended	d by the filing organization for sec	tion 527 exempt function	on activities >\$	
2 Enter the amount of the filing organ exempt function activities				
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here ar	nd on Form 1120-POL.		
line 17b			▶\$	
 Did the filing organization file Form Enter the names, addresses and er made payments. For each organization contributions received that were propolitical action committee (PAC). If 	mployer identification number (EIN tion listed, enter the amount paid omptly and directly delivered to a	from the filing organiza separate political organ	tical organizations to whic ition's funds. Also enter th nization, such as a separa	Yes No h the filing organization 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	SPRINGFIELD, IL			
PEF	62701	91-2100007	0.	717,822.
			<u> </u>	
		<u> </u>		
				
	1			

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15 SEE PART IV FOR CONTINUATION

Schedule C (Form 990 or 990-EZ) 2015 Part II-A Complete if the org	ILLINO janization	IS PI	IPE TRADES A	ASSOCIATION on 501(c)(3) and fil	36- ed Form 5768	6080375 Page 2 election under		
section 501(h)).						_		
				n Part IV each affiliated	group member's na	me, address, EIN,		
expenses, and share			•					
B Check If the filing organiza	tion checked	box A a	nd "limited control" pr	ovisions apply				
	ts on Lobby ditures" mea		enditures unts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influ	Jence public	opinion	(grass roots lobbying)					
b Total lobbying expenditures to influ			·-		·			
c Total lobbying expenditures (add li	_		, , , , , , , , , , , , , , , , , , , ,					
d Other exempt purpose expenditure		•						
e Total exempt purpose expenditure		ic and 1	d)					
f Lobbying nontaxable amount Ente			·	th columns.				
If the amount on line 1e, column (a) o			bying nontaxable an					
Not over \$500,000	1 (0)10.		the amount on line 1					
Over \$500,000 but not over \$1,000	2,000		00 plus 15% of the ex			1		
Over \$1,000,000 but not over \$1,500			00 plus 10% of the ex					
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exc	988 OVEI \$1,300,000				
Over \$17,000,000		\$1,000	.000					
_	g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0-							
j If there is an amount other than zei	ro on either l	ne 1h or	line 1i, did the organiz	ation file Form 4720				
reporting section 4911 tax for this			,			Yes No		
(Some organizations th	4- nat made a s See ti	ection 5 ne separ	ate instructions for l	have to complete all ones 2a through 2f.)	of the five columns			
· · · · · · · · · · · · · · · · · · ·	Lobbyi	ng Expe	nditures During 4-Ye	ar Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 20	12	(b) 2013	(c) 2014	(d) 2015	(e) Total		
2a Lobbying nontaxable amount								
b Lobbying ceiling amount								
(150% of line 2a, column(e))								
c Total lobbying expenditures								
d Creecre etc posteriable session								
d Grassroots nontaxable amount				 				
e Grassroots ceiling amount (150% of line 2d, column (e))								
f Grassroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 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 each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)		
of the lobbying activity	Yes	No	Amo	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a Volunteers?b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
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?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If "Yes," enter the amount of any tax incurred under section 4912		}			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	-				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	5044.3	(5)			
Part III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion 501(c)	(5), or se	ection		
			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		X	
Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol	itical				
expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c 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					
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d political				
expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information		5	· · · · · ·		
		l A luna da			
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro	up list), Part i	rA, imes i a	IIIO 2 (See		
instructions), and Part II-B, line 1. Also, complete this part for any additional information PART I-A, LINE 1:					
PART 1-A, DINE 1:		-		-	
TO SUPPORT STATE, COUNTY AND LOCAL POLITICAL CANDIDA	TES.				
PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS IN	FORMAT	ON:			
ILLINOIS PIPE TRADES PEF					
534 S SECOND STREET, SUITE 311 SPRINGFIELD, IL 62701					

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D

(Form 990)

Department of the Treasury

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

Employer identification number ILLINOIS PIPE TRADES ASSOCIATION 36-6080375 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last Held at the End of the Tax Year day of the tax year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X Schedule D (Form 990) 2015 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

		S PIPE TRA				Oth		36-60			age 2
·											
3	Using the organization's acquisition, access	ion, and other recor	ds, che	ck any of the	following th	at are a s	ignificant	use of its	collection	n item	IS
_	`(cneck all that apply) Public exhibition		. —	1,							
a		•	⊣ ۵	7	change progr	ams					
b	Scholarly research	•	e <u> </u>	Other							
C 4	Preservation for future generations Provide a description of the organization's c	allastians and aumia		thai firthar t	the executed	amia awa			• VIII		
5	During the year, did the organization solicit of							JSE III Fai	t AIII.		
3	to be sold to raise funds rather than to be m					iei Siitillai	asseis		Yes		No
Par	rt IV Escrow and Custodial Arran					"Voe" on	Form 90) Part IV			1110
	reported an amount on Form 990, Pa		iete ii ti	ie organizani	JII alisweleu	162 011	1 01111 99	J, raitiv,	iii ie 5, Oi		
12	Is the organization an agent, trustee, custod		diani fo	r contribution	ne or other a	peote not	ıncludad				
14	on Form 990, Part X?	nan or other interme	ulary 10	or Contribution	iis or other a	sseis noi	iriciaaea		Yes		No
h	If "Yes," explain the arrangement in Part XIII	and complete the fr	llouine	table:				L	_ res	L	J 140
D	ii res, explain the analigement in Part Alli	and complete the it	Dilowing	j table.					Amount		-
_	Beginning balance						40		Amount		
c d	Additions during the year						1c 1d				
u	Distributions during the year						1e				
4	Ending balance						1f				
1 22	Did the organization include an amount on F	orm 000 Part V line	21 for	r occrow or c	ustodial acco	ount liabil		T	Yes		No
	If "Yes," explain the arrangement in Part XIII								_ 169	-]
Pai											
	T I I I I I I I I I I I I I I I I I I I	(a) Current year	î .	Prior year	(c) Two year			ears back	(e) Four	Veare	hack
10	Reginning of year balance	(a) Current year	(D)	riioi yeai	(C) I WO you	13 Dack	(u) mee	Cars back	(e) i oui	years	Dack
1a L	Beginning of year balance		 						-		
D	Contributions				 						
C	Net investment earnings, gains, and losses			·	 						
d	Grants or scholarships										
е	Other expenditures for facilities		ľ			Ĭ					
	and programs				 			 ,			
	Administrative expenses	<u></u>									
g	End of year balance			d = /-	-\\ - -						
2	Provide the estimated percentage of the cur	rent year end baland		rg, column (a	a)) neid as.						
a	Board designated or quasi-endowment		%								
D	Permanent endowment	%									
С	Temporarily restricted endowment	%									
•	The percentages on lines 2a, 2b, and 2c sho							-4			
3a	Are there endowment funds not in the posse	ession of the organiz	ation tr	nat are neio a	ina aaministe	erea for tr	ne organiz	ation			
	by									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations			Oalaadula DO					3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza	·							3b		
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owmeni	tunas							
<u>ı aı</u>	 ' • · ·		O Dort I	N/ luna 11a S	San Form 000) Dort V	luna 10				
-	Complete if the organization answere								(d) Dool		
	Description of property	(a) Cost or o		1 ' '	or other (other)	• •	cumulate reciation	ea	(d) Book	value	9
	Land	basis (investr	nem)	Dasis	(otrior)	uer	, Journal of the second			-	
	Land			 							
	Buildings			-	2,991.		22,9	01			0.
	Leasehold improvements						26,4			5,79	
d	Equipment				3,256. 5,796.		$\frac{20,4}{49,1}$			5,6	
	Other	aud Form 000 Dead	V acti				±2,1	41.		$\frac{3}{4}$	
rotal	. Add lines 1a through 1e (Column (d) must e	quai roiiii 990, Part	A, COIU	rijir (D), lifte_t	007					<u>, , </u>	, 4 •

Schedule D (Form 990) 2015

(9)
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

Other Liabilities.

(4) (5) (6) (7)

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	PAYROLL WITHHOLDINGS	4,332.
(3)	DUE TO AFFILIATES	203,204.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 207,536.

2. Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the 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) 2015

THE ASSOCIATION FILES FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME

Schedule D (Form 990) 2015

Schedule D (Form 990) 2015 ILLINOIS PIPE TRADES ASSOCIATION Part XIII Supplemental Information (continued)	36-6080375 Page 5
TAX. THE ASSOCIATION'S RETURN IS SUBJECT TO EXAMINATION BY	THE INTERNAL
REVENUE SERVICE UNTIL THE APPLICABLE STATUTE OF LIMITATIONS	EXPIRES.
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE 1 (Form 990) Name of the organization

Part

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047

Open to Public

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

Employer Identification number ž 36-6080375 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any CONTRIBUTION 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. (d) Amount of 20,124 cash grant ILLINOIS PIPE TRADES ASSOCIATION (c) IRC section of applicable 501(C)5 36-2388785 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance?

1 (a) Name and address of organization

Part **≅**

or government

ILLINOIS AFL-CIO REGISTRATION AND EDUCATION FUND - 534 SOUTH SECOND - SPRINGFIELD, IL 62701

STREET

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

25

Schedule I (Form 990) (2015)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) THE EXECUTIVE BOARD CAREFULLY REVIEWS ALL REQUESTS FOR DONATIONS AND GRANTS Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. REPUTABLE ORGANIZATIONS/INDIVIDUALS WHO HAVE SATISFIED THE BOARD'S DUE APPROVAL IS GRANTED ONLY TO ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE THE BOARD PERFORMS NO SUBSEQUENT MONITORING OF THE USE OF (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of PRIOR TO THEIR APPROVAL AND DISBURSEMENT. recipients MAINTAINED AT THE ASSOCIATION'S OFFICE. (a) Type of grant or assistance DONATIONS AND GRANTS. PART I, LINE 2: DILIGENCE.

Schedule I (Form 990) (2015)

26

532102 10-28-15

Page 2

36-6080375

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

ILLINOIS PIPE TRADES ASSOCIATION

Schedule 1 (Form 990) (2015)

Part III

SCHEDULE J (Form 990)

Department of the Treasury

Part I

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.

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

2015

Open to Public Inspection

Internal Revenue Service

Name of the organization

Questions Regarding Compensation

ILLINOIS PIPE TRADES ASSOCIATION

Employer identification number 36-6080375

			Yes	No.
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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 personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		1	
	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's	į		
•	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
			1	
4	During the year, did any person listed on 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?	4a		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<u>X</u>
	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 on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the revenues of			
а	The organization?	5a		
b	Any related organization?	5 <u>b</u>		
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	1		
	Regulations section 53 4958-6(c)?	9		

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Schedule J (Form 990) 2015

ILLINOIS PIPE TRADES ASSOCIATION 36-6080375

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Schedule J (Form 990) 2015

For each individual whose compensation must be reported on 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)(1)-(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 and/or		1099-MISC compensation	(C) Retirement and	ple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denems	(a)-(i)(a)	in column (B) reported as deferred on prior Form 990
(1) LYNN KARNER	Θ	143,370.	0	7,979.	67,536.	24,717.	243,602.	0
EXECUTIVE DIRECTOR	(ii)	0	0	0.	0	0	0	0
(2) CHAD DAWSON	Θ	126,612.	0.	11,880.	75,849.	19,440.	233,781.	0
ORGANIZER	(ii)	0	0.	0		0	0	0
(3) WILLIAM HITE JR.	Ξ	125,508.	0.	11,381.	75,676.	19,440.	232,005.	0
ORGANIZER	Ξ	0.	0.	0.		0	0	0
(4) CAMERON SMITH	(i)	117,204.	0.	9,056.	57,267.	24,180.	207,707.	0
ORGANIZER	(ii)	0	0.	0.	0	0	0	0
(5) RICK TERVEN JR.	(I)	122,093.	0	5,866.	72,487.	17,960.	218,406.	0
POLITICAL DIRECTOR	(ii)	0	0	0.	0	0	0	0
	(i)							
	(ii)							
	Θ							
	(ii)							
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Schedule J (Form 990) 2015

532112 10-14-15

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015

Open To Public Inspection

Name of the	e organization	TI TNOTO		DEC		IGOGT A MT ON		1	-	r ideni		on nu	mber
Part I	Excess Bene	efit Transact	ONS (section 5)	01(c)(3	AS N sect	SOCIATION	01(c)(29) organization	ns only	<u>-ьг</u>	803	/5		
							o, or Form 990-EZ, P			Oh			
1		(b)	Relationship bet			lified					(d)	Corre	cted?
(a) Nar	ne of disqualified p	person	person and o			(0	c) Description of tran	sactio	n			es	No
					•								
													
<u>.</u>													
											Щ.		
		ncurred by the	organization man	agers	or disc	qualified persons du	ring the year under						
section									▶ \$				
3 Entert	he amount of tax,	if any, on line 2,	above, reimburs	ed by	the or	ganization			> \$				
Part II	Loans to and	/or From In	terested Per	sons									
	Complete if the c	organization ans	wered "Yes" on I	Form 9	- 19∩-F7	Part Viline 38a or F	Form 990, Part IV, lin	e 26 i	or if th	ne oraz	anızatı	on	
	reported an amo					,, ,							
(a)	Name of	(b) Relationship	T	(d) Lo	an to or	(e) Original	(f) Balance due	e (g) In		(h) Ap	proved	\'' <i>'</i> '''	ritten
intere	ested person	with organization			n the zation?	principal amount	,,	default?		by board or committee?		UI _ '_'	
VILLIAM HITE JRHIGHE				To Fron				Yes No		Yes	No	Yes	No
WILLIA	M HITE JR	HIGHEST	PERSONAL		X	1,299.	1,299.		X		X		X
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	·,									├	<u> </u>		
 Гotal			<u> </u>			▶ \$	1,299.			-	<u> </u>		<u>!</u>
Part III	Grants or As	sistance Be	nefitina Inter	este	d Pe		<u> </u>			٠			
	Complete if the c		_										
(a) Na						(c) Amount of	(d) Type	of		(e) Purp	ose of	 :
(a) Name of interested person (b) Relationship between interested person and						assistance assistan		\ - <i>r</i>		assist	ssistance		
			the organiza	ation									
				<u> </u>									
									_ -				
							<u> </u>						
									-				
													
									\dashv				

SEE PART V FOR CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2015

SCHEDULE O

(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.lrs.gov/form990.

OMB No 1545-0047

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

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

2015

OMB No 1545-0047 .

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

Open to Public Inspection

Employer identification number Direct controlling 36-6080375 Identification of Related Tax-Exempt Organizations Complete of 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 End-of-year assets e Total income ਉ Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) ILLINOIS PIPE TRADES ASSOCIATION Primary activity Name, address, and EIN (if applicable) of disregarded entity Name of the organization Part II Part

(g) Section 512(b)(13) controlled Ŷ × entity? Yes Direct controlling status (if section Public charity 501(c)(3)) Exempt Code section 527 Legal domicile (state or foreign country) LLINOIS CANDIDATES FOR POLITICAL PROVIDES SUPPORT FOR Primary activity **DFFICE** COMMITTEE - 91-2100007, 534 S SECOND ST. ILLINOIS PIPE TRADES POLITICAL EDUCATION Name, address, and EIN of related organization SPRINGFIELD, IL 62701

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

532161 09-08-15 LHA

Schedule R (Form 990) 2015

Schedule R (Form 990) 2015 ILLINOIS PIPE TRADES ASSOCIATION

Page 2

36-6080375

General or Percentage managing ownership 3 Code V-UBI General or Pramount in box managing or 20 of Schedule R-1 (Form 1065) Yes No 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 Disproportionate Yes No allocations? Ξ Share of end-of-year assets <u>6</u> Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> (d)
| Direct controlling entity (c)
Legal
domicile
(state or
foreign Primary activity <u>@</u> Name, address, and EIN of related organization Part III

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 trust during the tax year Part IV

532162 09-08-15

Schedule R (Form 990) 2015

Schedule R (Form 990) 2015 ILLINOIS PIPE TRADES ASSOCIATION

or 36
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art
990, Part IV, line 34, 35b, or 3
Form
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_≺es
te if the organization answered "Yes" on Form 99
rganızatı
theo
itions Complete if
d Organizations (
With Related O
ons With
Transactio
Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes
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?	s with one or more re	elated organizations listed	ın Parts II-IV?	1
	· .			1a \
	•		:	4
		•		
d Loans or loan guarantees to or for related organization(s)				1d ×
e Loans or loan guarantees by related organization(s)	٠			Je X
 Dividends from related organization(s) 	٠			1
g Sale of assets to related organization(s)			•	1g X
h Purchase of assets from related organization(s)				Th X
i Exchange of assets with related organization(s)				1i X
j Lease of facilities, equipment, or other assets to related organization(s)				1j X
k Lease of facilities, equipment, or other assets from related organization(s)				¥ ———
Performance of services or membership or fundraising solicitations for related o	rganization(s)			1 X
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			1n X
o Sharing of paid employees with related organization(s)				10 X
p Reimbursement paid to related organization(s) for expenses				dt X
q Reimbursement paid by related organization(s) for expenses		٠		1q X
 r Other transfer of cash or property to related organization(s) 				1
s Other transfer of cash or property from related organization(s)	,			1s X
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 t	his 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	nvolved
1) ILLINOIS PIPE TRADES PEF	М	717,822.	TO FULFILL PRIMARY ACT	ACTIVITY
		,		
75				
4)				
(5)		,		
Si di Si				
0/ 22163 00.08.16	35		Schedu	Schedule R (Form 990) 2015

36-6080375 Page 4

Schedule R (Form 990) 2015 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

	6				-					
(a) Name, address, and EIN	(b) Primary activity	(c) Legal domicile	(d) (e) Are all Are all Predominant income parmers sec		(f) Share of	(g) Share of	(h) Dispropor-	(i) Code V-UBI	(j) General or	(k) Percentage
of entity		(state or foreign country)	excluded from tax under orgs?		total income	end-of-year assets	allocations?	allocations of Schedule K-1 partners ownership ves No (Form 1065) ves No	managing partner?	ownership
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Schedule R (Form 990) 2015

Schedule R	(Form 990) 2015	<u> ILLINOIS</u>	PIPE	TRADES	ASSOCIAT	ION	<u> 36-6080375</u>	Page 5
Part VIII	(Form 990) 2015 Supplemental Info	rmation						
	Provide additional inform	ation for responses	to questio	ns on Schedu	ıle R (see ınstruct	ions)		
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