#### Extended to November 15, 2019

832001 12-31-18

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

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

Department of the Treasury Internal Revenue Service

OMB No 1545-0047 Open to Public Inspection

		GO to WWW.ii s.gov/i offileso for itistructions an	iu trie late	sat information.	mopeo
Ā	For th	ne 2018 calendar year, or tax year beginning and	ending		
	Check			D Employer identifi	cation number
	applica	IRON WORKERS DISTRICT COUNCIL OF CHIC	AGO		
	Add	ess AND ITCODITMY	.1100		
는	jchan {Nam			-	267725
느	lchan Tinitia	ge Doing business as			267725
느	iretur	Number and street (or P.O. box if mail is not delivered to street address)	Room/su		
L	Final retur		118	[ (847	)795-1710
	term ated	City or town, state or province, country, and ZIP or foreign postal code	<u>-</u>	G Gross receipts \$	246,656.
	Ame	nded DEC DIATMEC II 60018		H(a) Is this a group re	eturn
	Appl			for subordinates	
	pend	same as C above	_		
	<del>-</del>	<del></del>		H(b) Are all subordinates in 27 If "No." attach a	
_			60 T 2	<del> </del>	list (see instructions)
_		ite: ► N/A	<del> </del>	H(c) Group exemption	
		f organization: Corporation Trust _X Association Other ▶	L Ye	ar of formation: 2018 N	A State of legal domicile: IL
P	art i	Summary	•		
a	1	Briefly describe the organization's mission or most significant activities ORGA	NIZE	WORKERS FOR	ADVANCEMENT
Š	1				
Ē	2	Check this box  If the organization discontinued its operations or dispo	sed of mo	ore than 25% of its net as	ssets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	7
යි	4			<del></del>	7
త	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	<del></del>
Activities & Governance	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5	
₹	6	Total number of volunteers (estimate if necessary)		6	0
5		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	Ь	Net unrelated business taxable income from the line 38		7b	0.
	1	# KEUEIVED		Prior Year	Current Year
a)	8	Contributions and grants (Part VIII, line 1h)	Γ	0.	17,500.
Ž	9	Program service revenue (Part VIII, line 2g)		180,395.	199,156.
Revenue	10	Investment income /Part VIII column (A) lines 14 and 7d	<u> </u>	3,176.	5,267.
æ		Other revenue (Part VIII, column (A), lines 5 82, 9c, 10c, and 11e)	-	25,250.	15,393.
	11	Other revenue (Part VIII, column (A), lines 5 solac, sc, 10c, and 11e)		208,821.	237,316.
	12	Total revenue - add lines 8 through 11 (must still D. F. D. E. Imp (A) line 12)	+		
- 1	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	42,038.	27,655.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	L	0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	L	0.	0.
Su	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25)	0. 🗆		
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		175,653.	199,056.
ĺ	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		217,691.	226,711.
	19	Revenue less expenses Subtract line 18 from line 12	<b>-</b>	-8,870.	10,605.
드유	-:-	rievende less expenses Subtract line 18 from line 12	<del></del>		
ts or		<b>7</b>	<u>                                   </u>	Beginning of Current Year	End of Year
Net Asset Fund Balar		Total assets (Part X, line 16)	<u> </u>	361,968.	367,385.
달		Total liabilities (Part X, line 26)	⊢	0.	0.
		Net assets or fund balances Subtract line 21 from line 20		361,968.	367,385.
Pa	rt II	Signature Block			
Unde	r pena	ities of perjury, I declare that I have examined this return, including accompanying schedule:	s and state	ments, and to the best of my	knowledge and belief, it is
true,	correc	t, and complete Declaration of preparer (other than afficer) is based on all information of wh	nch prepar	er has any knowledge 1	ı
	-	I Robert Danksmil		8112	H19
Sıgn		, Signature of officer		Date	<del>++</del>
_		PROBERT BOSKOVICH, President			
Here	•	Type or print name and title		<del></del>	<del></del>
				I Date	TI PTIN
		Print/Type preparer's name Preparer's signature	C 0 A	Bla/16 Check L	<b>_</b> -J ]
Paid		HOWARD SIMON Hound H.	, SIA	0/9/19 self-employe	
Prep	arer	Firm Sname Calibre CPA Group PLLC		Firm's EIN ▶	47-0900880
Use (	Only	Firm Saddress 230 West Monroe St., Ste 310			
		Chicago, IL 60606		Phone no 31	2-655-0037
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		1,	X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2018)

	1 990 (2018) AND VICINITY			36-1267725	Page 2
Pa	rt III Statement of Program Service Accom	plishments			
	Check if Schedule O contains a response or note t	o any line in this Part III		- <del></del>	<u></u> _
1	Briefly describe the organization's mission:				
	ORGANIZE WORKERS FOR ADVANCE	MENT			
2	Did the organization undertake any significant program s	ervices during the year which	ch were not listed on the		
_	prior Form 990 or 990-EZ?	or mood during the your wind	on word not noted on the	Ves	X No
	If "Yes," describe these new services on Schedule O			1es	الفقيا ١٧٥
_					X No
3	Did the organization cease conducting, or make significa	nt changes in how it condu	cts, any program services?	└── Yes	LAL NO
	If "Yes," describe these changes on Schedule O				
4	Describe the organization's program service accomplishing	ments for each of its three la	argest program services, as m	easured by expenses	3
	Section 501(c)(3) and 501(c)(4) organizations are required	to report the amount of gr	ants and allocations to others	, the total expenses,	and
	revenue, if any, for each program service reported				_
4a	(Code ) (Expenses \$	including grants of \$	) (Revenue	 \$	)
	THE IRON WORKERS DISTRICT CO	UNCIL OF CHICA	GO AND VICINITY	HAS BEEN	
	ESTABLISHED TO ORGANIZE ALL	WORKERS FOR TH	E ECONOMIC, MOI	RAL, AND SO	CIAL
	ADVANCEMENT OF THEIR CONDITION			<del></del>	
				· · · · · · · · · · · · · · · · · · ·	
				<del></del>	
		<del></del>		<del></del>	
					<del>-</del>
		<del></del>			
4b	(Code ) (Expenses \$	including grants of \$	) (Revenue S	<del></del>	)
	(Code) (Expenses 5	modeling grants of \$		'	'
				<del></del>	
		<del></del>			
	<del></del>		<del> </del>		
	<del></del>				
	<del></del>	<del></del>	<del></del>		
		<del></del>			
			· · · · · · · · · · · · · · · · · · ·		<del></del>
4c	(Code) (Expenses \$	including grants of \$	) (Revenue \$	·	'
		<del></del>			
		·			
	**************************************		<del></del>		
		<del></del>			
	<del></del>				
	<del></del>				
4d	Other program services (Describe in Schedule O )		<del></del>		
	Other program services (Describe in Schedule O ) (Expenses \$ including grants of \$		) (Revenue \$	)	
			) (Revenue \$	)	

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Form 990 (2018) Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		l	
_	If "Yes," complete Schedule A	1	ļ <del>,,</del>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	<del> </del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_	X	1
4	public office? If "Yes," complete Schedule C, Part I	3	<u>├</u> ^	├
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		)	
5	during the tax year? If "Yes," complete Schedule C, Part II	4	-	<del> </del>
3	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	x	l
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		├
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	ļ	x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	⊢Ŭ		<del> </del>
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ļ	x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>	_	
	Schedule D, Part III	8	j '	x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		_ X _
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
a	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		Ì	Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>^</u>
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		<u>-</u> -
•	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	ļ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	ĺ	ł	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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		į	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	]	j	v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-	- [	X
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10	)	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		<u>~</u>
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	+	$\frac{x}{x}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-+	
	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	
			000	

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## IRON WORKERS DISTRICT COUNCIL OF CHICAGO AND VICINITY

Part IV | Checklist of Required Schedules (continued)

			Yes	No
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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		_	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23	-	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<del>                                     </del>	_
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
ь	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	200		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	Ì		ı
	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	]	1	
	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	1	} }	
	instructions for applicable filing thresholds, conditions, and exceptions)		1	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		- <u>X</u> -
	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,		, ,	х
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		<u> </u>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
30	contributions? If "Yes," complete Schedule M	30	1	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	<u> </u>		
	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	İ	<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 Part V, line 1	34	-	x
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-+	$\frac{1}{X}$
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
_	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	- 1	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	——	· ·	<u></u> _
• -	5-1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		j	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable U  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	j	j	
	(gambling) winnings to prize winners?	1c	x	
	.12-31_18		990 (2	2018)
				/

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	Statements negaring other most imigs and rax compliance (continued)			
_		ı	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a		}	ł
h	filed for the calendar year ending with or within the year covered by this return  [2a]  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		1
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)	<del>                                    </del>		$\vdash$
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		┢
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	==		<del>                                     </del>
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			Į
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		L_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			}
	any contributions that were not tax deductible as charitable contributions?	6a	X	ļ
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	) '	17	1
_	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			l
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b_		-
·	to file Form 8282?	7c		1
ď	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		-
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Ì
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	i	l	
	Initiation fees and capital contributions included on Part VIII, line 12	- 1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ł		
11_	Section 501(c)(12) organizations. Enter	j		
	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against	Į	(	
U	amounts due or received from them)	i	i	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	}	1	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
þ	Enter the amount of reserves the organization is required to maintain by the states in which the	[	[	
	organization is licensed to issue qualified health plans	ı	1	
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	[	l	v
	excess parachute payment(s) during the year?	15		<u> </u>
	If "Yes," see instructions and file Form 4720, Schedule N	46	1	Х
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O	16		
	ii 163, complete i uliii 4720, soliedule O	Form	990 (	(2018)
			/	

AND VICINITY

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Form 990 (2018) 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 1a 1								
	If there are material differences in voting rights among members of the governing body, or if the governing		<u> </u>						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0								
b	Enter the number of voting members included in line 1a, above, who are independent		]						
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		X					
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
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		X					
6 Did the organization have members or stockholders?									
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a	X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or								
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b		X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	' i	]						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		<u>X</u>					
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		Х					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		l						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	-,-						
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	- <del></del>					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		Í	v					
40	in Schedule O how this was done	12c	-+	$\frac{x}{x}$					
13	Did the organization have a written whistleblower policy?	13	┰┤						
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>						
15	Did the process for determining compensation of the following persons include a review and approval by independent		- 1						
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		х					
	The organization's CEO, Executive Director, or top management official	15a	<del></del>	$\frac{x}{x}$					
	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b		<u>~</u> _					
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	į	- {						
	taxable entity during the year?	16a	İ	Х					
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		<del></del> -					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	İ	1						
	exempt status with respect to such arrangements?	16b							
	ion C. Disclosure	100 /							
	List the states with which a copy of this Form 990 is required to be filed None								
	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	only)	availal	nle					
	for public inspection. Indicate how you made these available. Check all that apply	~y/	a vandi						
	Own website Another's website  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						
	statements available to the public during the tax year								
	State the name, address, and telephone number of the person who possesses the organization's books and records								
	ROBERT BOSKOVICH - (847)795-1710								
	2700 S. River Road, Suite 118, Des Plaines, IL 60018								
	12.31-18	Form	990 (	20181					

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Form 990 (2018)

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Page 7

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

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

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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 (A)	(B)	T T			C)	,50		(D)	(E)	(F)
Name and Title	Average	Position						Reportable	Reportable	Estimated
Hame and Hee	hours per	box	do not check more than one ox, unless person is both an			than Is bol	h an	compensation	compensation	amount of
	week	offi	cer ar	id a d	recto	or/trus	stee)	from	from related	other
	(list any	Individual trustee or director			ļ	-	ļ	the	organizations	compensation
	hours for related	500	<u> </u>	ĺ	ļ	sated	]	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ig i	Institutional trustee		E	E E	Ì	(00-271039-101130)		and related
	below	leng	i ii	_	튙	stco	, a	1		organizations
	line)	A Bu	hste	Officer	χe,	Highest compensated employee	Former	L		
(1) ROBERT BOSKOVICH	8.00					Г				
PRESIDENT		L	L	Х	L	L	L	0.	0.	0.
(2) PAUL THOMPSON	1.00									
FIN SEC/TREASUR	<u> </u>	L	_	X	<u> </u>	L	_	0.	0.	0.
(3) CRAIG SATALIC	1.00					Į		_	_	_
1ST V.P.	ļ	L_		X		<u>L</u>	L,	0.	0.	0.
(4) ROBERT FULTON	1.00									
2ND V.P.	100			X		ļ.,		0.	0.	0.
(5) BRIAN STANLEY	1.00	}	l		1					
TRUSTEE	1 00	_		Х		<u> </u>		0.	0.	0.
(6) RON WARE	1.00			x				0.	o.	^
TRUSTEE (7) BRIAN ATKINS	1.00		-	Δ				0.	0.	0.
TRUSTEE	1.00			x				0.	0.	0.
(8) KEVIN HRAY	1.00		Н	^	_	-		0.	· · · · · · · · · · · · · · · · · · ·	
SERGEANT AT ARMS	1.00			x				0.	0.	0.
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36-1267725

AND VICINITY

Га	Section A. Officers, Directors, Trus		plo	/ees			ighe	st (	Compensated Employe	es (continuea)				
	(A)	(B)	Position (do not check more than one box, unless person is both ar						(D)	(E)		_	(F)	
	Name and title	Average hours per							Reportable	Reportable		i .	stimat	-
		week					or/trus		compensation	compensation from related		l a	mount other	
		(list any	93	흻					the	organization		con	npens	
		hours for related	) E	یو	1		ig ig		organization	(W-2/1099-MI	SC)	1	rom th	
		organizations	Individual trustee or director	Institutional trustee	1	   #	ubeusa	•	(W-2/1099-MISC)			1	ganıza ıd rela	
		below	i i	ltona	١.	Key employee	sicon						anızat	
		line)	ğ	Instit	Officer	Key ei	Highest compens employee	Former						
			Γ	Г										
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	<del></del>		┝	-					<del> </del>			<del> </del> -		
		<u> </u>	1			1			)		ļ	1		
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							l							
1b	Sub-total							<b>&gt;</b>	0.		0.	<u> </u>		0.
	Total from continuation sheets to Part VI	I, Section A						>	0.		0.			0.
d	Total (add lines 1b and 1c)			liota				<u> </u>	0.	000 of				0.
2	Total number of individuals (including but n compensation from the organization	ot limited to the	ose	iiste	a ac	oove	e) wr	io re	eceived more than \$100	,000 of reportable	e			0
	compensation from the organization					_	_						Yes	No
3	Did the organization list any former officer,	director, or tru	stee	, ke	y en	nplo	yee,	or l	highest compensated ei	mployee on	ſ	,		
	line 1a? If "Yes," complete Schedule J for si										l	3		X
4	For any individual listed on line 1a, is the su									the organization				
_	and related organizations greater than \$150	•									}	4_		X
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," company of the company of	•				-		elate	ed organization or indivi	dual for services	ļ	_		X
Sec	tion B. Independent Contractors	olete Schedule	JI	or su	icn p	oers	on					5_		_^_
1	Complete this table for your five highest cor	mpensated ind	lepe	nde	nt co	ontr	acto	rs ti	hat received more than	\$100,000 of com	npens	ation f	rom	
	the organization Report compensation for t	•	-											
	(A)								(B)			(0	;)	
	Name and business	address	NC	NE	<u>:                                    </u>			4	Description of s	ervices	C	ompe	nsatro	n
								}		j				
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	<del></del>							$\perp$	<del></del>					
	Table and a second							$\perp$	<del></del>					
	Total number of independent contractors (in \$100,000 of compensation from the organiz		ot lin	nitec	to t	thos 0		ted	above) who received m	ore than				
	whoo, out of compensation from the organiz	autin									<del></del>	Form '	990 (2	2018)
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		Check if Schedule O con	tains a resp	ponse or	note to any lir				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
15 5	1 a	Federated campaigns	1	la					
	b	Membership dues	1	lb			1		
3 8	c	Fundraising events	1	lc			,		1
ja ja		Related organizations	1	ld			· ]		
, E		Government grants (contribut	tions) 1	le			ĺ		1
50	f		· -			i i	i		1
3		similar amounts not included abo		ıf İ	17,500.	!	ľ		1
읾	g	Noncash contributions included in lines	ــــا \$ s 1a-1í						1
and Other Similar Amounts	_	Total. Add lines 1a-1f				17,500.			
					usiness Code				
3	2 a	MEMBERSHIP DUES & ASSE	ESSMENTS	\	900099	199,156.	199,156.		
9	b			L					
[ e ]	C			L					<u></u>
اچ	d					<u> </u>			<u> </u>
Revenue	е			L					<del> </del>
-	f	All other program service reve	enue	1_					<del> </del>
_	g	Total. Add lines 2a-2f				199,156.			<del> </del>
	3	Investment income (including	j dividends,	, ınterest	, and				
- 1		other similar amounts)				4,556.			4,556
- 1	4	Income from investment of ta	x-exempt b	ond pro	ceeds 🕨				<b></b>
	5	Royalties			▶				<u> </u>
ļ			(i) Rea	al	(ii) Personal				
- }	6 a		L			ľ	<b>[</b>		
- }	þ	•	<u> </u>	<del></del> -			ì		1
	С	, ,	L						
-		Net rental income or (loss)		— г					ļ
-	7 a	Gross amount from sales of	(i) Securi		(ii) Other	1	<b>,</b>		
-		assets other than inventory	10,	051.			1		i .
- }	þ	Less cost or other basis	1		ļ		·		]
ı		and sales expenses	$\overline{}$	340.		1	1		
ł		Gain or (loss)	L	711.			1		
ł		Net gain or (loss)		_		711.			711.
<u> </u>	8 a	Gross income from fundraising	g events (n	ot			Į		
anua		including \$	of	1	İ				
		contributions reported on line	1c) See	1	ļ		}		1
		Part IV, line 18		a			[		
5		Less direct expenses		b_			i		
		Net income or (loss) from fund							
1 9	9 a	Gross income from gaming ac	ctivities See	e					ł
1		Part IV, line 19		a			1		
- 1		Less direct expenses		ь[					
		Net income or (loss) from gam	•	es —					ļ
10	0 a	Gross sales of inventory, less	returns	İ	Į.		į		l
- [		and allowances		a		1	ĺ		
ĺ		Less cost of goods sold		b		İ	}		
-	<u> </u>	Net income or (loss) from sales							
$\vdash$		Miscellaneous Revenue	<u>e</u>		siness Code		10.202		
11.	1 a.	SPONSORSHIPS	<del></del> -		900099	10,393.	10,393.		<b> </b>
ŧ	b	REIMBURSED EXPENSE		- <u>-</u>	300099	5,000.	5,000.		ļ
1	С	T. T							ļ
- {		All other revenue		L.					
-		Total. Add lines 11a-11d			<b>&gt;</b> [	15,393.		<del></del>	
12	2	Total revenue See instructions			<u> </u>	237,316.	214,549.	0.	5 , 267 . Form <b>990</b> (2018)

Form 990 (2018) AND VICINITY
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
	Check if Schedule O contains a respon								
	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	( <b>D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21	27,655.							
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22			í					
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign			ļ					
	individuals See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees								
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages								
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits		<u> </u>						
10	Payroll taxes								
11	Fees for services (non-employees):	25 525			; 				
а	Management	26,635.							
b	Legal	2,543.							
С	Accounting	7,125.							
d	Lobbying		<del></del>						
e	Professional fundraising services. See Part IV, line 17	2,017.	<del></del>						
f	Investment management fees	2,017.	<del></del>	<u> </u>	<del></del>				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0)								
12	Advertising and promotion	26,480.							
12 13	Office expenses	6,247.	<del></del>	<del>                                     </del>					
14	Information technology								
15	Royalties								
16	Occupancy	3,600.			<del></del>				
17	Travel								
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	74,973.							
20	Interest								
21	Payments to affiliates	22,931.							
22	Depreciation, depletion, and amortization	5,177.							
23	Insurance	3,328.	<del></del>						
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)			,					
а	PAC CONTRIBUTIONS	18,000.			·				
b					_ <del>,</del>				
С					<del> </del>				
d				<u> </u>					
	All other expenses	226 714			<del></del>				
<u> 25</u>	Total functional expenses. Add lines 1 through 24e	226,711.							
26	Joint costs. Complete this line only if the organization	Ì		ì					
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	1							
	Check here Infollowing SOP 98-2 (ASC 958-720)	j		J					
	12-31-18				Form 990 (2018)				

36-1267725 Page 11 Form 990 (2018) AND VICINITY Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 1 132,937. 158,059. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Assets 7 Notes and loans receivable, net 8 8 Inventories for sale or use Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 63,986. 10a basis Complete Part VI of Schedule D 46,039. 23,125. 17,947. 10b b Less accumulated depreciation 10c 205,906. 191,379 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV. line 11 15 361,968. 367,385. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 <u>o.</u> 0. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 361,968. 367,385. 27 27 Unrestricted net assets 28 Temporanly restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here

> 367,385. Form 990 (2018)

367,385.

30

31

32

361,968.

361,968.

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

31 Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

For	n 990 (2018) AND VICINITY	36-126	7725	P <u>a</u>	ge <b>12</b>
Pa	rt 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			16.
2	Total expenses (must equal Part IX, column (A), line 25)	2			11.
3	Revenue less expenses Subtract line 2 from line 1	3			05.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			68.
5	Net unrealized gains (losses) on investments	5		<u>, 1</u>	88.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	367	7 <u>,3</u>	85.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				LX
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		1 1		]
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	1 1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	] ]		
	separate basis, consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,			
	consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audīt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O	1 1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a	]	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b_		
			Form 9	90 (	2018)

#### SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

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

<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>				
Name of organization IRON WO	RKERS DISTRICT CO	DUNCIL OF CH	ICAGO Emp	loyer identification number
AND VIC				<u> 36-1267725                                  </u>
Part I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 of	organization.
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campai</li> </ol>	tures	l campaign activities in	n Part IV ▶ ६	S
Part I-B Complete if the org	ganization is exempt unde	r section 501(c)(3	3).	
1 Enter the amount of any excise tax	incurred by the organization unde	er section 4955		
2 Enter the amount of any excise tax	incurred by organization manager	s under section 4955	▶ \$	
3 If the organization incurred a section	on 4955 tax, did it file Form 4720 fo	or this year?		☐ 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 sect	tion 527 exempt function	on activities > \$	i
2 Enter the amount of the filing organ	nization's funds contributed to other	er organizations for sec	ction 527	
exempt function activities			▶ \$	·
3 Total exempt function expenditures	s Add lines 1 and 2 Enter here an	d on Form 1120-POL,	<b>.</b> .	
line 17b  4 Did the filing organization file Form			<b>-</b> \$	Yes No
5 Enter the names, addresses and en made payments. For each organizar contributions received that were propolitical action committee (PAC). If a	tion listed, enter the amount paid omptly and directly delivered to a	from the filing organiza separate political orgai	ition's funds. Also enter th nization, such as a separa	ne 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-
IWDC of Chicago PAC	Ottawa, IL 61350	27-2631913	0.	18,000.
- Constant Park Nice And Nice	and the Instruction for Face 20	0 000 57	Caladala C	(5

See Part IV for Continuation

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Schedule C (Form 990 or 990-EZ) 2018 AND V	ICINIT	Y		36-:	1267725 Page 2		
Part II-A Complete if the organizati	on is exe	mpt under section	on 501(c)(3) and fi	led Form 5768 (e	election under		
section 501(h)).		·					
A Check ► ☐ if the filing organization belor			n Part IV each affiliated	l group member's nar	ne, address, EIN,		
expenses, and share of exce		•					
B Check ► ☐ If the filing organization chec	ked box A a	nd "limited control" pr	ovisions apply		Taxarı		
Limits on Lob				(a) Filing organization's	(b) Affiliated group totals		
(The term "expenditures" n	neans amo	unts paid or incurred	.)	totals	1-1		
1a Total lobbying expenditures to influence put	alic opinion	grass roots lobbying)			<del> </del>		
<b>b</b> Total lobbying expenditures to influence a le	-			<del></del>	<del> </del>		
c Total lobbying expenditures (add lines 1a an	_	·, (g,					
d Other exempt purpose expenditures							
e Total exempt purpose expenditures (add line	es 1c and 1	<del>d</del> )					
f Lobbying nontaxable amount. Enter the amo	ount from th	e following table in bo	th columns				
If the amount on line 1e, column (a) or (b) is.	The lob	bying nontaxable an	nount is:				
Not over \$500,000	20% of	the amount on line 1e					
Over \$500,000 but not over \$1,000,000		00 plus 15% of the exc					
Over \$1,000,000 but not over \$1,500,000		00 plus 10% of the ex			}		
Over \$1,500,000 but not over \$17,000,000		00 plus 5% of the exce	ess over \$1,500,000				
Over \$17,000,000	\$1,000,	000					
Grassroots pontavable amount (enter 25%)	of line 1ft			<u> </u>	<del> </del>		
g Grassroots nontaxable amount (enter 25% of h Subtract line 1g from line 1a. If zero or less,	•				<del> </del>		
i Subtract line 1f from line 1c If zero or less,							
If there is an amount other than zero on either		line 1, did the organiz	ation file Form 4720	<del></del>	<del></del>		
reporting section 4911 tax for this year?				ĺ	Yes No		
	4-Year Ave	raging Period Under	Section 501(h)				
(Some organizations that made			•	of the five columns I	pelow.		
		ate instructions for li			<del></del>		
Lobi	oying Expe	nditures During 4-Ye	ar Averaging Period		<del></del>		
Calendar year	2015	(b) 2016	(a) 2017	(4) 2019	(e) Total		
(or fiscal year beginning in)	2015	(6) 2016	(c) 2017	(d) 2018	(e) rotal		
				<del></del>			
2a Lobbying nontaxable amount							
b Lobbying ceiling amount		<u> </u>			<del></del>		
(150% of line 2a, column(e))							
	**						
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount							
(150% of line 2d, column (e))							
6 Comments labeling							
f Grassroots lobbying expenditures				Sabadula C (Fara	990 or 990-EZ) 2018		

Schedule C (Form 990 or 990 EZ) 2018 AND VICINITY

| 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	(8	a)	(1	b)
of the lobbying activity	Yes	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter	,			
or referendum, through the use of				
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?				
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?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
501(c)(6).				
			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 campaign activity expenditures from the				Х
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				ne 3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	al	1 1		
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 exc	ess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
expenditure next year?		_4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				-
rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	list), Part II-	A, lines 1 a	nd 2 (see	
structions), and Part II-B, line 1 Also, complete this part for any additional information	,,		·	
Part I-A, Line 1:				
<del></del>				
SEPARATE TRUSTEED POLITICAL ACTION FUND WAS ESTABLE	SHED W	HERE '	THE	
NICHDICH COUNCIL CAN MEANCEED BUNDS DIDECHLY MO A CED	ND N M E	DOL TW	T C A I	
DISTRICT COUNCIL CAN TRANSFER FUNDS DIRECTLY TO A SEPA	WHIF	FULIT.	TCAT	
RGANIZATION.		<u>-</u>		
art I-C Continuation for Incomplete Name/Address Info	ormati	on:		
210 2 0 00001114401011 101 11100mp1000 Hame, Add1688 11110		o C (Form	000 000	E7\ 0040

Schedule C (Form 990 or 990-EZ) 2018 AND VICINITY   Part IV   Supplemental Information (continued)	36-126/725 Page 4
Part IV Supplemental Information (continued)	
IWDC of Chicago PAC	
756 River Edge Circle Ottawa, IL 61350	
	•
<del></del>	
	<del></del>
	<del></del>
<del></del>	Schedule C (Form 990 or 990-EZ) 2018

#### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

2018 Open to Public Inspection

OMB No 1545-0047

Name of the organization

IRON WORKERS DISTRICT COUNCIL OF CHICAGO AND VICINITY

Employer identification number 36-1267725

Pa	ert I Organizations Maintaining Donor Advis		or Acc	counts.Complete if the
	organization answered "Yes" on Form 990, Part IV, II	ne 6 (a) Donor advised funds	(b)	Funds and other accounts
	<del>-</del>	(a) Donor advised funds	(0)	Funds and other accounts
1	Total number at end of year	<del></del>		
2	Aggregate value of contributions to (during year)	<del></del>		
3	Aggregate value of grants from (during year)	}		<del></del>
4	Aggregate value at end of year	L		
5	Did the organization inform all donors and donor advisors in	-	ed funds	
_	are the organization's property, subject to the organization's	_		L Yes L No
6	Did the organization inform all grantees, donors, and donor			
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose o	conferrin	
<u> </u>	rt II Conservation Easements. Complete if the or		and D.C. loss	Yes No
_		<del></del>	art IV, III	le /
1	Purpose(s) of conservation easements held by the organizat			
	Preservation of land for public use (e.g., recreation or	· —	•	
	Protection of natural habitat	Preservation of a certif	fied histo	oric structure
_	Preservation of open space		_	
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	of a cons	_,
	day of the tax year		<u> </u>	Held at the End of the Tax Year
a				la
b	,		. –	lb
C			_	lc
q	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structur		.
_	listed in the National Register			ld
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organiza	ition during the tax
	year -			
4	Number of states where property subject to conservation ea			
5	Does the organization have a written policy regarding the pe	• • • • • • • • • • • • • • • • • • • •		
_	violations, and enforcement of the conservation easements			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing conse	ervation	easements during the year
7		dl		
7	Amount of expenses incurred in monitoring, inspecting, hand	aling of violations, and enforcing conservati	on ease	ments during the year
	Date and appropriate and an ince 2/d) about	170/h	-V4VDVA	
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(r	1)(4)(0)(1)	Yes No
9	and section 170(h)(4)(B)(ii)?	an assements in its revenue and expense	otatomor	
9	In Part XIII, describe how the organization reports conservat include, if applicable, the text of the footnote to the organiza	•		
	conservation easements	tions illiancial statements that describes the	ile Organ	ization's accounting to
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or Ot	her Sir	nilar Assets
<u> </u>	Complete if the organization answered "Yes" on Form			
12	If the organization elected, as permitted under SFAS 116 (AS		ent and l	nalance sheet works of art
	historical treasures, or other similar assets held for public ext			
	the text of the footnote to its financial statements that descri		00 0. pu.	one service, provide, in trace xim,
h	If the organization elected, as permitted under SFAS 116 (AS		and hala	nce sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e	•		
	relating to these items	succession, or research an interestance or publi	10 301 110	c, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			> \$ > \$
2	If the organization received or held works of art, historical tre	asures or other similar assets for financial		
_	the following amounts required to be reported under SFAS 1		gani, più	
а	Revenue included on Form 990, Part VIII, line 1	y ooo; relating to these items	_	▶ \$
	Assets included in Form 990, Part X			• \$
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.		Schedule D (Form 990) 2018

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Sch	edule D (Form 990) 2018 AND VIC								67725	
Pa	rt III   Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Oth	er Sin	nilar Asse	ts(continu	ed)
3	Using the organization's acquisition, accession	on, and other record	ls, chec	k any of the	following th	at are a	significa	int use of its	collection	items
	(check all that apply)		_							
а	Public exhibition	d		Loan or exc	hange prog	rams				
b	, " " " " " " " " " " " " " " " " " " "	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explair	n how ti	hey further t	he organizat	tion's exe	empt pu	irpose in Pai	t XIII	
5	During the year, did the organization solicit or	receive donations of	of art, h	istorical trea	sures, or oth	ner sımıla	ar asset	s _	_	
	to be sold to raise funds rather than to be ma								Yes	No_
Pa	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Part		ete if the	e organizatio	n answered	"Yes" ot	n Form	990, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custodia	an or other intermed	liary for	contribution	ns or other a	ssets no	t includ	ed		
	on Form 990, Part X?							<u></u>	Yes	L No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	llowing	table						
									Amount	
C	Beginning balance						10	:		
d	Additions during the year						10	<u> </u>		
е	Distributions during the year						16	•		
f	Ending balance						1	<u>f  </u>	<del>,</del>	
2a	•						-	<b>!</b>	⅃ Yes	No ا
	If "Yes," explain the arrangement in Part XIII									<u></u>
Pa	rt V Endowment Funds. Complete if							<del></del>		
	<u> </u>	(a) Current year	(b) F	rior year	(c) Two yea	rs back	(d) I hr	ee years back	(e) Four y	ears back
1a	Beginning of year balance								<u> </u>	
ь	Contributions								<del> </del>	
c	Net investment earnings, gains, and losses				<b>}</b>				<del> </del>	
đ	Grants or scholarships				<b> </b>				<b> </b> -	
е	Other expenditures for facilities					i			[	
_	and programs								ļ <u>.</u>	
f	Administrative expenses								<del></del>	
g	End of year balance								<u> </u>	
2	Provide the estimated percentage of the curre	ent year end balance	-	g, column (a	i)) held as					
	Board designated or quasi-endowment		_%							
Þ	Permanent endowment	%								
С	Temporarily restricted endowment	%								
•	The percentages on lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posses	ision of the organiza	ttion tha	at are neio ai	na aaministe	erea for t	ine orga	inization	L.	[ ]
	by									es No
	(i) unrelated organizations								3a(i)	+
	(ii) related organizations  If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  3b									
4	Describe in Part XIII the intended uses of the	·							1 30	
Par	<del></del>		willette	iunus						
	Complete if the organization answered		Part IV	/ line 11a S	ee Form 991	) Part X	line 10			
	Description of property	(a) Cost or ot		(b) Cost			ccumul		(d) Book v	alue
	Description of property	basis (investm	1	basis (			preciati	1	(a) DOOK V	aiuc
12	Land	1 2 2 3 4 1 1 2 3 4 1 1					,			
	Buildings	<del> </del>								
	Leasehold improvements					-				
	Equipment	<del> </del>			3,986.		46	039.	17	947.
	Other	<del></del>		<u>_</u>						
	Add lines 1a through 1e (Column (d) must eq.	ual Form 990 Part X	Colun	nn (B) line 1	Oc.)				17	947.
			., 551411	(2),	/					

Schedule D (Form 990) 2018

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col (B) line 25)	

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) 2018

IRON WORKERS DISTRICT COUNCIL OF CHICAGO 36-1267725 Page 4 AND VICINITY Schedule D (Form 990) 2018 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 230,111. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 -5,188. a Net unrealized gains (losses) on investments **b** Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) 2d -5,188. e Add lines 2a through 2d 235,299. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 2,017. a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 4b 2,017. c Add lines 4a and 4b 237,316. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a 224,694. Total expenses and losses per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part IX, line 25. a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII ) 2d e Add lines 2a through 2d 2e 224,694. 3 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 2,017. a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII ) 4h 2,017. c Add lines 4a and 4b 4c 226,711. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Part X, Line 2: The Council is exempt from federal income taxes under Section 501(c)(5) of the Internal Revenue Code as part of a group exemption for organizations affiliated with the International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers and is, therefore, subject to tax only on income, if any, unrelated to its tax-exempt purpose.

Management is required to evaluate tax positions taken by the Council and recognize a tax liability (or asset) if the Council has taken an uncertain position that more likely than not would not be sustained upon examination by the taxing authorities. As of December 31, 2018, there were no uncertain positions taken or expected to be taken that would require

832054\_10-29-18

# IRON WORKERS DISTRICT COUNCIL OF CHICAGO 36-1267725 Page 5 AND VICINITY Schedule D (Form 990) 2018 Part XIII Supplemental Information (continued) recognition of a liability (or asset) or disclosure in the financial statements. The Council's Form 990, Return of Organization Exempt from Income Tax, for the years ending 2015, 2016 and 2017 are subject to examination by the IRS, generally for three years after they were filed.

Schedule D (Form 990) 2018

Schedule I (Form 990) (2018) 2 Employer identification number 36-1267725 OMB No 1545-0047 Open to Public 2018 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 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 noncash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Go to www.irs.gov/Form990 for the latest information. 0 (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. IRON WORKERS DISTRICT COUNCIL OF CHICAGO recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of o. cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? AND VICINITY 1 (a) Name and address of organization No single contribution exceeded or government Name of the organization Department of the Treasury nternal Revenue Service SCHEDULEI (Form 990) Part Part II \$5,000

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CHICAGO		
OF.		Ì
CT COUNCIL OI		
IRON WORKERS DISTRICT COUNCIL OF CHICAGO		
WORKERS DISTRIC	AND VICINITY	
IRON	AND	
	Schedule I (Form 990) (2018)	
	Schedule	

Part III

Page 2

36-1267725

Schedule I (Form 990) (2018) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information 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 (d) Amount of non-cash assistance (c) Amount of cash grant 27 (b) Number of recipients THE BOARD APPROVES ALL GRANT ISSUED. (a) Type of grant or assistance Part I, Line 2: 832102 11-02-18

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

#### 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.

Go to www.irs.gov/Form990 for the latest information IRON WORKERS DISTRICT COUNCIL OF CHICAGO OMB No 1545-0047

Open to Public Inspection

Employer identification number

AND VICINITY 36-1267725 Form 990, Part VI, Section A, line 7a: Each local union of the District Council is represented by 3 delegates. Delegates are elected at the regular election of their respective local unions in accordance with the election laws as incorporated in the International Constitution. Delegates serve a term of three years. Form 990, Part VI, Section A, line 8b: NO COMMITTEE EXISTS THAT CAN ACT ON BEHALF OF GOVERNING BODY. Form 990, Part VI, Section B, line 11b: Line 11a explanation - AN OFFICER REVIEWS THE FORM 990 BEFORE IT IS FILED. IN ADDITION, FORM 990 IS MADE AVAILABLE TO THE ENTIRE BOARD FOR THEIR REVIEW UPON REQUEST. Form 990, Part VI, Section C, Line 19: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AT THE DISTRICT COUNCIL'S OFFICE. IN ADDITION, THE ORGANIZATION FILES AN ANNUAL FINANCIAL REPORT WITH THE DEPARTMENT OF LABOR WHICH CAN ALSO BE OBTAINED ON THE ONLINE PUBLIC DISCLOSURE ROOM. FORM 990, PART XII, LINE 2C NO CHANGE IN PROCESS.

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

Schedule O (Form 990 or 990-EZ) (2018)