DLN: 93493111007190 OMB No 1545-0047 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 Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 C Name of organization D Employer identification number B Check if applicable CHICAGO REGIONAL COUNCIL OF CARPENTERS □ Address change WELFARE FUND 36-2229735 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 12 EAST ERIE STREET ☐ Amended return (312) 787-9455 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code CHICAGO, IL $\,$ 60611 $\,$ G Gross receipts \$ 665,312,382 Name and address of principal officer H(a) Is this a group return for GARY PERINAR ☐Yes **☑**No subordinates? 12 EAST ERIE STREET H(b) Are all subordinates CHICAGO, IL 60611 ☐ Yes ☐No ıncluded? Tax-exempt status 501(c)(3) **✓** 501(c) (9) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 1953 M State of legal domicile IL **K** Form of organization \square Corporation \square Trust \square Association \square Other Summary 1 Briefly describe the organization's mission or most significant activities HEALTH BENEFIT FUND Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 Number of independent voting members of the governing body (Part VI, line 1b) . 4 6 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 0 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 272,249,614 280,423,431 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 20,741,964 25,492,238 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 176,884 37,088 293,168,462 305,952,757 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 209,772,013 250,252,493 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 9,632,073 10,941,317 219,404,086 261,193,810 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 73,764,376 44,758,947 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances Beginning of Current Year End of Year 850,387,308 918,215,522 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 51,890,853 27,275,808 22 Net assets or fund balances Subtract line 21 from line 20 . 798,496,455 890,939,714 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-04-20 Signature of officer Sign Here GARY PERINAR TRUSTEE Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-04-13 P01451145 Paid self-employed Firm's name ► LEGACY PROFESSIONALS LLP Firm's EIN ► 32-0043599 Preparer Use Only Firm's address ▶ 4 WESTBROOK CORPORATE CENTER SUITE Phone no (312) 368-0500 WESTCHESTER, IL 60154 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)				Page 2
Pa	rt III Statement	t of Program Service Acc	omplishments		_
	Check if Sch	edule O contains a response or	note to any line in this Part III		\square
1	Briefly describe the	organization's mission			
<u>TO P</u>	ROVIDE HEALTH BEN	EFITS			
2	Did the organization	n undertake any significant prog	ram services during the year which	were not listed on	
	the prior Form 990	or 990-EZ?			🗌 Yes 🗹 No
	•	ese new services on Schedule (
3	Did the organization	n cease conducting, or make sig	nificant changes in how it conducts,	any program	
	services?				🗌 Yes 🗹 No
	If "Yes," describe th	ese changes on Schedule O			
4	Section 501(c)(3) a		plishments for each of its three large required to report the amount of gra ervice reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Addıtıonal Data			, ,	,
	-				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
	-				
4d	Other program serv	rices (Describe in Schedule O)			
	(Expenses \$	including g	rants of \$	(Revenue \$)
4e	Total program ser	rvice expenses ►			
					Form 990 (2018)

Form 990 (2018) Page 3 Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 Nο No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 4 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? 5 No Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 💆 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No 8 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes 11h assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? **12**b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(u)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Nο **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 14h No Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

18

19

20a

20b

21

Nο

Nο

No

Nο

No

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lines 1c and 8a? If "Yes," complete Schedule G, Part II

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

rm	990 (2018)			Page
Par	Checklist of Required Schedules (continued)			
3	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	Yes Yes	No
а	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 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		No
)	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		
i	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
а	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		
•	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		
	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		No
	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		No
	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)			
I	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
•	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b	163	No
:	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		No
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	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		No
	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	Yes	
3	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
ı	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		
				No
	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		

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

No

Yes

Yes

291

1c

1a

1b

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess 15 parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N No

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Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Pai	rt VI	Governance, Management, and Disclosure For each "Yes" response to lines 2			₃ "No" respo	onse to l	lines
		8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	uie O	See instructions			✓
Se	ction	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		12		
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ir committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b		6		
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ss rela	tionship with any oth	er 2		No
3		ne organization delegate control over management duties customarily performed by icers, directors or trustees, or key employees to a management company or other			ision 3		No
4	Did th	ne organization make any significant changes to its governing documents since the	prior F	form 990 was filed?	. 4		No
5	Did th	ne organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets? .	5		No
6	Did th	ne organization have members or stockholders?			6		No
7a		ne organization have members, stockholders, or other persons who had the power bers of the governing body?		t or appoint one or m	ore 7a		No
b		ny governance decisions of the organization reserved to (or subject to approval by ns other than the governing body?) meml	bers, stockholders, or	7b		No
8		ne organization contemporaneously document the meetings held or written actions illowing	undert	aken during the year	by		
а	The g	overning body?			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			. 8b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who dization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> C			9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	ired b	y the Internal Rev	enue Code	∍.)	
						Yes	No
		ne organization have local chapters, branches, or affiliates?			10a	ļ	No
	and b	s," did the organization have written policies and procedures governing the activitie ranches to ensure their operations are consistent with the organization's exempt p	urpose	s?	10b		
11a	Has the form?	he organization provided a complete copy of this Form 990 to all members of its go	vernin • •	g body before filing t	he 11a		No
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually interest.	terests • •	that could give rise t	:o 12b		No
С		ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?			13	Yes	
14	Did th	ne organization have a written document retention and destruction policy?			14	Yes	
15		ne process for determining compensation of the following persons include a review ns, comparability data, and contemporaneous substantiation of the deliberation an			nt		
а	The o	rganization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
	taxab	ne organization invest in, contribute assets to, or participate in a joint venture or si le entity during the year?			. 16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the organizat to venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ard the				
Se		C. Disclosure					
17		ne States with which a copy of this Form 990 is required to be filed					
18	only)	on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), available for public inspection. Indicate how you made these available. Check all the	nat app	ply			
		Own website Another's website 🗹 Upon request 🔲 Other (explain in So		•			
19	policy	ribe in Schedule O whether (and if so, how) the organization made its governing do r, and financial statements available to the public during the tax year					
20	State	the name, address, and telephone number of the person who possesses the organ	ızatıon	's books and records			

(17) SHARI BOBOWSKI

RETIREMENT BENEFITS MGR

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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations $% \left(1\right) =\left(1\right) \left(1\right) \left($
- 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 co	ompensation fro	m the	organ	ıızatı	ion a	and ar	ny re	elated organization	S	
List persons in the following order individual trus compensated employees, and former such perso		rs, ınstı	tutio	nal t	rust	ees,	offic	ers, key employee	s, highest	
Check this box if neither the organization no		ganızat	ion c	omp	ens	ated a	any i	current officer, dire	ector, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	Position that pers	on (do an on on is	(C) o not e bo both	t che x, u		ore er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) GARY PERINAR JR TRUSTEE	2 00	х						0	335,979	146,384
(2) JEFFREY ISAACSON TRUSTEE	2 00	×						0	303,084	134,292
(3) KEITH JUTKINS TRUSTEE	2 00	х						0	245,110	120,601
(4) JOSEPH PASTORINO TRUSTEE	2 00	Х						0	232,232	114,444
(5) GERALD W THIEL JR TRUSTEE	2 00	х						0	0	0
(6) KEVIN GESHWENDER TRUSTEE	2 00	х						0	0	0
(7) BRUCE WERNING TRUSTEE	2 00	х						0	158,100	87,546
(8) MIKE FOREST TRUSTEE	2 00	х						0	0	0
(9) GEORGE TUHOWSKI III TRUSTEE	2 00	×						0	0	0
(10) DANIEL ROSENBERG TRUSTEE	2 00	х						0	0	0
(11) MICHAEL SUDOL TRUSTEE	2 00	х						0	0	0

2 00 (12) JOHN M JARGER TRUSTEE 0 220,081 114,444 40 00 20 00 (13) KRISTINA GUASTAFERRI Χ 0 295,855 65,374 ADMINISTRATOR 20 00 20 00 (14) CINDY RIVERA 204.752 65.374 Х 0 ASSISTANT ADMINISTRATOR 20 00 20 00 (15) TIM DROGOS Х 0 156,077 65,374 CONTROLLER 20 00 20 00 (16) BRIAN LESTERS Χ 0 126,018 65,374 IT MANAGER 20 00 20 00

Х

20 00

0

65,374

121.790

4 WESTBROOK CORPORATE CENTER - STE

compensation from the organization ▶ 19

WESTCHESTER, IL 60154

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

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, un of tor/t	t ch unle: ficei	eck mess pers r and a ee)	son	(D) Reportable compensation from the organization (2/1099-MIS	on (W-	(E) Reportable compensation from related organizations (\) 2/1099-MISC	N-	Estima amount o compens from organizati	ated of other sation the
		Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2, 1033 MIS		2,1033 11130	,	related organizations		
	Sub-Total		 A				*			-				
d ·	Total (add lines 1b and 1c)	<u> </u>					▶		()	2,399,07	8		1,044,581
2	Total number of individuals (including of reportable compensation from the			e liste	ed a	bov	e) who	rece	eived more tha	n \$1	00,000			
3	Did the organization list any former of line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k			, ,	or hi	ghest compens	ated •	employee on	3	Yes	No No
4	For any individual listed on line 1a, is organization and related organization individual	s greater than \$		0? <i>If</i>	"Yes	s," c					n the	4	Yes	
5	Did any person listed on line 1a receiv services rendered to the organization											5		No
S	ection B. Independent Contract	ors												
1	Complete this table for your five high- from the organization Report comper											npen	sation	
	Name a	(A) and business addre	255							Desc	(B) ription of services		(C Comper	
BLUE	CROSS BLUE SHIELD OF ILLINOIS										PRK PROVIDER			,406,259
	E RANDOLPH ST AGO, IL 60601													
	INGTON TRUST								INVEST	MEN	T MANAGEMENT			642,098
	CONGRESS STREET TON, MA 02210													
	CO HEALTH SOLUTIONS							PPO NE	TWC	RK PROVIDER			581,261	
100 PARSONS POND DRIVE FRANKLIN LAKES, NJ 07417														
	ANN KETTERMAN & RIOUX							ATTOR	NEY				516,299	
111 E WACKER DRIVE CHICAGO, IL 60601											<u></u>			
	CY PROFESSIONALS LLP								ACCOU	ACCOUNTANT				514,886

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

Part		Statement of	f Revenue									rage 3
		Check if Schedu	le O contains	a respo	onse or not	te to any lin	e in this Part VIII				<u> </u>	<u> 🗆</u>
						-	(A) Total revenue	Rel e>	(B) ated or cempt	(C) Unrelate busines	ss	(D) Revenue excluded from x under sections
								1	nction venue	revenu	e la	512 - 514
इ इ		.a Federated campaig		1a								
ran our		b Membership dues		1b								
tributions, Gifts, Grants Other Similar Amounts		c Fundraising events		1c								
Siffs lar		d Related organizatione Government grants (contents)		1d								
imi		f All other contributions		1e								
tion or S		and similar amounts r	not included	1f								
ibu		g Noncash contributi	ons included									
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a - 1f \$ _				_						
ة د		h Total. Add lines 1a	1-17	•	· · ·	Business Co	odo I	Т		<u> </u>		
ще	2	a EMPLOYER CONTRIBUT	IONS					,364,874	249,3	64,874		
eVe7		PARTICIPANT CONTRIB						928,093	26,9	28,093		
a, Gr	c	mEDICARE PART D SUB	SSIDY					511,668	2,5	11,668		
ervic	c	d CLASS ACTION LITIGAT	TION PROCEEDS	i				,025,096	1,0	25,096		
S.	6	E LIQUIDATED DAMAGES	;			91	00099	593,700	5	93,700		
Program Service Revenue	f	f All other program se	ervice revenue	<u> </u>								
Ĕ		Total. Add lines 2a-2			>	280,42	3,431					
		Investment income (i		lends, i	nterest, ar	nd other						
		similar amounts)				<u>.</u>	23,974,09	93				23,974,093
		Income from investm Royalties	ent of tax-exe		ond procee	eds ► ►		+				
	,	Royaldes ! !	(ı) Rea		(II) Pe			+				
	6	a Gross rents										
	ı	b Less rental expenses										
	•	c Rental income or (loss)										
	•	d Net rental income o	or (loss)			>						
			(ı) Securi	ties	(II) C	ther						
	78	a Gross amount from sales of assets other	360,8	377,770								
		than inventory										
	ı	b Less cost or other basis and	350	359,625								
		sales expenses		518,145								
		C Gain or (loss) d Net gain or (loss)					1,518,14	15				1,518,145
	88	a Gross income from f	undraising ev	_								
ıue		(not including \$ contributions reporte		of								
.ve		See Part IV, line 18										
å		b Less direct expense c Net income or (loss)		b cing ov	onts							
Other Revenue		a Gross income from g				<u> </u>		+				
0		See Part IV, line 19			ļ							
		b Less direct expense		a b								
		c Net income or (loss)			les							
	10	aGross sales of inven										
		returns and anoward	ces	а	}							
	ı	b Less cost of goods	sold	b								
	•	Net income or (loss)		finvent								
	1:	Miscellaneous 1a _{MISCELL} ANEOUS	s Kevenue		Busines	900099	37,08	38				37,088
							,					,
	ı	ь										
	•	с										
		d All other revenue .										
		e Total. Add lines 11a				•	37,08	38				
	12	2 Total revenue. See	Instructions			. •	305,952,75	57	280,423,43	1	0	25,529,326
												Form 990 (2018)

Forn	n 990 (2018)				Page 10
	Statement of Functional Expenses ion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nizations must com	plete column (A)	
	Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
	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) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21		·		
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, line 15 and 16				
4	Benefits paid to or for members	250,252,493			
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				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	595,896			
c	: Accounting	119,418			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,616,070			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	401,437			
12	Advertising and promotion				
13	Office expenses	401,088			
14	Information technology	305,366			
15	Royalties				
16	Occupancy	244,944			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	161,417			
23	Insurance	49,443			
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 O)				
	a SHARED ADM EXP REIMB	6,924,837			
	b FEES MANDATED BY ACA	121,401			
	c				
	d d				
	e All other expenses				
	Total functional expenses. Add lines 1 through 24e	261,193,810			
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Form **990** (2018)

19

20

21

23

24

26

Liabilities 22

Assets or 30

Net

31

32

33

34

Deferred revenue . . .

Complete Part X of Schedule D

Total net assets or fund balances

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and

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

Retained earnings, endowment, accumulated income, or other funds

Page **11**

9.936

950,664

25.384.593

27.275.808

0

890,939,714

890,939,714

918,215,522

Form **990** (2018)

19

20

21

22 23

24

25

26

0 30

0 31

32

33

34

798,496,455

798,496,455

850,387,308

48.391.411

51.890.853

	Check if Schedule O contains a response or note to any line in this Part IX .			🗆
		(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	1,236,927	1	2,169,9
2	Savings and temporary cash investments		2	

	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	25,861,510	4	25,645,239
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Loans and other receivables from other disqualified persons (as defined under			

section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . 8 Inventories for sale or use . Prepaid expenses and deferred charges 8.446 9 10a Land, buildings, and equipment cost or other 10a 1,896,952 basis Complete Part VI of Schedule D 946,288 1,071,121 Less accumulated depreciation 10b 10c

457,060,139 522,251,234 11 11 Investments—publicly traded securities . 342,677,000 12 355.761.105 12 Investments—other securities See Part IV, line 11 . 13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 . 22,472,165 15 11.427.380 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . . . 850.387.308 16 918.215.522 1,891,215 3,499,442 17 17 Accounts payable and accrued expenses 18 18 Grants payable . .

Fund Balance complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 36-2229735

Form 990 (2018)

Form 990, Part III, Line 4a:

Name: CHICAGO REGIONAL COUNCIL OF CARPENTERS WELFARE FUND

TO PROVIDE HEALTH CARE, DENTAL, AND DISABILITY BENEFITS FOR ELIGIBLE PLAN PARTICIPANTS AND/OR THEIR DEPENDENTS IN ACCORDANCE WITH THE PLAN

DOCUMENT AND SCHEDULE OF BENEFITS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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.

DLN: 93493111007190 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** CHICAGO REGIONAL COUNCIL OF CARPENTERS WELFARE FUND 36-2229735 Part I 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 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? ☐ Yes ☐ No 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? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 an 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 day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, 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 year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes 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) 8 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations Ma	aintaining Col	lections (of Art, I	Histor	ical T	reası	ures, or	Other	Similar As	ssets ((continued)
3		g the organization's acq	uisition, accessioi	n, and other	r records	, check	any of	the fo	ollowing t	hat are a	a significant u	use of it	s collection
а	ıtems	s (check all that apply)				d							
·	Ш	Public exhibition				u	Ш	Loan	or excha	ange pro	grams		
b		Scholarly research				е		Othe	er				
c		Preservation for future	e generations										
4	Provi Part	de a description of the XIII	organızatıon's col	lections and	d explain	how th	ey furtl	ner th	e organız	ation's e	exempt purpo	se in	
5		ng the year, did the orga ts to be sold to raise fur									mılar	□ Y	es 🗌 No
Pa	rt IV	Escrow and Cust							_				
		Complete if the org X, line 21.	ganization ansv	vered "Yes	on Fo	rm 990), Part	IV, II	ine 9, oi	r report	ed an amou	int on	Form 990, Part
1a		e organization an agent ded on Form 990, Part)		an or other	ıntermed	diary for	contri	bution	ns or othe	er assets	not	□ Y	es 🗆 No
ь	If "Y	es," explain the arrange	ement in Part XIII	and comple	ete the fo	ollowina	table		- 1		Α	mount	
c		nning balance	All Mills	23/11/21						1c			
d	-	tions during the year							l	1d			
е		ibutions during the year	-						l	1e			
f		ng balance								1f			
2a	Dıd t	he organization include	an amount on Fo	rm 990, Pa	rt X, lıne	21, for	escrow	or cu	ustodial a	ccount l	ability?		es 🗌 No
b	If "Ye	es," explain the arrange	ment in Part XIII	Check her	e if the e	xplanat	ion has	been	provided	d ın Part	XIII		
Pa	rt V	Endowment Fund	ds. Complete ıf	the organ	nization	answe	red "Y	es" o	n Form	990, Pa	rt IV, line 1	.0.	
				(a)Currei	nt year	(b)F	rıor yea	r	(c)Two ye	ears back	(d)Three yea	ars back	(e)Four years back
1 a	Beginn	ning of year balance .											
b	Contri	butions											
С	Net in	vestment earnings, gair	ns, and losses										
d	Grants	s or scholarships	•										
е		expenditures for facilitie	es										
f	Admın	istrative expenses .											
q	End of	year balance											
2		ide the estimated percei	ntage of the curre	ent vear en	d halance	· (line 1	a colu	mn (a	1) held a	ς	-		
a		d designated or quasi-e	=	ine year en	a balance	- (11110-1	g, colu	····· (a	ij) neid d	3			
b		nanent endowment >											
_		porarily restricted endov	umont •										
С	•	percentages on lines 2a		ld equal 10	0%								
3a	Are t	here endowment funds nization by		•		tion tha	t are h	eld an	nd admını	stered fo	or the		Yes No
	_	nrelated organizations										3	Ba(i)
		related organizations .										<u> </u>	a(ii)
b		es" on 3a(II), are the rel		s listed as	required	on Sche	edule R	? .					3b
4	Desc	ribe in Part XIII the inte	ended uses of the	organizatio	n's endo	wment	funds						
Pa	rt VI	Land, Buildings,											
		Complete of the or											
	Descr	ription of property	(a) Cost or oth (Investme		(B) Cost	t or other	Dasis (otner)	(c) Acc	umulated	depreciation		(d) Book value
1a	Land												
b	Buildir	ngs											
c	Leasel	hold improvements											
d	Equipr	ment					1,89	96,952			946,288		950,664
	Other												
Tota	ıı. Add	lines 1a through 1e (Co	olumn (d) must e	qual Form S	990, Part	X, colu	mn (B)	, line	10(c)) .		>		950,664
											Sch	edule I	D (Form 990) 2018

Part VII Investments—Other Securities. Complete if the	he organization ar	swered "Yes" or	Form 990, Part IV, line	11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value		(c) Method of valuation	
(including name of security) (1) Financial derivatives		Cos	st or end-of-year market valu	ie
(2) Closely-held equity interests				
(3) Other(A) COLLATERAL HELD FOR SEC'S ON LOAN	8,736,1	54	F	
(B) ULLICO SEP ACCOUNT W1	15,417,5	34	F	
(C) NT COM DAILY GOVT/CR BD INDEX FUND	145,882,7	19	F	
(D) NT COM DAILY S&P 500 EQUITY INDEX FUND	109,929,6	11	F	
(E) CIF OPPORTUNISTIC INVESTMENT ALLOCATION PORTFOLIO	75,794,9		F	
(F)	73,734,3		<u>'</u>	
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	355,761,1	15		
Part VIII Investments—Program Related.				
Complete if the organization answered 'Yes' on F (a) Description of investment	Form 990, Part IV (b) Book val		orm 990, Part X, line 13. (c) Method of valuation	
	(B) Book var		st or end-of-year market value	ıe
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part IX Other Assets. Complete if the organization answered	d 'Yes' on Form 990.	Part IV. line 11d	See Form 990. Part X. line 1	 5
(a) Description				ook value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part X Other Liabilities. Complete if the organization a		Form 990, Part		
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book value		
(1) Federal income taxes		<u> </u>		
DUE TO BROKERS		16,166,773		
HELD FOR SECURITIES ON LOAN FEES MANADATED BY ACA		8,736,154 121,401		
DEFERRED LEASE INCENTIVE		222,432		
DUE TO RELATED FUND		137,833		
(6)				
(7)				
(8)				
(9)			1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	b	25,384,593	<u> </u>	
2. Liability for uncertain tax positions. In Part XIII, provide the text o		_		
organization's liability for uncertain tax positions under FIN 48 (ASC 3	/+U) Check here if t	ne text of the foot	note has been provided in Pa	air VIII 📆

Part XI

2

b

d

e

3

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2018

Subtract line 2e from line 1

Page 4

31,050,579

304,336,687

1,616,070 305,952,757

259,577,740

259,577,740

1,616,070

261.193.810

Schedule D (Form 990) 2018

_	Subtract line at 1011 line 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		 •	_	
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$				
а	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	1,616,070		
b	Other (Describe in Part XIII)	4b			
c	Add lines 4a and 4b			4c	
_					

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2a

2b

2c

2d

2a 2b

2c

2d

4a

4b

Explanation

31,050,579

2e

2e

3

4c

5

1,616,070

Amounts included on line 1 but not on Form 990, Part IX, line 25
Donated services and use of facilities
Prior year adjustments
Other losses

Add lines 2a through 2d . .

Return Reference

Other (Describe in Part XIII)

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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 X, line 2, Part

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Supplemental Information

Donated services and use of facilities

Add lines 2a through 2d

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Software Version: EIN: 36-2229735

Software ID:

Name: CHICAGO REGIONAL COUNCIL OF CARPENTERS

WELFARE FUND

ION BY TAX AUTHORITIES THE PLAN IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOW

Supplemental Information

Return Reference Explanation

PART X, LINE 2

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE THE PLAN TO EVALUATE TAX POSITIONS TAKEN BY THE PLAN AND RECOGNIZE A TAX LIABILITY IF THE PLAN HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINAT

EVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19311	1007	190				
Sch	edule J	Co	mpensati	ion Information	10	1B No	1545-0	0047				
(For	n 990)	For certain Officer		rustees, Key Employees, and Hig	hest	•						
		► Complete if the orga	Compensa nization answ	ited Employees vered "Yes" on Form 990, Part IV	, line 23.	2018						
D			▶ Attach	to Form 990. instructions and the latest inform) Den i						
•	tment of the Treasury al Revenue Service	F Go to <u>www.irs.gov</u>	<u>/ </u>	mistructions and the latest mion	nation.		ectio					
	ne of the organiza	ation DUNCIL OF CARPENTERS			Employer identificat	tion nu	ımber					
	FARE FUND	ONCIE OF CARRENTERS			36-2229735							
Pa	rt I Questi	ons Regarding Compensati	ion									
							Yes	No				
1a				the following to or for a person liste y relevant information regarding the								
		s or charter travel		Housing allowance or residence for	•							
	_	companions	님	Payments for business use of perso								
		nification and gross-up payments	H	Health or social club dues or initiative Personal services (e.g., maid, chauf								
	L Discretion	nary spending account		Personal services (e g , maid, chaul	reur, cher)							
b		xes in line 1a are checked, did the all of the expenses described abov		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1 b						
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2						
	directors, truste	es, officers, including the CEO/EX	ecutive Director	r, regarding the items checked in line	e la'							
3		If any, of the following the filing of EO/Executive Director Check all		ed to establish the compensation of the	ne							
	_	•		CEO/Executive Director, but explain i	n Part III							
	Compans:	ation committee	~	Written employment contract								
		ent compensation consultant		Compensation survey or study								
		of other organizations	<u>~</u>	Approval by the board or compensa	ition committee							
4	During the year related organiza		90, Part VII, Se	ction A, line 1a, with respect to the f	ılıng organızatıon or a							
	_											
a b		ance payment or change-of-contr r receive payment from, a supple		ified retirement plan?		4a 4b		No No				
C	•	r receive payment from, a supple r receive payment from, an equity	•	· ·		4c		No				
•			•	blicable amounts for each item in Par	t III							
_		(i), 501(c)(4), and 501(c)(29)	_									
5		ed on Form 990, Part VII, Section ontingent on the revenues of		the organization pay or accrue any								
а	The organization	n?				5a						
b	Any related orga					5b						
_	-	5a or 5b, describe in Part III										
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did t	the organization pay or accrue any								
a	The organization					6a						
b	Any related orga	anızatıon? 6a or 6b, describe in Part III				6b						
7	•	•	A line to did i	the organization provide any newforce	d							
7	payments not d	escribed in lines 5 and 6? If "Yes,	" describe in Pa		u	7						
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8						
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9						
For F	Paperwork Redu	uction Act Notice, see the Inst	ructions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	990)	2018				

Seriedale 3 (161111 330) 2010								raye Z
Part II Officers, Directors, Trustees, Key Employees, and Hi								
For each individual whose compensation must be reported on Schedule J, repor	t cc	mpensation fro	m the organization	on row (ı) and fro	m related organiza	tions, described i	n the	_
instructions, on row (ii) Do not list any individuals that are not listed on Form 9	990	, Part VII	530 B + 1477 G					
Note. The sum of columns (B)(I)-(III) for each listed individual must equal the t	ota							
(A) Name and Title		(B) Breal	kdown of W-2 and/o	or 1099-MISC	(C) Retirement			(F)
		ĺ	compensation		and other	benefits	columns	Compensation in
		(i) Base	(ii)	(iii) Other	deferred compensation		(B)(ı)-(D)	column (B) reported as
		compensation	Bonus & incentive	reportable	compensation			deferred on prior
		ĺ	compensation	compensation				Form 990
See Additional Data Table								
		ĺ						
		 						
		 						
		ĺ						
		ĺ						

Schedule J (Form 990) 2018 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Schedule J (Form 990) 2018

Additional Dat	ta							
			Software ID:					
			Software Version:					
			EIN:	36-2229735				
			Name:	CHICAGO REGIONAL WELFARE FUND	COUNCIL OF CARPEN	ITERS		
Form 990, Schedul	е J,	Part II - Officers, Di	irectors, Trustees, K	ey Employees, and I	lighest Compensate	d Employees		
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
GARY PERINAR JR		(i) Base Compensation (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
GARY PERINAR JR TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	331,142	0	4,837	123,363	23,021	482,363	0
JEFFREY ISAACSON TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	298,656	0	4,428	111,655	22,637	437,376	0
KEITH JUTKINS TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	243,965	0	1,145	97,964	22,637	365,711	
JOSEPH PASTORINO TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	229,248	0	2,984	91,807	22,637	346,676	0
BRUCE WERNING TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	156,450	0	1,650	69,127	18,419	245,646	0
JOHN M JARGER TRUSTEE	(1)	0	0	0	0	0	C	0
	(11)	216,748	0	3,333	91,807	22,637	334,525	5 0
KRISTINA GUASTAFERRI ADMINISTRATOR	(1)	0	0	0	0	0	C	0

40,851

40,853

40,851

40,851

40,851

24,523

24,523

24,523

24,523

24,523

361,229

270,126

221,451

191,392

187,164

0

0

ADMINISTRATOR

CINDY RIVERA ASSISTANT

TIM DROGOS CONTROLLER

BRIAN LESTERS IT MANAGER

SHARI BOBOWSKI

RETIREMENT BENEFITS MGR

ADMINISTRATOR

(11)

(1)

(11)

(1)

(11)

(1)

(11)

(1)

(11)

295,855

204,752

156,077

126,018

121,790

efile GRAPHI	C print -	- DO NO	T PROCES	S As	Filed Data -					DL	N: 93	4931	110	07190
Schedule L (Form 990 or 990)-EZ) ►	Complet	e if the org	anizatio	ons with Ir	on Form 9	90, Part IV, li	nes 2	25a, 2	25b, 20				5-0047
				► At	· 28c, or Form 99 tach to Form 990	or Form 99	90-EZ.					2(1	8
Department of the Tre			⊳ Go t	o <u>www.</u>	<u>irs.gov/Form990</u>	for the late	st information	n.				Open Ins	to P	ublic
Internal Revenue Serv Name of the org	anızatıon							Er	nplo	yer ide	ntifica			
CHICAGO REGIONA WELFARE FUND	AL COUNCII	L OF CARPE	NTERS					36	5-222	9735				
					01(c)(3), section 5						40h			
			ied person		on Form 990, Part : b) Relationship be					Descript		(d) Cor	rected?
	,	, , , , , , , , , , , , , , , , , , , ,				rganızatıon	F			ansactı			es	No
								_						
				+				+						
Cor	nplete if to orted an a (b) Rela	the organizamount or ationship	n Form 990, (c) Purpose	red "Yes Part X, lı (d) Lo	Persons. " on Form 990-EZ, ne 5, 6, or 22 an to or from the rganization?	(e)Original principal amount	38a, or Form 99 (f)Balance due	(g) defa) In nult?	Appro boa comm	h) ved by rd or nittee?	(ganıza i) Wri greem	tten
	-			То	From			Yes	No	Yes	No	Yes		No
	-													
	1													
Total					<u> </u>	\$								
Part IIII Gra	nts or A	Assistan	ce Benefit	tina Int	terested Perso	ns.								
Con	nplete if	the orga	nızatıon an	swered	"Yes" on Form 9	990, Part IV								
(a) Name of interested person (b) Relation interested person organ			on and th		of assistance	(d) Type o	of assi	stand	ce	(e) Pu	rpose (of ass	istance	
										_				
										-+				
For Paperwork Red	luction Ac	t Notice, s	ee the Instru	ctions foi	 r Form 990 or 990-F	: 7 . C	at No 50056A		Sc	hadula I	(Form	000.0	- 000	EZ) 201

,					. ugc =
Part IV Business Transactions In Complete if the organization			a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sl organiz rever	ation's
				Yes	No
(1) GARY PERINAR	TRUSTEE IS A MEMBER OF BOARD OF DIRECTORS AT AMALGAMATED BANK OF CHICAGO	, , , , , , , , , , , , , , , , , , ,	INVESTMENT MANAGEMENT, CUSTODIAL AND SECURITY LENDING FEES PAID BY PLAN TO BANK		No
(2) GARY PERINAR	TRUSTEE IS A MEMBER OF BOARD OF DIRECTORS AT BLUE		FEES PAID TO PPO NETWORK PROVIDER BY THE PLAN		No

CROSS BLUE SHIELD OF

Explanation

Schedule L (Form 990 or 990-EZ) 2018

Provide additional information for responses to questions on Schedule L (see instructions)

Part V

Supplemental Information

Return Reference

efile GRAPH	IC print - DO NOT PROCESS	As Filed Data -		DLN:	93493111007190
SCHEDUL (Form 990 or EZ)	990- Complete to pro	ons on n.	2018 Open to Public Inspection		
WELFARE FUND	ਬੋਸੀਂਟਰtion AL COUNCIL OF CARPENTERS e O, Supplemental Informatio	on .		Employer identi 36-2229735	fication number
Return Reference			Explanation		
FORM 990, PART VI, SECTION B, LINE 11B	THE BOARD OF TRUSTEES HAS Y TO REVIEW THE FORM 990 AF				SPONSIBILIT

Return Explanation
Reference

LINE 12C

FORM 990, THE BOARD OF TRUSTEES ARE REQUIRED TO DISCLOSE ANY NONADHERANCE TO THE ADOPTED POLICY PART VI, SECTION B,

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 15

Return Explanation
Reference

FORM 990,	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON
PART VI,	REQUEST AT THE FUND OFFICE
SECTION C,	
LINE 19	

Return Explanation
Reference

FORM 990, PART XI, LINE 9

efile GRAPHIC print - DO	NOT PROCESS	As Filed Data -										DLN: 93493	111007	190		
SCHEDULE R (Form 990)	> (Related C	_		s" on Form	990, Part		_		37.		20	1545-004	7		
Department of the Treasury Internal Revenue Service		► Go to <u>www</u>	v.irs.gov/				e latest info	ormation.				Open to Inspe	o Public ection			
Name of the organization CHICAGO REGIONAL COUNCIL OF C WELFARE FUND	ARPENTERS								-	loyer identifi 229735	cation	number				
Part I Identification	of Disregarded E	ntities Complete If	the organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3	3.							
Name, address, and	(a) Name, address, and EIN (if applicable) of disregarded entity		(a) s, and EIN (if applicable) of disregarded entity			(b) Primary a		Legal dom	c) nicile (state n country)	(d) Total inco	(d) (e) Total income End-of-year ass		ssets (f) Ssets Direct continuentity		ntrolling	
Part II Identification of related tax-exent See Additional Data Table	of Related Tax-Ex npt organizations di		s Comple	l ete ıf the org	anızatıon	l answered	"Yes" on F	orm 990,	Part IV	/, line 34 bed	cause	it had one or	more			
	(a) d EIN of related organızatı	ion	Prim	(b) ary activity			(d) Exempt Cod		Public ch	(e) narity status n 501(c)(3))	Dır	(f) ect controlling entity	Section (13) cor enti	512(b) itrolled ty?		
													Yes	No		
For Paperwork Reduction Ac	t Notice see the Inc	structions for Form 9	90			t No 5013	257				Scho	edule R (Form	990) 30	18		

	(b) Primary	(c) Legal	(d) Direct		t Share of	(g) Share of	Disprop	rtionate		Gene	al or Pe	(k) ercentag
	activity	(state or foreign country)	controlling entity	unrelated, excluded from tax under sections 512	m	e end-of-year assets	alloca	tions?	20 of Schedule K-1 (Form 1065)		ging ov ier?	wnershi
				514)			Yes	No		Yes	No	
												-
					l nization ans	 wered "Yes	" on F	orm 9	l 90, Part IV,	line	34	
,												
(b) Primary activity	L do (state	egal mıcıle or foreıgn				(f) Share of total Income		year	-of- Perce	ntage	€	(i) ion 512 control entity?
	Con	unici y)									Yes	s Ne
												+
												+
												+
												+
												$-\!\!\!\!-$
	ganizations treated as	Primary activity cions Taxable as a Corporation ganizations treated as a corporation do (b) Primary activity L do (state	Primary activity Primary activity Legal domicile (state or foreign country) Lions Taxable as a Corporation or Trus ganizations treated as a corporation or tru	Primary activity Primary acti	Primary activity Primary activity Legal domicile (state or foreign country) Predominant income (relate unrelated, excluded from tax under sections 512 514)	Primary activity Primary activity Legal domicile (state or foreign country) Direct controlling entity Predominant income(related, excluded from tax under sections 512-514)	Primary activity Primary activity Primary acti	Primary activity Primary activity Primary acti	Primary activity Primary activity Legal activity L	Primary activity Primary activity Activity Activity Complete Controlling Controlling	Primary activity Primary activity Complete Compl	Primary activity acti

o Sharing of paid employees with related organization(s)

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses .

(1)CHICAGO REGIONAL COUNCIL OF CARPENTERS PENSION FUND

(2)CHICAGO REGIONAL COUNCIL OF CARPENTERS PENSION FUND

(3)CHICAGO REGIONAL COUNCIL OF CARPENTERS PENSION FUND

Jene	aue K (101111 990) 2010		Pa	ige 3
Pa	rt V Transactions With Related Organizations Complete of the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 [uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
С	Gift, grant, or capital contribution from related organization(s)	1c		No
	Loans or loan guarantees to or for related organization(s)	1d		No
	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No

е	Loans or loan guarantees by related organization(s)	1e		No
f	Dividends from related organization(s)	1 f		No
g	Sale of assets to related organization(s)	1 g		No
h	Purchase of assets from related organization(s)	1h		No
i	Exchange of assets with related organization(s)	1 i		No
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
- 1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	

(b)

Transaction

type (a-s)

Ν

0

(c)

Amount involved

1,977,655

5,116,499

7,315,718

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

10 Yes

|1p | Yes

1q

1r

Schedule R (Form 990) 2018

(d)

Method of determining amount involved

1s Yes

No

No

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	(e) Are all partners section 501(c)(3) organizations?		(f) (g) Share of total income sssets	-year allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No	
													_
													_
	•								•	Schedul	e R (Form	1 99	0) 2018



Software ID: Software Version:

EIN: 36-2229735

Name: CHICAGO REGIONAL COUNCIL OF CARPENTERS

WELFARE FUND

orm 990, Schedule R, Part II - Identification of Related (a) Name, address, and EIN of related organization	(b) Primary activity	(c)	(d) Exempt Code	(e)	(f) Direct controlling	(g)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c) (3))	Direct controlling entity	Section 51 (b)(13) controlled entity?	
	CONTRIBUTING EMPLOYER					Yes No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					Ne	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					Ne	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	
	CONTRIBUTING EMPLOYER					No	

Form 990, Schedule R, Part II - Identification of Related	Tax-Exempt Organization	ons			1	1 .	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(b)(contr ent	olled ity?
	CONTRIBUTING EMPLOYER					Yes	No No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No
	CONTRIBUTING EMPLOYER						No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations (d) (e) (g) Name, address, and EIN of related organization Primary activity Legal domicile Exempt Code Public charity Direct controlling Section 512 (b)(13)(state section status entity or foreign country) controlled (if section 501(c) (3)entity? Yes No CONTRIBUTING Nο **IEMPLOYER** CONTRIBUTING No

IEMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (f) (a) (b) (c) (d) (e) Name, address, and EIN of Primary activity Legal Type of entity Direct controlling Share of total related organization (C corp, S corp, domicile entity income (state or foreign or trust) country) (1) 2020 EXHIBITS INC

CONTRIBUTING

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

EMPLOYER

(1) 225 NORTH MICHIGAN AVENUE

(9) A & A DRYWALL & TAPING SERVICE

(11) A M S OF MCHENRY COUNTY INC

(12) A WMBE CARPENTRY CONTRACTORS

(14) ALL MASONRY CONSTRUCTION INC

(10) A D L INSTALLERS INC

(13) A-1 CARPENTRY

(2) 25 EAST WASHINGTON

(3) 29 EAST MADISON

(5) 3 D EXHIBITS INC

(4) 2CG INC

CONTRIBUTING EMPLOYER		
CONTRIBUTING EMPLOYER		

CONTRIBUTING EMPLOYER				No
CONTRIBUTING EMPLOYER				No
CONTRIBUTING EMPLOYER				No

(h)

Percentage

ownership

(g)

Share of end-of-

year

assets

(i)

Section 512

(b)(13)

controlled

entity? Yes

No

No

No

No

No

No

No

No

Νo

No

No

No

No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (16) AALCO MANUFACTURING COMPANY CONTRIBUTING No **EMPLOYER** (1) ABARI CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (2) ABBEY PAVING & SEALCOATING CO CONTRIBUTING No **EMPLOYER** (3) ABLE INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (4) ABSOLUTE ALLIANCE CONTRIBUTING No **EMPLOYER** (5) ABSOLUTE I & D INC CONTRIBUTING No **EMPLOYER** (6) ACCEND CONSTRUCTION LLC CONTRIBUTING No **EMPLOYER** (7) ACCOMPLISHED MECHANICAL INDUST LTD CONTRIBUTING No **EMPLOYER** (8) ACE ACOUSTICS INC CONTRIBUTING No **EMPLOYER** (9) ACMS GROUP INC CONTRIBUTING No **EMPLOYER** (10) ACOUSTICS & SPECIALTIES INC CONTRIBUTING No EMPLOYER (11) ACTIVE INC CONTRIBUTING No EMPLOYER (12) ADJUSTABLE FORMS INC CONTRIBUTING No **EMPLOYER** (13) ADV SPORTS BUILDERS INC CONTRIBUTING No **EMPLOYER** (14) ADVANTAGE INDUSTRIAL SYSTEMS CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (31) ADVOCATE NORTHSIDE HLTH NTWRK CONTRIBUTING No **EMPLOYER** (1) AFL-AGC BUILDING TRADES CONTRIBUTING No **EMPLOYER** (2) AIRTITE CONTRACTORS INCE&K OF CHGO CONTRIBUTING No **EMPLOYER** (3) AJO INC No CONTRIBUTING **EMPLOYER** (4) ALBERT INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (5) ALBIN I ANDERSON COMPANY CONTRIBUTING No **EMPLOYER** (6) ALCA INC CONTRIBUTING No **EMPLOYER** (7) ALDRIDGE ELECTRIC INC CONTRIBUTING No **EMPLOYER** (8) ALEXANDER CONSTRUCTION CONTRIBUTING No **EMPLOYER** (9) ALF INTERIORS INC CONTRIBUTING No **EMPLOYER** (10) ALL ACOUSTIC SOLUTIONS LLC CONTRIBUTING No EMPLOYER (11) ALL AMERICAN EXTERIOR SOLUTION CONTRIBUTING No **EMPLOYER** (12) ALL CHICAGO INC CONTRIBUTING No **EMPLOYER** (13) ALL SYSTEMS INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (14) ALL-TIMATE CONSTRUCTION CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? No Yes (46) ALLAN MACK & SONS INC CONTRIBUTING No **EMPLOYER** (1) ALLEGIANCE CONSTRUCTION GROUP CONTRIBUTING No **EMPLOYER** (2) ALLIANCE CONTRACTORS INC CONTRIBUTING No **EMPLOYER** (3) ALLIANCE DRYWALL & ACOUSTICAL INC No CONTRIBUTING **EMPLOYER** (4) ALLIANCE STORE FIXTURES INC CONTRIBUTING No **EMPLOYER** (5) ALLIED POWER SERVICES LLC CONTRIBUTING No **EMPLOYER** (6) ALLPORT CONSTRUCTION CORP CONTRIBUTING No **EMPLOYER** (7) ALPHA INSTALLERS INC CONTRIBUTING No **EMPLOYER** (8) ALPINE INSULATION CONTRIBUTING No **EMPLOYER** (9) ALPS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) ALRIGHT CONCRETE CO CONTRIBUTING No EMPLOYER (11) ALTERNATIVE TRADE SHOW CONTRIBUTING No EMPLOYER (12) ALTOUNIAN BUILDERS INC CONTRIBUTING No **EMPLOYER** (13) ALTOUNIAN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (14) AMD INTERIORS INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (61) AMERICAN GRADING INC CONTRIBUTING No **EMPLOYER** (1) AMERICAN HOIST & MANLIFT INC CONTRIBUTING No **EMPLOYER** (2) AMERICAN IGLOO BUILDERS INC CONTRIBUTING No **EMPLOYER** (3) AMERICAN MECHANICAL SVCS INC CONTRIBUTING No **EMPLOYER** (4) AMEX NOOTER LLC CONTRIBUTING No **EMPLOYER** (5) AMS MECHANICAL SYSTEMS INC CONTRIBUTING No **EMPLOYER** (6) ANAGNOS DOOR CO INC CONTRIBUTING No **EMPLOYER** (7) ANCHOR MECHANICAL INC CONTRIBUTING No **EMPLOYER** (8) ANDERLOCK CORPORATION CONTRIBUTING No **EMPLOYER** (9) ANDERSON MORAN CONSTRUCTION CONTRIBUTING No **EMPLOYER** (10) ANDYS PRESTIGE FLOORS INC CONTRIBUTING No EMPLOYER (11) ANNING-JOHNSON COMPANY CONTRIBUTING No **EMPLOYER** (12) APACHE INDUSTRIAL UNITED INC CONTRIBUTING No **EMPLOYER** (13) ARAIZA CORPORATION CONTRIBUTING No **EMPLOYER** (14) ARCHITECTURAL FIXTURES INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (76) ARCHITECTURAL FLOOR SERVICE CONTRIBUTING No **EMPLOYER** (1) ARCHITECTURAL SYSTEMS INC CONTRIBUTING No **EMPLOYER** (2) ARDMORE ASSOCIATES LLC CONTRIBUTING No **EMPLOYER** (3) AREATHA CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (4) ARGO CONSTRUCTION LLC CONTRIBUTING No **EMPLOYER** (5) ARLINGTON INTERNATIONAL CONTRIBUTING No **EMPLOYER** (6) ARTHUR J ROGERS & CO CONTRIBUTING No **EMPLOYER** (7) ASBACH & VANSELOW INC CONTRIBUTING No **EMPLOYER** (8) ASC WINDOW CORPORATION CONTRIBUTING No **EMPLOYER** (9) ASHLAUR CONSTRUCTION CONTRIBUTING No **EMPLOYER** (10) ATACCON LLC CONTRIBUTING No EMPLOYER (11) ATLANTIC PLANT MAINTENANCE INC CONTRIBUTING No **EMPLOYER** (12) AUBURN CORPORATION CONTRIBUTING No **EMPLOYER** (13) AUSTAD & SON INC CONTRIBUTING No **EMPLOYER** (14) AUSTIN TYLER CONSTRUCTION LLC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (91) AUTOMATIC SYSTEMS INC CONTRIBUTING No **EMPLOYER** (1) AXIS MECHANICAL GROUP CONTRIBUTING No **EMPLOYER** (2) AZTEC CEMENT CO INC CONTRIBUTING No **EMPLOYER** (3) BAISH EXCAVATING INC CONTRIBUTING No **EMPLOYER** (4) BANE-NELSON INC CONTRIBUTING No **EMPLOYER** (5) BARRIER TECHNOLOGIES LLC CONTRIBUTING No **EMPLOYER** (6) BARTKOWSKI LIFE SAFETY CORP CONTRIBUTING No **EMPLOYER** (7) BARTON MALOW COMPANY CONTRIBUTING No **EMPLOYER** (8) BATTIS CONCRETE CONSTRUCTION CONTRIBUTING No **EMPLOYER** (9) BAUMGARTNER CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) BEAR CONSTRUCTION CO INC CONTRIBUTING No EMPLOYER (11) BEELER CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (12) BELCONREGIS GROUP INC CONTRIBUTING No **EMPLOYER** (13) BENCHMARK CONSTR CO INC CONTRIBUTING No **EMPLOYER** (14) BENNETT & BROSSEAU ROOFING INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, (b)(13)related organization domicile entity ownership income year (state or foreign or trust) assets controlled country) entity? Yes No (106) BERGLUND CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (1) BERKEL & COMPANY CONTR INC CONTRIBUTING No **EMPLOYER** (2) BERNHARD WOODWORK LTD CONTRIBUTING No **EMPLOYER** (3) BESTWAY CARPETING INC CONTRIBUTING No **EMPLOYER** (4) BETHANY HOME AND HOSPITAL CONTRIBUTING No **EMPLOYER** (5) BIDCO MARINE GROUP CONTRIBUTING No **EMPLOYER** (6) BIOFOAM INC CONTRIBUTING No **EMPLOYER** (7) BLACKETT BUILDER CONTRIBUTING No **EMPLOYER** (8) BLEACHER AMERICA INC CONTRIBUTING No **EMPLOYER** (9) BLINDERMAN CONSTR CO INC CONTRIBUTING No **EMPLOYER** (10) BLM2 CONSTRUCTION CORP CONTRIBUTING No **EMPLOYER** (11) BLUE SKY ARCHITECTURAL METALS CONTRIBUTING No **EMPLOYER** (12) BLUE SKY MC INC CONTRIBUTING No **EMPLOYER** (13) BLUE YONDER INC CONTRIBUTING No **EMPLOYER** (14) BMWC CONSTRUCTORS INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (121) BOBBIE NOONANS CHILD CARE CONTRIBUTING No **EMPLOYER** (1) BOLLER CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (2) BOTT MECHANICAL CO INC CONTRIBUTING No **EMPLOYER** (3) BRAND SCAFFOLDBRAND SERVICES CONTRIBUTING No **EMPLOYER** (4) BRANDONISIO & COMPANY CONTRIBUTING No **EMPLOYER** (5) BRANDSAFWAY SERVICES CONTRIBUTING No **EMPLOYER** (6) BRAVO INTERIORS LLC CONTRIBUTING No **EMPLOYER** (7) BRIESER CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (8) BROCK INDUSTRIAL SERVICES LLC CONTRIBUTING No **EMPLOYER** (9) BROOKWOOD BUILDERS INC CONTRIBUTING No **EMPLOYER** (10) BROWN & MOMEN INCORPORATED CONTRIBUTING No **EMPLOYER** (11) BRUNSWICK BOWLING PRODUCTS CONTRIBUTING No **EMPLOYER** (12) BUILD CORPS INC CONTRIBUTING No **EMPLOYER** (13) BUILDERS CHICAGO CORP CONTRIBUTING No **EMPLOYER** (14) BUILDERS CONCRETE SERVICES LLC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (h) (i) (g) Primary activity Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 domicile (C corp, S corp, related organization entity ıncome year ownership (b)(13)(state or foreign or trust) assets controlled country) entity? Yes No (136) BULK STORAGE CONTRIBUTING No **EMPLOYER** (1) BULLEY & ANDREWS CONTRIBUTING No **EMPLOYER** CONTRIBUTING No **BULLEY & ANDREWS CONCRETE RESTORATI EMPLOYER** (3) BURKE DESIGN & CONSTRUCTION LLC CONTRIBUTING No **EMPLOYER** (4) BURKS DRYWALL CONTRIBUTING No **EMPLOYER** (5) BUSINESS OFFICE SYSTEMS CONTRIBUTING No **EMPLOYER** (6) BYUS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (7) C & S CARPENTRY CONTRIBUTING No **EMPLOYER** (8) C & T CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (9) C B DISPLAY SERVICE INC CONTRIBUTING No **EMPLOYER** (10) C C L CORPORATION CONTRIBUTING No **EMPLOYER** (11) C E KORSGARD CO CONTRIBUTING No **EMPLOYER** (12) C R MEYER & SONS COMPANY No CONTRIBUTING **EMPLOYER** (13) CAD CONSTRUCTION CONTRIBUTING No **EMPLOYER** (14) CADENCE INC No CONTRIBUTING **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (151) CAIN MILLWORK CONTRIBUTING No **EMPLOYER** (1) CALIBER CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (2) CALIBER FLOORS INC CONTRIBUTING No **EMPLOYER** (3) CAMOSY INCORPORATED CONTRIBUTING No **EMPLOYER** (4) CAPITAL WOOD PRODUCTS COMPANY CONTRIBUTING No **EMPLOYER** (5) CAPITOL CEMENT CO INC CONTRIBUTING No **EMPLOYER** (6) CAPSTONE CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (7) CAR-MIN CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (8) CARLO CARANI & SONS INC CONTRIBUTING No **EMPLOYER** (9) CARMICHAEL CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) CARPENTERS OF CHICAGO INC CONTRIBUTING No **EMPLOYER** (11) CARPET WEAVERS COMMERCIAL INC CONTRIBUTING No **EMPLOYER** (12) CARTA CONCRETE CONSTRUCTION CONTRIBUTING No **EMPLOYER** (13) CASE FOUNDATION COMPANY CONTRIBUTING No **EMPLOYER** (14) CASEWORK CREATIONS INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? No Yes (166) CASEWORK SYSTEMS CONTRIBUTING No **EMPLOYER** (1) CBRE INC CONTRIBUTING No **EMPLOYER** (2) CBRE69 WEST WASHINGTON CONTRIBUTING No **EMPLOYER** (3) CECO CONCRETE CONSTRUCTION LLC No CONTRIBUTING **EMPLOYER** (4) CELTIC FLOOR COVERING INC CONTRIBUTING No **EMPLOYER** (5) CENTRAL CEILING SYSTEMS INC CONTRIBUTING No **EMPLOYER** (6) CENTRAL CONVEYOR COMPANY LLC CONTRIBUTING No **EMPLOYER** (7) CENTRAL ILLINOIS RECIPROCAL CONTRIBUTING No **EMPLOYER** (8) CENTRAL MACHINERY MOVERS INC CONTRIBUTING No **EMPLOYER** (9) CERAMI CONSTRUCTION CO LTD CONTRIBUTING No **EMPLOYER** (10) CERTIFIED INSTALLATIONS INC CONTRIBUTING No EMPLOYER (11) CERWE CONSTRUCTION CO CONTRIBUTING No EMPLOYER (12) CFMV R TESCO LLC CONTRIBUTING No **EMPLOYER** (13) CFS INSTALLATIONS CONTRIBUTING No **EMPLOYER** (14) CHAKRA INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (181) CHAMPION DRYWALL INC CONTRIBUTING No **EMPLOYER** (1) CHICAGO COMMERCIAL INSTALLATIO CONTRIBUTING No **EMPLOYER** (2) CHICAGO EXHIBIT PRODUCTIONS CONTRIBUTING No **EMPLOYER** (3) CHICAGO HEIGHTS CONSTRUCTION CONTRIBUTING No **EMPLOYER** (4) CHICAGO HOLLOW METAL INC CONTRIBUTING No **EMPLOYER** (5) CHICAGO I AND D SERVICES INC CONTRIBUTING No **EMPLOYER** (6) CHICAGO INTERIOR AND DRYWALL INC CONTRIBUTING No **EMPLOYER** (7) CHICAGO TOWN CONSTR INC CONTRIBUTING No **EMPLOYER** (8) CHICAGO WINDOW PRODUCTS LLC CONTRIBUTING No **EMPLOYER** (9) CHMENIA CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) CIMARRON CONSTRUCTION CO INC CONTRIBUTING No EMPLOYER (11) CIRCLE CONCRETE CONSTRUCTION CONTRIBUTING No **EMPLOYER** (12) CK II CONTRACTING INC CONTRIBUTING No **EMPLOYER** (13) CLARION CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (14) CLASSIC FLOORING INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ıncome ownership (b)(13)year (state or foreign or trust) assets controlled country) entity? Yes No (196) CLASSIC WOODWORK INC CONTRIBUTING No **EMPLOYER** (1) CLAYCO CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (2) CLEARPOINTE CONSTRUCTION LLC CONTRIBUTING No **EMPLOYER** (3) CLIMATE ENGINEERED STRUCTURES CONTRIBUTING No **EMPLOYER** (4) CLIMATE PROS LLC CONTRIBUTING No **EMPLOYER** (5) CLUNE CONSTRUCTION CO LP CONTRIBUTING No **EMPLOYER** (6) CMF GROUP INC CONTRIBUTING No **EMPLOYER** (7) CMM GROUP INC CONTRIBUTING No **EMPLOYER** (8) COAST TO COAST MILLWORK CONTRIBUTING No **EMPLOYER** (9) COASTAL INTERNATIONAL INC CONTRIBUTING No **EMPLOYER** (10) COLD SHIELD INC CONTRIBUTING No **EMPLOYER** (11) COMMERCIAL CARPENTRY INC CONTRIBUTING No **EMPLOYER** CONTRIBUTING (12)No COMMERCIAL CARPENTRY MANAGEMENT LLC **EMPLOYER** CONTRIBUTING (13) COMMERCIAL CARPET COMPANY No **EMPLOYER** (14) COMMERCIAL CARPET CONSULTANTS No CONTRIBUTING

EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (d) (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ıncome ownership (b)(13)year (state or foreign or trust) assets controlled country) entity? Yes No (211) COMMERCIAL CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (1) COMMERCIAL CONTRACTING CORP CONTRIBUTING No **EMPLOYER** (2) COMMERCIAL CUSTOM SEATING AND CONTRIBUTING No **EMPLOYER** (3) COMMERCIAL FLOOR COVERING INC CONTRIBUTING No **EMPLOYER** (4) COMMERCIAL WINDOW CONTRIBUTING No **EMPLOYER** (5) COMMUNITY PLAYLOT BUILDERS INC CONTRIBUTING No **EMPLOYER** (6) COMPASS CONCRETE MAINT INC CONTRIBUTING No **EMPLOYER** (7) COMPLETE CUSTOM SERVICES INC CONTRIBUTING No **EMPLOYER** (8) CONCRETE BY WAGNER INC CONTRIBUTING No EMPLOYER CONTRIBUTING No CONCRETE STRUCTURES OF THE MIDWEST **EMPLOYER** (10) CONCRETE STRUCTURESSACHI JV CONTRIBUTING No **EMPLOYER** (11) CONCRETE STRUCTURESUBM JV CONTRIBUTING No **EMPLOYER** (12) CONFORTI CONSTRUCTION No CONTRIBUTING **EMPLOYER** CONTRIBUTING (13) CONSTRUCTION LABOR SERVICES INC No **EMPLOYER** (14) CONSTRUCTION MATERIALS CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (226) CONTEMPORARY HAMMER WORKS INC CONTRIBUTING No **EMPLOYER** (1) CONTOUR SYSTEMS CORP CONTRIBUTING No **EMPLOYER** (2) CONTRACT CARPENTRY CORP CONTRIBUTING No **EMPLOYER** (3) CONTRACT FLOORING SERVICE CONTRIBUTING No **EMPLOYER** (4) CONTRACT INSTALLATIONS LLC CONTRIBUTING No **EMPLOYER** (5) CONTRACT OFFICE INSTALLATIONS CONTRIBUTING No **EMPLOYER** (6) CONVENTION SERVICE INC CONTRIBUTING No **EMPLOYER** (7) CONVEYING CONVENIENCE INC CONTRIBUTING No **EMPLOYER** (8) CONVEYOR SPECIALTIES INC CONTRIBUTING No **EMPLOYER** (9) COOK COUNTY CONTRIBUTING No **EMPLOYER** (10) COPENHAVER CONSTRUCTION INC CONTRIBUTING No EMPLOYER (11) COPPER CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (12) CORD CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (13) CORNERSTONE CARPENTRY CONT CONTRIBUTING No **EMPLOYER** (14) COSGROVE CONSTRUCTION INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (241) COTTAGE GROVE GLASS CO INC CONTRIBUTING No **EMPLOYER** (1) COUNSEL CONSTRUCTION LLC CONTRIBUTING No **EMPLOYER** (2) COUNTRY SIDE CARPETS & INTERIORS CONTRIBUTING No **EMPLOYER** (3) COURTHOUSE DEVELOPMENT INC CONTRIBUTING No **EMPLOYER** (4) COX CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (5) CRAFTON CONTRACTING CO CONTRIBUTING No **EMPLOYER** (6) CREATION CARPENTRY CO INC CONTRIBUTING No **EMPLOYER** (7) CREATIVE GRAIN CONTRIBUTING No **EMPLOYER** (8) CREATIVE MANAGEMENT SERVICES CONTRIBUTING No **EMPLOYER** (9) CROWN CORR INC CONTRIBUTING No **EMPLOYER** (10) CSI 3000 INC CONTRIBUTING No EMPLOYER (11) CTC INSTALLATIONS INC CONTRIBUTING No EMPLOYER (12) CUBS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (13) CUSTOM CABINET CREATIONS CONTRIBUTING No **EMPLOYER** (14) CUSTOM CONTRACTING LTD CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (256) CZARNOWSKI DISPLAY CONTRIBUTING No **EMPLOYER** (1) CZARNOWSKI DISPLAY SERV INC CONTRIBUTING No **EMPLOYER** (2) D & H ENERGY MANAGEMENT CO LLC CONTRIBUTING No **EMPLOYER** (3) D & M CONSTRUCTION SERVICES CONTRIBUTING No **EMPLOYER** (4) D B M SERVICES INC CONTRIBUTING No **EMPLOYER** (5) D CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (6) D-R ROSEMONT LLC CONTRIBUTING No **EMPLOYER** (7) DAKER CORPORATION CONTRIBUTING No **EMPLOYER** (8) DALLIA FLOOR & WALL CO INC CONTRIBUTING No **EMPLOYER** (9) DAS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) DAVE OSBORNE CONSTRUCTION CONTRIBUTING No EMPLOYER (11) DAVE SOLTWISCH PLUMBING INC CONTRIBUTING No **EMPLOYER** (12) DAVID M SCHMITT CONTRIBUTING No **EMPLOYER** (13) DAY & ZIMMERMAN NPS INC CONTRIBUTING No **EMPLOYER** (14) DEARBORN MID-WEST CONVEYOR CO CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (271) DEGRAF CONCRETE CONSTR INC CONTRIBUTING No **EMPLOYER** (1) DELGAR CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (2) DENK & ROCHE BUILDERS INC CONTRIBUTING No **EMPLOYER** (3) DENK & ROCHE BUILDERS INC CONTRIBUTING No **EMPLOYER** (4) DEPAUL UNIVERSITY CONTRIBUTING No **EMPLOYER** (5) DESIGN AGENCY INC CONTRIBUTING No **EMPLOYER** (6) DESIGN AGENCY SPECIAL CONTRIBUTING No **EMPLOYER** (7) DESIGN CENTRIX LLC CONTRIBUTING No **EMPLOYER** (8) DESIGNER KITCHENS & BATHS INC CONTRIBUTING No **EMPLOYER** (9) DGI-MENARD INC CONTRIBUTING No **EMPLOYER** (10) DI NASO & SONS CONSTR CO INC CONTRIBUTING No EMPLOYER (11) DIAN INC CONTRIBUTING No **EMPLOYER** (12) DIAZ INTERIOR CONTRACTORS INC CONTRIBUTING No **EMPLOYER** (13) DIMENSION CRAFT INC CONTRIBUTING No **EMPLOYER** (14) DIVERSIFIED CONSTRUCTION SRV CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? No Yes (286) DIVISION 12 INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (1) DN TANKS CONTRIBUTING No **EMPLOYER** (2) DOCK & DOOR INSTALL INC CONTRIBUTING No **EMPLOYER** (3) DOHERTY CONSTRUCTION INC No CONTRIBUTING **EMPLOYER** (4) DOLMEN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (5) DON BOHR & SONS INC CONTRIBUTING No **EMPLOYER** (6) DONALD E MC NABB COMPANY INC CONTRIBUTING No **EMPLOYER** (7) DONALD R BORG CONSTRUCTION CONTRIBUTING No **EMPLOYER** (8) DOOR FRAME AND HARDWARE INST CONTRIBUTING No **EMPLOYER** (9) DOOR MAN MODIFICATIONS LLC CONTRIBUTING No **EMPLOYER** (10) DOOR SERVICE INC CONTRIBUTING No EMPLOYER (11) DOOR SYSTEMS INC CONTRIBUTING No EMPLOYER (12) DOUG & STEVE CONSTR INC CONTRIBUTING No **EMPLOYER** (13) DOUGLAS FLOOR COVERING INC CONTRIBUTING No **EMPLOYER** (14) DRAKE HOTEL INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)ıncome year (state or foreign or trust) assets controlled country) entity? Yes No CONTRIBUTING (301) DRAPERY INSTALLATION SERV INC No EMPLOYER (1) DREILING CONSTRUCTION CO CONTRIBUTING No EMPLOYER (2) DRESSER-RAND COMPANY CONTRIBUTING No EMPLOYER (3) DRIVE CONSTRUCTION INC CONTRIBUTING No EMPLOYER (4) DRYDEN CONSRUCTION CO INC CONTRIBUTING No EMPLOYER (5) DRYDEN CONSTRUCTION CO INC CONTRIBUTING No EMPLOYER (6) DTI OF ILLINOIS INC CONTRIBUTING No EMPLOYER (7) DUCO CONSTRUCTION INCORPORATED CONTRIBUTING No EMPLOYER (8) DUGGAN CONTRACTING CORP CONTRIBUTING No EMPLOYER (9) DUMEX CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (10) DUNNET BAY CONSTRUCTION CONTRIBUTING No EMPLOYER (11) DUPAGE OVERHEAD GARAGE DOORS CONTRIBUTING No EMPLOYER (12) DUPREE CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (13) DURKIN CONSTRUCTION&PROJECT CONTRIBUTING No EMPLOYER (14) DURR SYSTEMS INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (316) DUTCHMAN CONTRACTING CORP CONTRIBUTING No **EMPLOYER** (1) DYKSTRA CONC CONSTR CO CONTRIBUTING No **EMPLOYER** (2) DYNAMIC SPORTS CONSTRUCTION CONTRIBUTING No **EMPLOYER** (3) E & A ENTERPRISES INC CONTRIBUTING No **EMPLOYER** (4) E D E INC CONTRIBUTING No **EMPLOYER** (5) E J INDUSTRIES INC CONTRIBUTING No **EMPLOYER** (6) E L C INSTALLATION COMPANY CONTRIBUTING No **EMPLOYER** (7) EAGLE CONCRETE INC CONTRIBUTING No **EMPLOYER** (8) EAGLE MANAGEMENT GROUP INC CONTRIBUTING No **EMPLOYER** (9) EAST BANK CLUB VENTURE CONTRIBUTING No **EMPLOYER** (10) ECO TEKK LLC NATIONSHRED CONTRIBUTING No **EMPLOYER** (11) ED FOGARTY CONCRETE CONTRIBUTING No **EMPLOYER** (12) EDON COMPONENT DIVISION CONTRIBUTING No **EMPLOYER** (13) EDON CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (14) EDWARD ALLEN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (331) EDWIN ANDERSON CONSTR CO CONTRIBUTING No **EMPLOYER** (1) EE INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (2) EEC INDUSTRIES LTD CONTRIBUTING No **EMPLOYER** (3) EFRAIM CARLSON & SON INC CONTRIBUTING No **EMPLOYER** (4) EIRENE BUILDERS INC CONTRIBUTING No **EMPLOYER** (5) ELITE INSTALL COMPANY LLC CONTRIBUTING No **EMPLOYER** (6) ELITE TRADESHOW SERVICES INC CONTRIBUTING No **EMPLOYER** (7) ELLIOT CONSTR CORP CONTRIBUTING No **EMPLOYER** (8) EMCO INTERIORS INC CONTRIBUTING No **EMPLOYER** (9) ENGER-VAVRA INC CONTRIBUTING No **EMPLOYER** (10) ENGLEWOOD CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (11) ENGSTROM CONST CO CONTRIBUTING No **EMPLOYER** (12) ENVIRONETX DBA SPECTRUM OFFICE CONTRIBUTING No **EMPLOYER** (13) EQUITY CONSTRUCTION SERVICES CONTRIBUTING No **EMPLOYER** (14) ERA VALDIVIA CONTRACTORS INC CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (361) EXHIBITTEC LLC CONTRIBUTING No **EMPLOYER** (1) F A T A AUTOMATION INC CONTRIBUTING No **EMPLOYER** (2) F H ACOUSTICS INC CONTRIBUTING No **EMPLOYER** (3) FACILITIES FURNITURE & CONST SVCS CONTRIBUTING No **EMPLOYER** (4) FAMILY MODULAR ASSEMBLY LLC CONTRIBUTING No **EMPLOYER** (5) FCI CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (6) FCL BUILDERS LLC CONTRIBUTING No **EMPLOYER** (7) FH PASCHEN SN NIELSEN CONTRIBUTING No **EMPLOYER** (8) FISHER CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (9) FIVE RIVERS CARPENTERS CONTRIBUTING No **EMPLOYER** (10) FIVE STAR DECORATING INC CONTRIBUTING No **EMPLOYER** (11) FIXTURE CONTRACTING INC CONTRIBUTING No EMPLOYER (12) FLEX-IBLE INTERIOR INC CONTRIBUTING No **EMPLOYER** (13) FLOORING RESOURCES CORP CONTRIBUTING No EMPLOYER (14) FLOORS INCORPORATED CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (d) (c) (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 domicile (C corp, S corp, related organization entity ownership (b)(13)income year (state or foreign or trust) controlled assets country) entity? Yes No CONTRIBUTING (466)No HOMES BY HEINTZ-DBA HEINTZ CONSTR **EMPLOYER** (1) HORCHER CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (2) HOTEL INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (3) HOUSE OF DOORS INC CONTRIBUTING No **EMPLOYER** (4) HOUSE OF ROLAND INC CONTRIBUTING No **EMPLOYER** (5) HUGH HENRY CONSTRUCTION CONTRIBUTING No **EMPLOYER** (6) CONTRIBUTING No HUIZINGA BROTHERS CONSTRUCTION INC **EMPLOYER** (7) HUNTERS MODULAR CONSTRUCTION CONTRIBUTING No **EMPLOYER** (8) HUSSMANN CORPORATION CONTRIBUTING No **EMPLOYER** (9) HYLAND A NOLAN PLASTERING CONTRIBUTING No **EMPLOYER** (10) IBUILDERS CORP CONTRIBUTING No **EMPLOYER** (11) ICC GROUP CONTRIBUTING No **EMPLOYER** (12) ICONIC FINISHES LLC CONTRIBUTING No **EMPLOYER** (13) ID3 GROUP LLC CONTRIBUTING No **EMPLOYER** (14) IDEAL CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (f) (g) (h) (i) Name, address, and EIN of Primary activity Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)ıncome year (state or foreign or trust) assets controlled country) entity? Yes No (481) IHC CONSTRUCTION CO LLC CONTRIBUTING No **EMPLOYER** (1) II IN ONE CONTRACTORS INC CONTRIBUTING No **EMPLOYER** (2) II IN ONE CONTRACTORSREBAR JV CONTRIBUTING No **EMPLOYER** (3) IMBERT CONSTRUCTION CONTRIBUTING No EMPLOYER (4) IMPERIAL ERECTORS INC CONTRIBUTING No **EMPLOYER** (5) IMPERIAL WOODWORKING CO CONTRIBUTING No **EMPLOYER** (6) INDEPENDENT EMPLOYEE BENEFITS CONTRIBUTING No **EMPLOYER** (7) INDEPENDENT MECHANICAL CONTRIBUTING No **EMPLOYER** (8) INDUSTRIAL DOOR COMPANY OF CONTRIBUTING No **EMPLOYER** (9) INDUSTRIAL RESOURCE GROUP LLC CONTRIBUTING No **EMPLOYER** (10) INFINITY I & D INC CONTRIBUTING No **EMPLOYER** (11) INSTALL ALL INC CONTRIBUTING No **EMPLOYER** (12) INSTALLATION CONCEPTS INC CONTRIBUTING No **EMPLOYER** (13) INSTALLATION SERVICES OF ILL INC CONTRIBUTING No IEMPLOYER I (14) INSTALLATION SPECIALISTS INC CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (646) M & J UNDERGROUND INC CONTRIBUTING No **EMPLOYER** (1) M A MORTENSON COMPANY CONTRIBUTING No **EMPLOYER** (2) M C DISPLAY'S INC CONTRIBUTING No **EMPLOYER** (3) M G DESIGN ASSOCIATES CORP CONTRIBUTING No **EMPLOYER** (4) M J BUILDERS OF ILLINOIS LLC CONTRIBUTING No **EMPLOYER** (5) M S M SOLUTIONS INC CONTRIBUTING No **EMPLOYER** (6) M-JTJ CONTR & BLDRS INC CONTRIBUTING No **EMPLOYER** (7) MM PETERS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (8) MACHINERY & CONVEYORS SERVICES CONTRIBUTING No **EMPLOYER** (9) MAG CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (10) MAGILL CONSTRUCTION CO INC CONTRIBUTING No EMPLOYER (11) MAGNUM CONSTRUCTION SVCS INC CONTRIBUTING No **EMPLOYER** (12) MAMAN CORPORATION CONTRIBUTING No **EMPLOYER** (13) MANICO FLOORING CONTRIBUTING No **EMPLOYER** (14) MANUSOS GENERAL CONTRACTING INC CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, ownership related organization domicile entity (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (676) MCDONALDS PLAZAJONES LANG CONTRIBUTING No **EMPLOYER** (1) MCGANN KETTERMAN & RIOUX CONTRIBUTING No **EMPLOYER** (2) MCT SERVICESSPX COOLING TECH CONTRIBUTING No **EMPLOYER** (3) MCWILLIAMS ELECTRIC CO INC CONTRIBUTING No **EMPLOYER** (4) MEADE ELECTRIC COMPANY INC CONTRIBUTING No **EMPLOYER** (5) MECCON INDUSTRIES INC CONTRIBUTING No **EMPLOYER** (6) MECCOR INDUSTRIES LTD CONTRIBUTING No **EMPLOYER** (7) MEDICAL & INDUSTRIAL SHIELDING EREC CONTRIBUTING No **EMPLOYER** (8) MEDINA BUILDERS INC CONTRIBUTING No **EMPLOYER** (9) MELISSA'S PRECISION TRADE SHOW CONTRIBUTING No **EMPLOYER** (10) MENDOZA ASSOCIATES LTD CONTRIBUTING No **EMPLOYER** (11) MERCHANDISE MART PROPERTIES CONTRIBUTING No EMPLOYER (12) MERCURIO CARPET & TILE INC CONTRIBUTING No **EMPLOYER** (13) MERIDIENNE CORPORATION CONTRIBUTING No EMPLOYER (14) MERKEL WOODWORKING INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (691) METRO EXHIBIT CORP CONTRIBUTING No **EMPLOYER** (1) METRO FACILITY SERVICE INC CONTRIBUTING No **EMPLOYER** (2) METROPOLITAN PIER & EXPOSITION CONTRIBUTING No **EMPLOYER** (3) MHS TECHNICAL SERVICES INC CONTRIBUTING No **EMPLOYER** (4) MICHELS FOUNDATIONS A DIVISION CONTRIBUTING No **EMPLOYER** (5) MICHUDA CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (6) MID AMERICA SYSTEMS CONTRIBUTING No **EMPLOYER** (7) MID-VALLEY CONCRETE INC CONTRIBUTING No **EMPLOYER** (8) MIDAS CONVENTION SERVICE CONTRIBUTING No **EMPLOYER** (9) MIDLAND GENERAL CONTRACTORS CONTRIBUTING No **EMPLOYER** (10) MIDLAND-FRANTZ CONSTR GROUP CONTRIBUTING No **EMPLOYER** (11) MIDSTATE SPRING TITE INC CONTRIBUTING No **EMPLOYER** (12) MIDWEST DRILLED FOUNDATIONS CONTRIBUTING No **EMPLOYER** (13) MIDWEST INSULATION CO INC CONTRIBUTING No **EMPLOYER** (14) MIDWEST REFRIGERATION INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ıncome ownership (b)(13)year (state or foreign or trust) assets controlled country) entity? Yes No (706) MIDWEST STEEL INC CONTRIBUTING No **EMPLOYER** (1) MIDWEST TRACK BUILDERS CONTRIBUTING No **EMPLOYER** (2) MIDWEST WALLMASTERS INC CONTRIBUTING No **EMPLOYER** (3) MINER & EAST INCORPORATED CONTRIBUTING No **EMPLOYER** (4) MJH INTERIORS INC CONTRIBUTING No **EMPLOYER** (5) MKD BUILDERS INC CONTRIBUTING No **EMPLOYER** (6) MLB FLOORING INC CONTRIBUTING No **EMPLOYER** (7) MOBILE HOME TRANSPORTATION SVC CONTRIBUTING No **EMPLOYER** (8) MODERN BUILDERS CONTRACTORS INC CONTRIBUTING No **EMPLOYER** CONTRIBUTING No MODERN LIVING CONSTRUCTION & MANAGE **EMPLOYER** (10) MODERNFOLD CHICAGO INC CONTRIBUTING No **EMPLOYER** (11) MODULAR INSTALLATIONS CONTRIBUTING No **EMPLOYER** (12) MOMENTUM MANAGEMENT INC No CONTRIBUTING **EMPLOYER** (13) MON-DAN INC CONTRIBUTING No **EMPLOYER** (14) MONADNOCK BUILDING No CONTRIBUTING **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (721) MONARCH CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (1) MORFIN CONSTRUCTION GENERAL CONTRIBUTING No **EMPLOYER** (2) MORRISON CONSTR CO CONTRIBUTING No **EMPLOYER** (3) MOTIF EVENTS INC CONTRIBUTING No **EMPLOYER** (4) MP SPORTS CONTRIBUTING No **EMPLOYER** (5) MR DAVID'S CARPET SERV LTD CONTRIBUTING No **EMPLOYER** (6) N A FAVIA BLDRALPINE ACOUSTIC CONTRIBUTING No **EMPLOYER** (7) N H MCLENNAN INC CONTRIBUTING No **EMPLOYER** (8) NARVICK BROTHERS CONTRIBUTING No **EMPLOYER** (9) NASH BROTHERS CONSTRUCTION CONTRIBUTING No **EMPLOYER** (10) NATHAN LINN & SONS INC CONTRIBUTING No **EMPLOYER** (11) NATIONAL CONVENTION SVCS INC CONTRIBUTING No **EMPLOYER** (12) NATIONAL RETAIL INSTALLATION CORP CONTRIBUTING No **EMPLOYER** (13) NATIONWIDE INSTALLATION SVCS CONTRIBUTING No EMPLOYER (14) NATOLA CONCRETE INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, ownership related organization domicile entity (b)(13)income year (state or foreign or trust) assets controlled country) entity? No Yes (736) NAVY PIER INC CONTRIBUTING No **EMPLOYER** (1) NEHEMIAH'S HAMMER LLC CONTRIBUTING No **EMPLOYER** (2) NELSON FIRESTOPPING & LIFE SAF CONTRIBUTING No **EMPLOYER** (3) NEWELL MACHINERY COMPANY INC No CONTRIBUTING **EMPLOYER** (4) NEWMARK CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (5) NEXT LEVEL EXHIBIT SERVICE INC CONTRIBUTING No **EMPLOYER** (6) NOBLE RICH TRADE SHOW-EXHIB CONTRIBUTING No **EMPLOYER** (7) NOLAND FACILITIES SERVICES LLC CONTRIBUTING No **EMPLOYER** (8) NOLAND SALES CORP CONTRIBUTING No **EMPLOYER** (9) NORCON INC CONTRIBUTING No **EMPLOYER** (10) NORTH CREEK BUILDERS LLC CONTRIBUTING No **EMPLOYER** (11) NORTHWEST CONTRACTORS INC CONTRIBUTING No EMPLOYER (12) NORTHWEST INSULATION INC CONTRIBUTING No **EMPLOYER** (13) NORTHWEST MILLWORK CO CONTRIBUTING No EMPLOYER (14) NORVILLA LLC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (751) NOVAK CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (1) NTH DEGREE INC CONTRIBUTING No **EMPLOYER** (2) NU VETERANS CONSTRUCTION SVCS INC CONTRIBUTING No **EMPLOYER** (3) O P C CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (4) O'CONNOR CONSTR CO INC CONTRIBUTING No **EMPLOYER** (5) O'HARE HILTON CONTRIBUTING No **EMPLOYER** (6) O'MALLEY CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (7) OAK DRYWALL CO INC CONTRIBUTING No **EMPLOYER** (8) OAKLEY CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (9) OAKWOOD CONTRACTORS INC CONTRIBUTING No **EMPLOYER** (10) OCTANE GROUP INC CONTRIBUTING No **EMPLOYER** (11) OLD VETERAN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (12) OLYMPIC TECHNOLOGIES INC CONTRIBUTING No **EMPLOYER** (13) OMNI COMMERCIAL GROUP INC CONTRIBUTING No EMPLOYER (14) ON LOCATION INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (766) ON SITE WOODWORK CORPORATION CONTRIBUTING No **EMPLOYER** (1) ON THE LEVEL INSTALLATIONS INC CONTRIBUTING No **EMPLOYER** (2) OPC CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (3) OPUS DESIGN BUILD LLC CONTRIBUTING No **EMPLOYER** (4) OREGON-WASHINGTON CARP-CONTRIBUTING No **EMPLOYER** (5) ORNELAS CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (6) OSMAN CONSTRUCTION CORP CONTRIBUTING No **EMPLOYER** (7) OTIS CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (8) OUTSTANDING TRADESHOW EXHIBIT CONTRIBUTING No **EMPLOYER** (9) OVERHEAD CONVEYOR COMPANY CONTRIBUTING No **EMPLOYER** (10) P C I FLOR TECH INC CONTRIBUTING No **EMPLOYER** (11) P G CRILLY INC CONTRIBUTING No EMPLOYER (12) P J HOERR INC CONTRIBUTING No **EMPLOYER** (13) P L M CEMENT CONSTRUCTION CONTRIBUTING No EMPLOYER (14) PALLADIUM MANAGEMENT CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (841) R L C INC CONTRIBUTING No **EMPLOYER** (1) R M SELLERGREN & ASSOCIATES INC CONTRIBUTING No **EMPLOYER** (2) R OLSON CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (3) RABY ROOFING INC CONTRIBUTING No **EMPLOYER** (4) RACK-IT INSTALLATION INC CONTRIBUTING No **EMPLOYER** (5) RAFFIN CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (6) RAGNAR BENSON CONST LLC CONTRIBUTING No **EMPLOYER** (7) RASCH CONSTRUCTION AND CONTRIBUTING No **EMPLOYER** (8) RAUSCH INFRASTRUCTURE LLC CONTRIBUTING No **EMPLOYER** (9) RAYNOR DOOR AUTHORITY OF DEKALB CONTRIBUTING No **EMPLOYER** (10) RAYNOR GARAGE DOOR & EXPRESS CONTRIBUTING No EMPLOYER (11) READY TILE CO LLC CONTRIBUTING No EMPLOYER (12) REED ILLINOIS CORPORATION CONTRIBUTING No **EMPLOYER** (13) REED MACHINERY & TRANS CO INC CONTRIBUTING No **EMPLOYER** (14) REFLECTION WINDOW COMPANY LLC CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 domicile (C corp, S corp, related organization entity ıncome year ownership (b)(13)(state or foreign or trust) assets controlled country) entity? Yes No (901) S B E CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (1) S C Y CONCRETE CONST INC CONTRIBUTING No **EMPLOYER** (2) S HAINES PAVING & EXCAVATING CONTRIBUTING No **EMPLOYER** (3) SACHI CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (4) SAFWAY ATLANTIC LLC CONTRIBUTING No **EMPLOYER** (5) SANDOVAL & SONS INC CONTRIBUTING No **EMPLOYER** (6) SCALE CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (7) SCARLET CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (8) SCHAEFGES BROS INC CONTRIBUTING No **EMPLOYER** (9) SCHAL BOVIS INC CONTRIBUTING No **EMPLOYER** (10) SCHATZ SERVICES LLC CONTRIBUTING No EMPLOYER (11) SCHLEIS FLOOR COVERING INC CONTRIBUTING No **EMPLOYER** (12) SCHNEIDER ACOUSTICS INC CONTRIBUTING No **EMPLOYER** (13) SCHOMBURG & SCHOMBURG CONTRIBUTING No **EMPLOYER** (14)CONTRIBUTING No SCIENTIFIC LABORATORY INSTALLATIONS **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (931) SKENDER CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (1) SMART INTERIORS LLC CONTRIBUTING No **EMPLOYER** (2) SOFTER-LITE WINDOWS CONTRIBUTING No **EMPLOYER** (3) SOLID PLATFORMS INC CONTRIBUTING No **EMPLOYER** (4) SOLIS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (5) SORENSEN CONSTR SERVICES LLC CONTRIBUTING No **EMPLOYER** (6) SPEARPOINT CONTRACTING CO CONTRIBUTING No **EMPLOYER** (7) SPECIALTY BUILDERS INC CONTRIBUTING No **EMPLOYER** (8) SPECTRUM SHOW SERVICES INC CONTRIBUTING No **EMPLOYER** (9) SPORTS SURFACING INC CONTRIBUTING No **EMPLOYER** (10) SPRINKMANN SONS CORPORATION CONTRIBUTING No **EMPLOYER** (11) STAALSEN CONSTR CO INC CONTRIBUTING No EMPLOYER (12) STALLION FLOORING LLC CONTRIBUTING No EMPLOYER (13) STALWORTH UNDERGROUND LLC CONTRIBUTING No **EMPLOYER** (14) STAR INCORPORATED CONTRIBUTING No **EMPLOYER**

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (991) THE CLARK CONSTR GROUP INC CONTRIBUTING No **EMPLOYER** (1) THE EXPO GROUP LP CONTRIBUTING No **EMPLOYER** (2) THE FOUR ONE GROUP LLC CONTRIBUTING No **EMPLOYER** (3) THE JOHN BURNS CONSTR CO CONTRIBUTING No **EMPLOYER** (4) THE LABOR CONNECTION LLC CONTRIBUTING No **EMPLOYER** (5) THE LEVY COMPANY CONTRIBUTING No **EMPLOYER** (6) THE MARLEY COOLING TOWER CO CONTRIBUTING No **EMPLOYER** (7) THE PANGERE CORPORATION CONTRIBUTING No **EMPLOYER** (8) THE R T MILORD COMPANY CONTRIBUTING No EMPLOYER (9) THE ROCKWELL GROUP CONTRIBUTING No **EMPLOYER** (10) THE STATE GROUP INDUSTRIAL USA CONTRIBUTING No EMPLOYER (11) THE VAN PELT CONSTR CO INC CONTRIBUTING No EMPLOYER (12) THIENEMAN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (13) THORNE ASSOCIATES INC CONTRIBUTING No **EMPLOYER** (14) TIDAL CONSTRUCTION SVCS INC CONTRIBUTING No EMPLOYER

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? No Yes (1006) TOBEY'S CONSTRUCTION & CARTAGE CONTRIBUTING No **EMPLOYER** (1) TONN & BLANK CONST CONTRIBUTING No **EMPLOYER** (2) TOPS FIELD SERVICES LLC CONTRIBUTING No **EMPLOYER** (3) TOR CONSTRUCTION CO INC CONTRIBUTING No **EMPLOYER** (4) TORO CONSTRUCTION CORP CONTRIBUTING No **EMPLOYER** (5) TRACK SURFACES COMPANY CONTRIBUTING No **EMPLOYER** (6) TRADEMARK FLOORING INC CONTRIBUTING No **EMPLOYER** (7) TRADESHOW RESOURCES INC CONTRIBUTING No **EMPLOYER** (8) TRADEWINDS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (9) TRANSERVICE LOGISTICS INC CONTRIBUTING No **EMPLOYER** (10) TREBOR INDUSTRIES CORP CONTRIBUTING No **EMPLOYER** (11) TRI-K CONSTRUCTION INC CONTRIBUTING No EMPLOYER (12) TRI-NORTH BUILDERS INC CONTRIBUTING No **EMPLOYER** (13) TRI-STATE ENTERPRISES INC CONTRIBUTING No EMPLOYER (14) TRI-TRADE CORP CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year or trust) (state or foreign assets controlled country) entity? Yes No (1021) TRIAD BUILDERS INC CONTRIBUTING No **EMPLOYER** (1) TRIBCO CONSTRUCTION SERVCS LLC CONTRIBUTING No **EMPLOYER** (2) TRICE CONSTRUCTION COMPANY CONTRIBUTING No **EMPLOYER** (3) TRICOR CARPENTRY LLC CONTRIBUTING No **EMPLOYER** (4) TRICOR CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (5) TRIPAR DRYWALL INC CONTRIBUTING No **EMPLOYER** (6) TRU SERVICE GROUP INC CONTRIBUTING No **EMPLOYER** (7) TURBINE PROS LLC CONTRIBUTING No **EMPLOYER** (8) TURNER CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (9) TWIN CITIES CARP & JOINERS CONTRIBUTING No **EMPLOYER** (10) U S A DISPLAYS INC CONTRIBUTING No **EMPLOYER** (11) UBC OF AMERICANAT JOB CORPS CONTRIBUTING No EMPLOYER (12) UJAMAA CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (13) UNION PAYROLL AGENCY INC CONTRIBUTING No **EMPLOYER** (14) UNION TEMPORARY SERVICES INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (h) (i) (g) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ıncome ownership (b)(13)year (state or foreign or trust) assets controlled country) entity? Yes No (1036) UNIQUE CASEWORK INSTALLATION CONTRIBUTING No **EMPLOYER** (1) UNISTRUT INT'L CORPUNISTRUT IL CONTRIBUTING No **EMPLOYER** (2) UNITED CARPET INC CONTRIBUTING No **EMPLOYER** (3) UNITED INSULATED STRUCTURES CORP CONTRIBUTING No **EMPLOYER** (4) UNITED MILLWORK OF NEW YORK INC CONTRIBUTING No **EMPLOYER** (5) UNIVERSAL PLANT SERVICES INC CONTRIBUTING No **EMPLOYER** (6) URBAN TILE & CARPET CORP CONTRIBUTING No **EMPLOYER** (7) URBAN-INSTALLS INC CONTRIBUTING No **EMPLOYER** (8) USMM INC CONTRIBUTING No **EMPLOYER** (9) UTILITY & INDUSTRIAL CONST CO CONTRIBUTING No **EMPLOYER** (10) VALENTI BUILDERS INC CONTRIBUTING No **EMPLOYER** (11) VALLEY EXPOSITION SERVICE INC CONTRIBUTING No **EMPLOYER** (12) VALLEY INSTALLATIONS CONTRIBUTING No **EMPLOYER** CONTRIBUTING No (13)VEHICLE LIFTS & MECHANICAL EQUIPMENT **EMPLOYER**

No

(14) VERNATE CONSTRUCTION INC

CONTRIBUTING

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Primary activity Name, address, and EIN of Type of entity Legal Direct controlling Share of total Share of end-of-Percentage Section 512 (C corp, S corp, (b)(13)related organization domicile entity ownership income year (state or foreign or trust) assets controlled country) entity? No Yes (1051) VICTOR CONSTRUCTION CONTRIBUTING No **EMPLOYER** (1) VILLAGE OF ROSEMONT CONTRIBUTING No **EMPLOYER** (2) VISION INTERIOR DRYWALL CORP CONTRIBUTING No **EMPLOYER** (3) VISSERING CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (4) VIXEN CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (5) VORTEX ENTERPRISES INC CONTRIBUTING No **EMPLOYER** (6) W B OLSON INC CONTRIBUTING No **EMPLOYER** (7) W E CARLSON CORP CONTRIBUTING No **EMPLOYER** (8) W E O'NEIL CONSTRUCTION CO CONTRIBUTING No **EMPLOYER** (9) W F JOHNSTON CONSTR INC CONTRIBUTING No **EMPLOYER** (10) W M C INC CONTRIBUTING No **EMPLOYER** (11) W W TIMBERS INC CONTRIBUTING No EMPLOYER (12) W SOULE & COMPANY CONTRIBUTING No **EMPLOYER** (13) WAL-TEK INC CONTRIBUTING No EMPLOYER (14) WALBRIDGE EQUIPMENT INSTALLATION CONTRIBUTING No

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Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (e) (f) (g) (h) (i) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 (C corp, S corp, related organization domicile entity ownership (b)(13)income year (state or foreign or trust) assets controlled country) entity? Yes No (1081) WHEATON ASSOCIATES INC CONTRIBUTING No **EMPLOYER** (1) WHITTAKER CONST & EXCAVATING CONTRIBUTING No **EMPLOYER** (2) WILKIN INSULATION CO CONTRIBUTING No **EMPLOYER** (3) WILLIAM A RANDOLPH INC CONTRIBUTING No **EMPLOYER** (4) WILLIAM J SCOWN BUILDING CO CONTRIBUTING No **EMPLOYER** (5) WILLIAMS BROTHERS CONSTR INC CONTRIBUTING No **EMPLOYER** (6) WILLWORK INC EXHIBIT SERVICES CONTRIBUTING No **EMPLOYER** (7) WINDOW TREATMENTS INC CONTRIBUTING No **EMPLOYER** (8) WM H WOOD OVERHEAD DOOR CORP CONTRIBUTING No **EMPLOYER** (9) WM HUBER CABINET WORKS INC CONTRIBUTING No **EMPLOYER** (10) WM TONYAN & SONS INC CONTRIBUTING No **EMPLOYER** (11) WOLCOTT CONSTRUCTION CORP CONTRIBUTING No EMPLOYER (12) WOODBRIDGE CONSTRUCTION CONTRIBUTING No **EMPLOYER** (13) WOODLAND CONSTRUCTION INC CONTRIBUTING No **EMPLOYER** (14) WOODS CONSTRUCTION INC CONTRIBUTING No **EMPLOYER**

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (d) (e) (f) (g) (h) (i) (a) (b) (c) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ownership (b)(13)income year (state or foreign or trust) assets controlled entity? country) Yes No (1096) WOODWORK INTERIOR CONTRIBUTING No **EMPLOYER** (1) WORKSPACE INTERIOR SOLUTIONS CONTRIBUTING Nο **EMPLOYER** (2) WRIGHT CONSTRUCTION CONTRIBUTING No **EMPLOYER** CONTRIBUTING Nο **EMPLOYER** (4) WUJCIK CONSTR GROUP INC CONTRIBUTING Nο **EMPLOYER**

No

Nο

(3) WRIGHT-WAY INTERIOR SYSTEMS LLC

CONTRIBUTING **EMPLOYER**

CONTRIBUTING

EMPLOYER

(5) ZERA CONSTRUCTION CO INC

(6) ZONE MECHANICAL LLC