Department of the Treasury

DLN: 93493313031718

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 ▶ Information about Form 990 and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>

Open to Public

Interna	ıl Reve	enue Service	F Information about	t Point 990 and its instructions is at wi	**** INS 907/101	111290		Inspection	
A F	or th	e <b>2017</b> c <u>a</u>		ning 01-01-2017 , and ending 12-	-31-2017	_			
		applicable change	C Name of organization CARPENTERS AND JOINERS WELFAR	E FUND		D Employ	er identif	ication number	
	ime ch	-				41-602	4791		
	itial re		Doing business as						
		rn/terminated d return		all is not delivered to street address) Room/	'suite	E Telepho	ne number		
ПАр	plicati	ion pending	3001 METRO DRIVE NO 500			(952) 8	354-0795		
			City or town, state or province, coun BLOOMINGTON, MN 55425	try, and ZIP or foreign postal code				F4 205 2F2	
		ŀ	<b>F</b> Name and address of principal	officer	H(a) To th	us a group re	• •	51,306,259	
			JOHN RAINES 3001 METRO DRIVE NO 500		1	ns a group re ordinates?	turn for	□Yes ☑No	
			BLOOMINGTON, MN 55425		<b>Н(b)</b> Are	all subordina ided?	tes	☐ Yes ☐No	
I Ta	x-exe	mpt status	☐ 501(c)(3) <b>☑</b> 501(c)(9) <b>◄</b> (	(insert no ) $\square$ 4947(a)(1) or $\square$ 527			list (see	instructions)	
J W	ebsi	te:► N/A			H(c) Grou	ıp exemptior	number	<b>&gt;</b>	
				. П	L Year of form	nation 1960	M State	of legal domicile	
K For	m of o	organization	Corporation Trust Associ	ciation □ Other ►			MN		
Pa	rt I	Sumr	•						
			cribe the organization's mission or HEALTH AND WELFARE BENEFITS I	· most significant activities PURSUANT TO A COLLECTIVE BARGAII	NING AGREEME	NT			
nce									
E									
0 V6				continued its operations or disposed of		% of its net a		1	
Activities & Governance	1			g body (Part VI, line 1a) the governing body (Part VI, line 1b)		•	3	8	
<u>16</u>	1			endar year 2017 (Part V, line 2a)		•	5	176	
Ĭ	1		• •	essary)			6	14	
Ac	7a	Total unre	elated business revenue from Part	VIII, column (C), line 12			7a	0	
	b	Net unrela	ated business taxable income from	Form 990-T, line 34	<u></u>	•	7b	0	
		C	d		P	rior Year	0	Current Year	
ēΝ	1		ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)			129,220,	<del>-</del>	0 138,142,661	
Ravenue	1	-	nt income (Part VIII, column (A), l			5,153,	_	8,018,652	
α	1		enue (Part VIII, column (A), lines	·			0	0	
	12	Total reve	enue—add lines 8 through 11 (mus	st equal Part VIII, column (A), line 12)		134,373,	144	146,161,313	
	1		d similar amounts paid (Part IX, c	, ,,			0	0	
	1		oald to or for members (Part IX, co	olumn (A), line 4) nefits (Part IX, column (A), lines 5–10	, <del>                                    </del>	132,126,	0	138,656,701	
Expenses	1	· ·	, , , ,	nents (Part 1x, Column (A), lines 5-10, nn (A), line 11e)	, <del>                                    </del>		0		
D G			aising expenses (Part IX, column (D), lir	, ,,			1		
ď	17	Other exp	penses (Part IX, column (A), lines	11a-11d, 11f-24e)		3,716,	726	3,301,589	
	18	Total expe	enses Add lines 13-17 (must equa		135,843,		141,958,290		
- (0	19	Revenue I	less expenses Subtract line 18 fro	m line 12		-1,469,		4,203,023	
Net Assets or Fund Balances					Beginnin	g of Current \	rear	End of Year	
\sse Bala	20	Total asse	ets (Part X, line 16)			186,708,	716	200,285,491	
et A	1		lities (Part X, line 26)	3,377,		4,075,137			
			s or fund balances Subtract line 2	1 from line 20		183,331,	297	196,210,354	
Pa Unde			<b>ature Block</b> erjury, I declare that I have examı	ned this return, including accompanyir	ng schedules ar	nd statement	s, and to	the best of my	
know any k			f, it is true, correct, and complete	Declaration of preparer (other than of	fficer) is based	on all inform	ation of v	which preparer has	
Cia-		Signatu	re of officer			018-11-09 ate			
Sign Here		JOHN R	AINES CHAIRMAN						
			print name and title					-	
			rint/Type preparer's name TACY MEYER	Preparer's signature STACY MEYER	Date Ch	neck 🔲 ıf	PTIN P0097062:		
Paid		<u> </u>	rm's name ► CLIFTONLARSONALLEN		se	lf-employed rm's EIN ► 41			
Pre	-	eı <u> -</u>	rm's address > 220 SOUTH SIXTH STRE			none no (612)			
Use	: Or _	ııy	MINNEAPOLIS, MN 554	102					
May t	he IF	RS discuss	this return with the preparer show	n above? (see instructions)			. <b>☑</b> \	res □ No	
			luction Act Notice, see the sep	<u> </u>	Cat No	11282Y		Form <b>990</b> (2017)	

Form	990 (2017)				Page <b>2</b>
Par	t IIII Statement	of Program Service Acc	omplishments		
	Check If Sche	dule O contains a response or	note to any line in this Part III .		🗆
1	Briefly describe the o	organization's mission			
PRO\	/IDE HEALTH AND WEI	LFARE BENEFITS PURSUANT T	O A COLLECTIVE BARGAINING AGRE	EMENT	
	Did the examination	undertake any cignificant pro-	gram services during the year which v	ware not listed on	
2	<del>-</del>	or 990-EZ?	· ·	were not listed on	☐ Yes ☑ No
		ese new services on Schedule			Lifes Life
3	•		gnificant changes in how it conducts, a	any program	
-	services?	<u>-</u> .	initiality changes in how it conducts,	arry program	☐ Yes ☑ No
		ese changes on Schedule O			
4	Describe the organize Section 501(c)(3) an	ation's program service accom	plishments for each of its three large required to report the amount of gra ervice reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Data			, ,	,
					_
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
4 -	Otherware	one (December to Calculate CA)			
4d	Other program serving (Expenses \$	ces (Describe in Schedule O )	grants of \$	(Revenue \$	)
40	Total program serv		) (π. π. π	(Mereniae ψ	

**Checklist of Required Schedules** 

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space,

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 . . .

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,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.

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,"

ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞 . . . . . . . . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

Page 3

No

Νo

Νo

Nο

No

Nο

Nο

Nο

No

Nο

No

Nο

Nο

No

Nο

Nο

Nο

Nο

Νo

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No

Nο

Form **990** (2017)

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12a

12b

13

14a

14b

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18

19

Yes

Yes

Yes

Yes

Did the organization maintain collections of works of art, historical treasures, or other similar assets? 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 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

or X as applicable

Form	Form 990 (2017)								
Par	Checklist of Required Schedules (continued)								
		Yes	No						
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No						
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?								
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		No						
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		No						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes,"</i> complete Schedule J	Yes							
24a	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		No						
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24E								
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	:							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c	ı							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.								

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c 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 . . . 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

25a

25b

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28a

28b

28c

29

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32

33

34

35a

35b

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Yes

Yes

Form 990 (2017)

Yes

No

No

No

Nο

Nο

No

Nο

Nο

Nο

Νo

Nο

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

26

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37

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 

instructions for applicable filing thresholds, conditions, and exceptions)

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 33

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

31

orm	990 (2017)			Page
Par				
	Check if Schedule O contains a response or note to any line in this Part V			<u> Ц</u>
	Fortunation according to 2 of Forms 1000 Fortun O. Acade and booking 1.4- 1.		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 2,727  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1</b> c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
•	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		110
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	<b>6</b> a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
•	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
b	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

OHIII	1 990 (2017)			Page <b>c</b>
Par	TT VI Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	r a "No" respo	nse to l	ines
	Check if Schedule O contains a response or note to any line in this Part VI			~
Se	ection A. Governing Body and Management		<u> </u>	
-	ection At Coverning Body and Humagement	-	Yes	No
1a	a Enter the number of voting members of the governing body at the end of the tax year	8		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer, director, trustee, or key employee?	other 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct sup of officers, directors or trustees, or key employees to a management company or other person? .	ervision 3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	. 6		No
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one o members of the governing body?	r more <b>7a</b>	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders persons other than the governing body?	, or <b>7b</b>		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at th organization's mailing address? If "Yes," provide the names and addresses in Schedule O	e . 9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal F	evenue Code	∍.)	
			Yes	No
10a	a Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affil and branches to ensure their operations are consistent with the organization's exempt purposes?	ates,		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filir form?	ig the <b>11a</b>	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ri conflicts?	se to <b>12b</b>	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describ Schedule O how this was done	e in <b>12</b> c	Yes	
13	Did the organization have a written whistleblower policy?	. 13		No
14	Did the organization have a written document retention and destruction policy?	. 14		No
15	Did the process for determining compensation of the following persons include a review and approval by indeper persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	dent		
а	The organization's CEO, Executive Director, or top management official	. 15a		No
b	Other officers or key employees of the organization	. 15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?	a . 16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its partic in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's e			
<b>c</b> -	status with respect to such arrangements?	16b		
<u>Se</u> 17	ection C. Disclosure  List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3) available for public inspection. Indicate how you made these available. Check all that apply	s only)		
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte policy, and financial statements available to the public during the tax year	rest		
20	State the name, address, and telephone number of the person who possesses the organization's books and reco  WILSON-MCSHANE CORPORATION 3001 METRO DRIVE SUITE 500 BLOOMINGTON, MN 55425 (952) 854-079	rds !5		

(A)

(F)

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

(C)

(D)

(E)

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- List all of the organization's current key employees, if any See instructions for definition of "key employee"

of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

- 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
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

······p ······ p ···· p ··· p				
oxdot Check this box if neither the organization nor	any related org	ganization compensated any c	urrent officer, dire	ctor, or trustee
-				

Name and Title	Average hours per week (list any hours		ne bo	ox, ι n of	t ch unle ficei	ss per: and a	son	Reportable compensation from the organization	Reportable compensation from related organizations	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) TIM MCGOUGH MGT TRUSTEE/SECRETARY	1 00 42 00	×		х				0	0	0
(2) DAVE HAMILTON MGT TRUSTEE	1 00 42 00	х						0	0	0
(3) JOHN RAINES UNION TRUSTEE/CHAIRMAN	1 00	х		х				0	262,267	59,467
(4) PATRICK NILSEN UNION TRUSTEE	1 00 58 00	х						0	164,742	52,224
(5) PETER DONNINO MGT TRUSTEE	1 00	×						0	0	0
(6) MARTHA HENRICKSON MGT ALTERNATE	1 00	х						0	0	0
(7) CHRIS HILL UNION TRUSTEE/ALTERNATE	1 00 47 00	х						0	119,961	49,941
(8) BURT JOHNSON UNION TRUSTEE	1 00 57 00	×						0	164,742	54,512
(9) JOHN NESSE MGT TRUSTEE	1 00	х						0	0	0
(10) THOMAS PERRIER UNION TRUSTEE	1 00 47 00	х						0	102,025	44,600
(11) ROBB NELSON UNION TRUSTEE/ALTERNATE	1 00	х						0	110,908	49,556
(12) BILL GRIMM MGT ALTERNATE	1 00	х						0	0	0
(13) JON NOWAK UNION TRUSTEE/ALTERNATE	1 00 47 00	х						0	0	0
(14) SHAWN COTTER MGT TRUSTEE/ALTERNATE	1 00	х						0	0	0
										Form <b>990</b> (2017)
										101111 330 (2017)

700 TRANSFER RD ST PAUL, MN 55114 GLOBALCARE INC

ATLANTA, GA 30328

TWO CONCOURSE PARKWAY NE SUITE 300

(A)

(B)

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

Page **8** 

hours per than one box, unless person communication week (list any hours for related for r									Reportable compensation from the organization (W	ortable Reportable compensation from related zation (W- organizations (W-			(r) Estimated amount of other compensation from the organization and		
		organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	2/1099-1413C	-)	relat organiz	ted		
		<u> </u>	<del> </del>	-	<del> </del>	$\downarrow$	<u> </u>	<u> </u> -			$\dashv$				
			-	+	$\vdash$	+	+	+-'			+				
					$\vdash$	$\dagger$		$\top$			$\dashv$				
					$\Box$	$oxed{\Box}$									
			<del> </del>	-	$\vdash$	$\vdash$	+	<u> </u>	<del>                                     </del>						
			<del>                                     </del>	+-	$\vdash$	+	+	+			$\dashv$				
				<del>                                      </del>	$\vdash$	$\dagger$		$\top$			$\dashv$				
	Sub-Total	Ont VII Section	· · ·	<del></del>			<b>&gt;</b>	<u> </u>			$\mp$				
							•		0	924,64	45		310,300		
2	Total number of individuals (including of reportable compensation from the			se list	ed a	ipov	e) who	o rec	eived more than	\$100,000	_				
					_	_					_	Yes	No		
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i>			:ee, k	еу е •	mpl:	oyee,	or hi	ghest compensate	ed employee on	3	3	No		
4															
5	Did any person listed on line 1a receiver services rendered to the organization										5	_	No		
Se	ection B. Independent Contract	tors		—				—					110		
1	Complete this table for your five high from the organization Report compe	hest compensate									mpei	nsation			
		(A) and business addre			_	_			1	(B) escription of services	_		C) nsation		
WILS	ON-MCSHANE CORPORATION								PLAN ADI	MINISTRATOR		2	2,580,000		
	METRO DR 500 MINGTON, MN 55425										_				
	CROSS BLUE SHIELD OF MINNESOTA								CLAIMS P	PROCESSOR		1	1,735,132		
ST PA	OX 64560 AUL, MN 551640560														
	A DENTAL								CLAIMS F	PROCESSOR			295,910		
EAGA	DELTA DENTAL DR N, MN 551223166														
TOTA	L EMPLOYEE ASSISTANCE MANAGEMENT								HEALTH N	MANAGEMENT PROGRA	AM		242,213		

(C)

(D)

(E)

CLAIMS PROCESSOR

164,203

Part		Statement of	Revenue										rage <b>3</b>
		Check if Schedul		a respo	nse or n	ote to any	y line in th	nıs Part VII	ı				🗆
							(,	<b>A)</b> revenue	Rel e:	(B) ated or kempt nction	Ur bı	(C) arelated usiness evenue	(D) Revenue excluded from tax under sections
	1 2	Federated campaig	ns	1a					re	venue			512-514
ats nts		• Membership dues		1b									
ons, Gifts, Grants Similar Amounts		·											
6. G		Fundraising events		1c									
iffs ar/		d Related organizatio		1d									
9	6	Government grants (co	ontributions)	1e									
Sil	f	<ul> <li>All other contributions, and similar amounts n</li> </ul>	, gıfts, grants, ot ıncluded										
tributio Other		above		1f									
<u>=</u> =	g	Noncash contribution in lines 1a-1f \$	ons included										
Contributions, Gifts, Grants and Other Similar Amounts	h	Total.Add lines 1a-1				<b>&gt;</b>							
	┵				I	Busines	s Code		1				
Program Service Revenue	2a	CONTRIBUTIONS					525100	138,	142,661	138,1	.42,661		
4.											,		
e.	b												
er vi	c d												
S E	e			_									
grar	f	All other program se	rvice revenue	<u>.</u>									
δ	g.	<b>Total.</b> Add lines 2a-21	f		<b>&gt;</b>	138	,142,661						
		Investment income (ii			nterest.	and other	- 1		Τ				
	s	imilar amounts) .				i	<u> </u>	4,110,41	3				4,110,413
		Income from investme		-	ond proc		▶						
	5 F	Royalties					<u> </u>						
	62	Gross rents	(ı) Rea	I	(11) F	ersonal	_						
	Va	Gross renes											
	b	Less rental expenses											
		Rental income or					-						
		(loss)											
	d	Net rental income o					1						
	<b>-</b> -	Gross amount	(ı) Securi	ties	(11)	Other	4						
		from sales of assets other	9,0	53,185									
		than inventory											
	b	Less cost or					1						
		other basis and sales expenses	5,1	144,946									
		Gain or (loss)		08,239			_						
		Net gain or (loss)				<b>&gt;</b>		3,908,23	9				3,908,239
e e	Вa	Gross income from for (not including \$		ents of									
Other Revenue		contributions reporte	ed on line 1c)										
eve		See Part IV, line 18					_						
r R		Less direct expense Net income or (loss)		<b>b</b>   sing ev	ents .								
the		Gross income from g											
0		See Part IV, line 19											
	L			a			4						
		Less direct expense Net income or (loss)		b	IES								
		Gross sales of invent		activit		• •	1						
		returns and allowand	ces		]								
				a			_						
		Less cost of goods s		b									
	С	Net income or (loss) Miscellaneous		invent		ess Code							
	11		revenue		Dusin		$\dashv$						
	b	,											
	_												
	c						+		+				
	٠												
	ىد	All other revenue .					-		+		-		
		Total. Add lines 11a				•	+		+		-		
						•			1				
	12	Total revenue. See	instructions	• •	• •	• •		146,161,31	3	138,142,66	51	0	-,,
		<del></del>											Form <b>990</b> (2017)

Part IX Statement of Functional Expenses
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75, 8b, 9b, and 10b of Part VIII.  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 21.  3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15.  4 Benefits paid to or for members.  5 Compensation of current officers, directors, trustees, and key employees.  6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(11)) and persons described in section 4958(c)(3)(8).  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)  a Management  b Legal.  145,592  6 Accounting.  4 Lobbying.  9 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  12 Advertising and promotion.  13 Office expenses.  79,055  14 Information technology.  15 Royaltes.  16 Occupancy.  17 Travel.  18 Payments of travel or entertainment expenses for any federal, state, or local pulsaria.  19 Conferences, conventions, and meetings.  5,163  10 Expenses to affiliates.  10 Depreciation, depletion, and amortization.	Form 990 (2017)				Page <b>10</b>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  If Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21  Grants and other assistance to domestic individuals. See Part IV, line 22  Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 23  Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15  and 16  Benefits paid to or for members.  Compensation of current officers, directors, trustees, and key employees.  Compensation of current officers, directors, trustees, and key employees.  Compensation in included above, to disqualified persons (as defined under section 4958(c)(3)(B).  Total expenses.  Interest in the following individuals see Part IV, line 15  and 16  Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15  and 16  Benefits paid to or for members.  138,655,701  138		olumns All other orga	anizations must com	nplete column (A)	
The Bit plant and the assistance to domestic organizations and domestic governments. See Part IV, line 21  2 Grants and other assistance to domestic individuals. See Part IV, line 15 and 16  3 Grants and other assistance to foreign organizations, foreign governments. See Part IV, line 15 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees.  6 Compensation of current officers, directors, trustees, and key employees.  7 Other saliens and wages  8 Penson plan accruals and contributions (include section 401 (k) and 403(k) employer contributions).  9 Other employee benefits.  10 Payroll taxes  11 Fees for services (non-employees)  a Management  1 Legal  1 Letting 11 gamount exceeds 10% of line 25, column (AA) amount, list line 11 gexpenses on Schedule O)  12 Advertising and promotion  13 Office expenses  7 79,368  9 Other employee  9 Other employee  14 Information textend 401 (b) of line 25, column (AA) amount, list line 11 gexpenses on Schedule O)  12 Advertising and promotion  13 Office expenses  7 79,368  9 Ottore expenses  7 79,368  9 Ottore expenses  9 Ottore expenses  1 Travel  1 Information texhology  1 Fees for a services (non-employees)  1 Advertising and promotion  1 Travel  1 Fees for a services (non-employees)  1 Advertising and promotion  1 Travel  1 Fees for a services (non-employees)  1 Fees for a services (non-employees)  1 Fees for services (non-employees)  1 Fees for services (non-employees)  2 Advertising and promotion  3 Office expenses  7 79,368  9 Ottore expenses  7 79,305  1 Fees for a service (non-employees)  1 Fees for services (non-employees)  1 Fees for services (non-employees)  2 Advertising and promotion  3 Office expenses  7 79,368  9 Ottore expenses  9 Ottore expenses  1 Fees for services (non-employees)  1 Fees for services (non-employees)  1 Fees f	Check if Schedule O contains a response or note to any	line in this Part IX			<u> </u>
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 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(11)) and persons described in section 4958(c)(13)(8) 7 Other salanes 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) 1a Management 1b Legal 1			Program service	Management and	( <b>D</b> ) Fundraisingexpenses
IV, line 22  3 Grats 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  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)(8).  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)  a Management  b Legal.  c Accounting.  4 Lobbying.  e Professional fundraising services. See Part IV, line 17  f Investment management fees.  g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  12 Advertising and promotion.  13 Office expenses.  79,055  14 Information technology.  15 Royaltes.  16 Occupancy.  17 Travel.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials.  19 Conferences, conventions, and meetings.  5 Insurance.			·		
governments, and foreign individuals. See Part IV, line 15 and 16  4 Benefits paid to or for members  5 Compensation of current officers, directors, trustees, and key employees.  6 Compensation not included above, to disqualified persons (as defined under section 4958(c)(3)(8)  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)  a Management  b Legal  c Accounting  d Lobbying  e Professional fundraising services. See Part IV, line 17 f Investment management fees  9 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)  12 Advertising and promotion  13 Office expenses  79,055  14 Information technology  15 Royaltes  16 Occupancy  17 Travel  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conferences, conventions, and meetings  5,163  10 Insurance  10 Insurance  10 Insurance					
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)(8) 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) a Management b Legal	governments, and foreign individuals See Part IV, line 15				
key employees	4 Benefits paid to or for members	138,656,701			
defined under section 49S8(f)(1)) and persons described in section 49S8(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) a Management b Legal C Accounting e Professional fundraising services See Part IV, line 17 f Investment management fees g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 12 Advertising and promotion 13 Office expenses 79,055 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 11 Payments to affiliates 12 Deprenation, depletion, and amortization 13 Insurance 1 Insurance					
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) a Management b Legal	defined under section 4958(f)(1)) and persons described in				
(k) and 403(b) employer contributions)	7 Other salaries and wages				
10 Payroll taxes					
11 Fees for services (non-employees) a Management	9 Other employee benefits				
a Management b Legal	<b>10</b> Payroll taxes				
b Legal	11 Fees for services (non-employees)				
c Accounting	a Management				
c Accounting	<b>b</b> Legal	146,592			
d Lobbying	<b>F</b>	388,500			
e Professional fundraising services See Part IV, line 17  f Investment management fees	ļ-				
f Investment management fees	Page 1				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)  12 Advertising and promotion		79,368			
13 Office expenses	g Other (If line 11g amount exceeds 10% of line 25, column	· · · · · · · · · · · · · · · · · · ·			
14 Information technology	12 Advertising and promotion				
14 Information technology	13 Office expenses	79,055			
15 Royalties	·				
16 Occupancy	<b>⊢</b>				
17 Travel	Fig. 1				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .  19 Conferences, conventions, and meetings	· · ·				
19 Conferences, conventions, and meetings       6,163         20 Interest       9         21 Payments to affiliates       9         22 Depreciation, depletion, and amortization       9         23 Insurance       9	18 Payments of travel or entertainment expenses for any				
20 Interest	·	6.163			
21 Payments to affiliates	· · · · · · · · · · · · · · · · · · ·	3,233			
22 Depreciation, depletion, and amortization	-				
23 Insurance	· · · · · · · · · · · · · · · · · · ·				
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 )	miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e				
a CLAIMS PROCESSING FEES 1,788,000	a CLAIMS PROCESSING FEES	1,788,000			
b ADMINSTRATIVE FEES 420,000	b ADMINSTRATIVE FEES	420,000			
c NEGOTIATED DISCOUNT FEE 164,203	c NEGOTIATED DISCOUNT FEE	164,203			
d PCORI TAX 59,393	d PCORI TAX	59,393			
e All other expenses 29,030	e All other expenses	29,030			
25 Total functional expenses. Add lines 1 through 24e 141,958,290	25 Total functional expenses. Add lines 1 through 24e	141,958,290			
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)	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

(B)

End of year

Page **11** 

82,773

94.803.637

81,170,661

200.285,491

344,027

3.731.110

4,075,137

0

196,210,354

196,210,354

200.285.491

Form **990** (2017)

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

Part II of Schedule L

Notes and loans receivable, net . Inventories for sale or use .

Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

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 . . . .

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

**Total assets.**Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

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 lacktriangle and

Investments—program-related See Part IV, line 11

Less accumulated depreciation

1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments	7,869,922	2	12,237,673
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	10,379,999	4	11,990,747

(A)

Beginning of year

5

6

8 9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27

28

29

30 0

31

32

33

34

144,490

89.619.447

78.694.858

186,708,716

1,146,149

2.231.270

3,377,419

183,331,297

183,331,297

186.708.716

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and

contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete

10a

10b

Page **12** 

Yes

Yes

Yes

2a

2b

2c

3a

3b

No

Nο

No

Form 990 (2017)

Form 990 (2017)

Schedule O

4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	183,331,297
5	Net unrealized gains (losses) on investments	5	8,676,034
6	Donated services and use of facilities	6	
7	Investment expenses	7	

5	Net unrealized gains (losses) on investments	5	5	8,676,034
6	Donated services and use of facilities	6	<b>,</b>	
7	Investment expenses	7	,	
8	Prior period adjustments	8	3	
9	Other changes in net assets or fund balances (explain in Schedule O)	9		C

6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	196,210,354
Par	XII Financial Statements and Reporting		

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

**1** Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

#### **Additional Data**

#### Software ID: Software Version:

**EIN:** 41-6024791

Name: CARPENTERS AND JOINERS WELFARE FUND

Farm 000 (2017)

Form 990 (2017)

Form 990, Part III, Line 4a:
SELF-FUNDED BENEFITS FOR APPROXIMATELY 11.855 UNION MEMBERS AND THEIR DEPENDENTS

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

## **Supplemental Financial Statements**

OMB No 1545-0047

DLN: 93493313031718

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** CARPENTERS AND JOINERS WELFARE FUND 41-6024791 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 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 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 Cat No 52283D Schedule D (Form 990) 2017

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

Par	t III	Organizations Ma	aintaining Coll	lections o	f Art, Hi	storical T	reası	ires, or	Other :	Similar A	ssets (	continued)	·
3		ng the organization's acquas (check all that apply)	uisition, accessior	n, and other	records, c	heck any of	the fo	llowing th	nat are a	sıgnıfıcant ı	use of its	s collection	1
а		Public exhibition				d 🗌	Loan	or excha	nge prog	rams			
b		Scholarly research				е 🗌	Othe	r					
c		Preservation for future	generations										
4		vide a description of the o		lections and	explain ho	ow they furt	her the	e organiza	ation's ex	empt purpo	ose in		
5	Dur	ing the year, did the orga ets to be sold to raise fun								ılar	□ Ye	es 🗆	No
Pa	rt IV	Escrow and Custo Complete if the org X, line 21.			' on Form	n 990, Part	: IV, lı	ne 9, or	reporte	d an amoı			
1a		ne organization an agent, uded on Form 990, Part >		an or other I	ntermedia	ry for contr	bution	s or othe	r assets r	not	☐ Ye	es 🗆	No No
b	If "	Yes," explain the arrange	ement in Part XIII	and comple	te the follo	owing table		Γ		Α	mount		_
С	Beg	inning balance							1c				
d	Add	itions during the year							1d				
е	Dist	ributions during the year	-						1e				_
f	End	ing balance							1f				_
2a	Dıd	the organization include	an amount on Fo	rm 990, Par	t X, line 2:	1, for escrov	v or cu	ıstodıal ad	count lia	bility?	□ Ye	es 🗆	— No
b	If "\	res," explain the arrange	ment in Part XIII	Check here	e if the exp	lanation ha	s been	provided	ın Part X	(III		_	
Pa	irt V	Endowment Fund	<b>ds.</b> Complete ıf	the organi	zation ar	swered "Y	es" or	n Form 9	990, Par	t IV, line 1	10.		_
			·	(a)Curren	t year	(b)Prior yea	ir	(c)Two ye	ars back	(d)Three ye	ars back	(e)Four ye	ars back
1a	Begir	nning of year balance .											
b	Conti	ributions											
c	Net II	nvestment earnings, gain	ns, and losses										
d	Gran	ts or scholarships	•										
е		r expenditures for facilitie programs	es										
f	Admı	nistrative expenses .											
g	End o	of year balance											
2	Pro	vide the estimated percer	ntage of the curre	nt year end	balance (	line 1g, colu	mn (a	)) held as	;				
а	Boa	rd designated or quasi-ei	ndowment 🟲										
b	Peri	manent endowment 🕨											
С	Ten	porarily restricted endow	wment 🕨										
	The	percentages on lines 2a,	, 2b, and 2c shou	ld equal 100	)%								
3а		there endowment funds anization by	not in the posses	sion of the o	organizatio	n that are h	ield an	id adminis	stered for	the	_	Yes	No
	(i)	unrelated organizations										a(i)	
b		related organizations . (es" on 3a(ii), are the rel		 s listed as r	• • • • • • • • • • • • • • • • • • •	 Schedule F	. ?				<u> </u>	a(ii) 3b	
4	Des	cribe in Part XIII the inte			n's endowr	ment funds							
Pa	rt VI	, , ,	• •		lan Faurr	. 000 - 0		11-	Caa Fr	000 D-	با ∨ ست	20.10	
	Desc	Complete If the org	ganization answ (a) Cost or oth (investme	er basıs		r other basis (				m 990, Pa		ne 10. ( <b>d)</b> Book va	ue
12	Land												
		-											
	Build	· -						-					
		ehold improvements						-					
		oment											
	Othe				00 0 :::	, ,-	. ,	10( ) )					
ı ota	al. Ad	d lines 1a through 1e <i>(Co</i>	olumn (d) must ed	qual Form 9:	90, Part X,	column (B,	, line :	10(c) ) .	. 1	▶			0

(a) Description of Recursity or catagogy (b) Book value (c) Method of an individual control of the Control of Action (c) Method of an individual control of action (c) Method of an individual control of action (c) Method	Part VII Investments—Other Securities. Complete if the	ne organiz	zation answ	ered "Yes" on F	orm 990, Par	t IV, line 11b.
(3) Frame down developes (3) Ones   34,79,635   F   (3) Ones   34,79,635   F   (4) Seed AFTEM GOV CREDIT BO INDEX CH NL		<b>(b)</b> Bo	ok value			
3) Other   Asset   See	(1) Financial derivatives				or cha or year r	Tarket Value
(B) NTGC QN COM DAILY SROP SECTAX EXEMPT	(3) Other					
(G) (D) (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F						
(6) (7) (8) (9) (9) Tetal. (Counce (e) must equal form \$90, fast \$1, ask (B) fine \$1.7 )	(B) NTGI QM COM DAILY S&P 500 TAX EXEMPT (C)		46,691,036		F	
(c) (d) (d) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	(D)					
Complete if the organization answered Yes' on Form 990, Part IX, line 13.	(E)					
Control   Cont	(F)					
Total. (Column (b) must equal form 990, Part X, cal (b) ine 12)	(G)					
Total	(H)					
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   (a) Description of investment:   (b) Book value   Cost or end-of-year market; value			81,170,661			
(a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (d)		orm 990	. Part IV. lıı	ne 11c. See For	m 990. Part X	. line 13.
(1) (2) (3) (4) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal form 990, Part X, col (8) line 13) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (2) (2) (3) (4) (5) (6) (6) (7) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				(	c) Method of va	luation
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Part IX						
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Total. (Column (b) must equal Form 990, Part X, col (8) line 13)  (a) Description  (b) Book value  (b) Book value  (c)  (c)  (d)  (d)  (d)  (e)  (f)  (f)  (g)  (g)  (g)  (h)  (h)  (h)  (h)  (h						
Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value (c) (c) (b) Book value (c) (d) Book value (c) Book value (c) (d) Bo	(9)					
(a) Description (b) Book value  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  L	Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	b l'Vos' on E	iorm 000 Ba	rt IV lung 11d. So	o Form 000 Pa	rt V Juno 15
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  1. (a) Description of liability (b) Book value (1) Federal income taxes  VACATION DOLLARS DUE TO CREDIT UNION 1,439,564 DUE TO OTHER FUNDS 1,961,546 PRE-PAID CONTRIBUTIONS 330,000 (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) 3,731,110  2. Liability for uncertain tax positions in Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(a) Description		OIIII 990, FA	it IV, iiile IIu Se	se Form 990, Fa	
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 15) See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes VACATION DOLLARS DUE TO CREDIT UNION 1,439,564 DUE TO OTHER FUNDS 1,961,546 PRE-PAID CONTRIBUTIONS 330,000 (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	(1)					
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(6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(4)					
(7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25)  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(5)					
(8)  (9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(6)					
(9)  Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )  Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(7)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	(8)					
2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	(9)					
2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the	Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	•		3,731,110		
	, , , , , , , , , , , , , , , , , , , ,			ganızatıon's fınan		· —

Part XI

2

3

4

b

c 5

1

2

b

c

d

3 4

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2017

Page 4

8,676,034

141,878,922

79,368

141.958.290

Schedule D (Form 990) 2017

146,081,945

# Add lines 2a through 2d . . .

а	Net unrealized gains (losses) on investments
b	Donated services and use of facilities
С	Recoveries of prior year grants
d	Other (Describe in Part XIII )

Other (Describe in Part XIII ) . . . . . .

Add lines **4a** and **4b** . . . . .

Donated services and use of facilities . . .

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Subtract line 2e from line 1 . . . .

Add lines 2a through 2d .

Return Reference

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1

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

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

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 . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . .

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

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

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2c 2d

4a

2a

2b

2a 2b

2c

2d

4a

4b

Explanation

79,368

8,676,034

t line <b>2e</b> from line <b>1</b>							3	
s included on Form 990, Part VIII, line 12, but not on line <b>1</b>								
ent expenses not included on Form 990, Part VIII, line 7b	4a				79	,368		
Describe in Part XIII)..............	4b							
s <b>4a</b> and <b>4b</b>							4c	
venue Add lines ${f 3}$ and ${f 4c.}$ (This must equal Form 990, Part I, line 12 )							5	
Reconciliation of Expenses per Audited Financial Statem	ents	With	ı Ex	per	ises p	er R	eturr	١.

2e

2e

3

4c

5

79,368

79,368
146,161,313
141,878,922

Page <b>5</b>		chedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

### **Additional Data**

Software ID: Software Version:

**EIN:** 41-6024791

Name: CARPENTERS AND JOINERS WELFARE FUND

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THE VEBA TRUST FUNDING CERTAIN BENEFITS OF THE PLAN RECEIVED AN EXEMPTION LETTER FROM THE IRS DATED AUGUST, 29, 1967, STATING THAT THE TRUST IS TAX-EXEMPT UNDER THE PROVISIONS OF S ECTION 501(C)9 OF THE IRC HOWEVER, AS A RESULT OF THE PLAN'S FUNDING POLICY, FROM TIME TO TIME THE TRUST MAY BE SUBJECT TO INCOME TAXES NO FEDERAL OR STATE INCOME TAXES HAVE BEEN RECORDED IN 2017 FOR UNRELATED BUSINESS TAXABLE INCOME IN ADDITION, THE PLAN AND THE TRU ST ARE REQUIRED TO OPERATE IN CONFORMITY WITH THE IRC TO MAINTAIN THE TAX-EXEMPT STATUS OF THE TRUST THE PLAN ADMINISTRATOR BELIEVES THAT THE PLAN IS BEING OPERATED IN COMPLIANCE WITH THE APPLICABLE REQUIREMENTS OF THE IRC AND, THEREFORE, BELIEVES THAT THE RELATED TRUS T IS TAX-EXEMPT ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE PLAN MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE PLAN AND RECOGNIZE A TAX LI ABILITY IF IT HAS TAKEN AN UNCERTAIN POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTA INED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE THE PLAN IS SUBJECT TO ROUTINE AUDI TS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19331	3031	718
Sch	nedule J	Co	ompensati	ion Information	40	1B No	1545-0	0047
•	m 990)	► Complete if the org	Compensa ganization answ ► Attach	rustees, Key Employees, and Hig ated Employees rered "Yes" on Form 990, Part IV ato Form 990.	, line 23.		17	
•	tment of the Treasury al Revenue Service	▶ Information al		(Form 990) and its instructions gov/form990.	is at C		to Pul	
Nar	ne of the organiz				Employer identificat			
CAR	PENTERS AND JOIN	ERS WELFARE FUND			41-6024791			
Pa	rt I Questi	ons Regarding Compensa	tion		41 0024731			
							Yes	No
1a				f 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 payment	is $\square$	Health or social club dues or initiation				
	□ Discretion	nary spending account	Ш	Personal services (e g , maid, chauf	rreur, cner)			
b		xes in line 1a are checked, did t all of the expenses described abo		ollow a written policy regarding paym iplete Part III to explain	nent or reimbursement	1b		
2				or allowing expenses incurred by all		2		
	airectors, truste	ees, officers, including the CEO/E	executive Director	r, regarding the items checked in line	e la'			
3	organization's C	EO/Executive Director Check a	ll that apply Dor	ed to establish the compensation of the not check any boxes for methods CEO/Executive Director, but explain i				
	☐ Compens	ation committee		Written employment contract				
	☐ Independ	ent compensation consultant		Compensation survey or study				
	☐ Form 990	of other organizations		Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-con	trol payment?			4a		No
b		r receive payment from, a suppl		ıfıed retırement plan?		4b		No
C		r receive payment from, an equ		-		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	plicable amounts for each item in Part	t III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9				
5	For persons liste		n A, line 1a, did	the organization pay or accrue any				
а	The organization	n?				5a		
b	Any related orga					5b		
	If "Yes," on line	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of		the organization pay or accrue any				
а	The organization	n?				6a		
b	Any related orga					6b		
	If "Yes," on line	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Ye		the organization provide any nonfixe rt III	d	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	uction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No 5	50053T Schedule J	(Form	1990)	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title	Ţ		n of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(ii) Base (iii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
JOHN RAINES JNION TRUSTEE/CHAIRMAN	(i)	0	. 0	0	0	0	0	0
·	(ii)	262,267	0	0	36,036	23,431	321,734	0
PATRICK NILSEN UNION TRUSTEE	(i)	0	. 0	0	0	0	0	0
	(ii)	164,742	0	0	30,745	21,479	216,966	0
CHRIS HILL JNION TRUSTEE/ALTERNATE	(i)	0	. 0	0	0	0	0	0
	(ii)	119,961	0	0	29,401	20,540	169,902	0
4 BURT JOHNSON JNION TRUSTEE	(i)	0	. 0	0	0	0	0	0
	(ii)	164,742	0	0	33,033	21,479	219,254	0
NOBB NELSON JNION TRUSTEE/ALTERNATE	(i)	0	. 0	0	0	0	0	0
	(ii)	110,908	0	0	30,030	19,526	160,464	0
								·

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 Return Reference Explanation FORM 990 PART VII THE FILING ORGANIZATION RELIED ON A RELATED ORGANIZATION TO ESTABLISH COMPENSATION FOR THE OFFICERS AND DIRECTORS LISTED IN FORM 990, PART VII AND SCHEDULE J. PART II OFFICERS AND DIRECTORS SERVE IN A VOLUNTEER CAPACITY FOR THE FILING ORGANIZATION AND RECEIVE THE

Page 3

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

efile GRAPHIC	C print - DO NO	T PROCESS	S As Fi	led Data -					DL	N: 93	4933	130	31718
Schedule L (Form 990 or 990	m 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.								5,	OMB No 1545-0047			
	▶Infe	ormation abo		h to Form 990 ile L (Form 99			ructio	ne ie	at		ZU	1	/
Department of the Trea Internal Revenue Servi	isurv	nination abo	out Scheat	www.irs.gov		, and its mist	uctio	כו כוו	at	C	)pen i Insp		
Name of the orgonal CARPENTERS AND	anization JOINERS WELFARE FL	IND						<b>nplo</b> :	<b>yer ide</b> 4791	ntifica			
Part I Exce	ss Benefit Tran	sactions (s	ection 501(	c)(3), section 5	501(c)(4), and	501(c)(29) o							
	lete if the organiza			· · · · · · · · · · · · · · · · · · ·	•	· ·					1 (1)		
1 (a	) Name of disqualit	nea person	(6)	Relationship be	tween disqua irganization	lified person ai	na	` '	escript ansacti		of (d) Correc		
4958 3 Enter the ar  Part II Loa  Con repo	mount of tax incurrence of tax, if any ans to and/or include of the organic orted an amount of	y, on line 2, al From Interestation answern Form 990, P	bove, reimbested Per red "Yes" or Part X, line!	pursed by the orsons. The Form 990-EZ, 5, 6, or 22	rganization . Part V, line 3	88a, or Form 99	90, Pa	rt IV,	line 26				
(a) Name of interested person	(b) Relationship with organization			to or from the nization?	(e)Original principal amount	( <b>f)</b> Balance due		fault? Appro- boar		h) ved by rd or nittee?	1		
			То	From			Yes	No	Yes	No	Yes		No
				+									
	nts or Assistan					line 17							
Total COIT  (a) Name of Inter	plete if the orga	Relation ans		(c) Amount of	,	(d) Type		ctooc		(a) D		£ 222	ıstance
(a) Name or Inter		rested persor organizati	n and the	(c) Amount o	or assistance	( <b>a</b> ) Type	or assi	stanc	le .	(e) Pui	pose o	17 ass	istance
For Danarwork Ded	uction Act Notice, s	aa tha Instruc	tions for Fo	rm 000 or 000-E	<b>7</b> C:	at No 50056A		C - I		<b>/</b> F	000	000	FZ) 2017

**Explanation** 

Schedule I (Form 990 or 990-F7) 2017

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

Return Reference

#### **Additional Data**

Software ID:

Software Version:

EIN: 41-6024791

Name: CARPENTERS AND JOINERS WELFARE FUND

Form 990, Schedule L, Part II - Loans to and from Interested Persons (a) Name of (b) Relationship (c) Purpose of loan (e)Original (f)Balance (g) In (i)Written (d) Loan to (h) Approved agreement? interested person with organization or from the principal due default? organization? amount by board or committee? Yes То From No Yes No Yes No CONTRIBUTING **SUBSTANTIAL** CONTRIBUTIONS 11,404 11,404 Х No No No CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS 425 425 Х No No No CONTRIBUTOR **EMPLOYER** CONTRIBUTING CONTRIBUTIONS 17,063 17,063 **SUBSTANTIAL** Χ Nο No No CONTRIBUTOR **EMPLOYER** 73 73 **SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Х No No No CONTRIBUTOR **EMPLOYER** 881 881 **SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Χ Nο Νo Nο CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING **CONTRIBUTIONS** 9,384 9,384 Х No No Nο CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Χ 3,230 3,230 Νo Νo Νo CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS 10,858 10,858 Nο No No Х CONTRIBUTOR **EMPLOYER** SUBSTANTIAL CONTRIBUTING CONTRIBUTIONS Χ 717 717 Νo Νo Nο CONTRIBUTOR **EMPLOYER** 8,057 **SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Χ 8,057 Νo No Νo CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Χ 2,426 2,426 Nο No Nο CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS 2,720 2,720 Х Nο No No **EMPLOYER** CONTRIBUTOR SUBSTANTIAL CONTRIBUTING CONTRIBUTIONS Χ 869 869 Nο No Nο CONTRIBUTOR **EMPLOYER** 2,158 **SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS Χ 2,158 No No No CONTRIBUTOR **EMPLOYER SUBSTANTIAL** CONTRIBUTING CONTRIBUTIONS 9,990 9,990 Nο Χ Nο Nο CONTRIBUTOR **EMPLOYER** 

Form 990, Schedule L, Part II - Loans to and from Interested Persons (a) Name of (b) Relationship (c) Purpose of loan (d) Loan to (e)Original (f)Balance (g) In (i)Written (h) interested person or from the due default? Approved agreement? with organization principal organization? lbv board orl amount Icommittee? Yes No No Yes Τо From Yes No SUBSTANTIAL CONTRIBUTING CONTRIBUTIONS 2,518 2,518 ΙNο lΝο lΝο CONTRIBUTOR EMPLOYER

efile GRAPH	IC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93493313031 <b>7</b> 18						
SCHEDUL (Form 990 or EZ)	990- Complete to pro Form 990 c ► Information abou	tal Information ovide information for or 990-EZ or to prov • Attach to Form t Schedule O (Form www.irs.go	ons on n.	OMB No 1545-0047  2017 Open to Public Inspection							
	anization JOINERS WELFARE FUND  B O, Supplemental Information	n		<b>Employer iden</b> 41-6024791	tification number						
Return Reference		Explanation									
FORM 990, PART VI, SECTION A, LINE 3	THE ORGANIZATION'S DAILY RECORDKEEPING FUNCTIONS ARE HANDLED BY THE MANAGEMENT COMPANY, WI LSON MCSHANE CORPORTATION ALL EXECUTIVE ORGANIZATION DECISIONS ARE HANDLED BY THE BOARD O F TRUSTEES										

Return Explanation

Reference

FORM 990,	THE BARGAINING ORGANIZATION, AND THE NORTH CENTRAL STATES REGIONAL COUNCIL OF CARPENTERS, BOTH
PART VI,	APPOINT 50% OF THE BOARD
SECTION A,	
LINE 7A	

Return Explanation
Reference

LINE 8B

FORM 990, THE ORGANIZATION DOES NOT HAVE ANY COMMITTEES THAT HAVE AUTHORITY TO ACT ON BEHALF OF THE PART VI, GOVERNING BODY SECTION A.

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 11B

Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990,
PART VI,
SECTION B,
LINE 12C

THE POLICY REQUIRES PERSONS COVERED BY IT TO MONITOR AND REPORT TO THE PLAN ANY ACTUAL OR
POTENTIAL CONFLICTS OF INTEREST THE PLAN THEN INVESTIGATES TO DETERMINE IF A CONFLICT OF
INTEREST, IN FACT, EXISTS, WHETHER IT IS MATERIAL, AND WHETHER CORRECTIVE ACTION IS REQUIR
ED COVERED PERSONS ARE ALSO OBLIGATED TO REPORT ANY CONFLICT OF INTEREST OF WHICH THEY AR
E AWARE INVOLVING OTHER COVERED PERSONS PERSONS COVERED BY THE POLICY ALSO ANNUALLY CERTI
FY IN WRITING THAT THEY HAVE NOT BEEN INVOLVED IN ANY CONFLICT OF INTEREST WHICH HAS NOT B
FEN REPORTED TO THE PLAN

Return Explanation
Reference

FORM 990, PART VI, SECTION C, LINE 19

efile GRAPHIC print - Do	O NOT PROCESS	As Filed Data -										DLN: 93493	313031	718
Related Organizations and Unrelated Partnerships  (Form 990)  Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  Attach to Form 990.									OMB No 1545-0047					
Department of the Treasury Internal Revenue Service	•	Information about S	ichedule I				s is at <u>www</u>	irs.gov/1	form99	<u>o</u> .		Open to	Publicection	•
Name of the organization CARPENTERS AND JOINERS WELFAR	RE FUND								Emp	loyer identif	icatior	number		
										024791				
Part I Identification	n of Disregarded E	ntities Complete if t	he organ	ization answ	ered "Yes	" on Form	990, Part	IV, line 3	3.					
Name, address, and	<b>(a)</b> d EIN (ıf applicable) of disr	egarded entity		(b) Primary a			c) ncile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	<b>(f</b> Direct co ent	ntrolling	
Part II Identification related tax-exer	of Related Tax-Ex		<b>s</b> Comple	ete if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I	/, line 34 be	cause	ıt had one or	more	
See Additional Data Table			1	(6)	1 ,	->	1 (4)	. 1		(-)		(6)	1 /	
Name, address, an	(a) id EIN of related organizati	ion	Prim	ary activity	ry activity (c) Legal domic or foreign		micile (state   Exempt Code			(e) Public charity status If section 501(c)(3))		<b>(f)</b> rect controlling entity	Section (13) cor	512(b) ntrolled ty?
													Yes	No
For Paperwork Reduction Ac	ct Notice, see the Ins	structions for Form 9	90.		Ca	t No 5013	35Y				Sche	edule R (Form	990) 20	17

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. See Additional Data Table (b) (c) (d) (i) (k) (e) (f) (g) (ı) Name, address, and EIN of Primary Legal Direct Predominant Share of Share of Disproprtionate Code V-UBI General or Percentage related organization controlling income(related, total income end-of-year allocations? amount in box ownership activity domicile managing unrelated, 20 of (state entity assets Schedule K-1 excluded from or tax under (Form 1065) foreign country) sections 512-514) Yes No Yes No Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) (b) (c) (d) (e) (f) (h) (ı) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Section 512(b) Primary activity Percentage domicile (C corp, S corp, ownership (13) controlled related organization entity ıncome vear (state or foreign or trust) assets entity? country) Yes No See Additional Data Table

Schedule R (Form 990) 2017		Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if 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 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		1	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a	·	No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b	,	No
c Gift, grant, or capital contribution from related organization(s)	10	;	No
d Loans or loan guarantees to or for related organization(s)	<del>                                   </del>	i T	No
e Loans or loan guarantees by related organization(s)	. 1e	<u> </u>	No
f Dividends from related organization(s)	1f	:	No
g Sale of assets to related organization(s)	<b>1</b> g	,	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	11	Yes	
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)	. <u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	_	No

	$\longrightarrow$		—
f Dividends from related organization(s)	1f		No
	10		No
g Sale of assets to related organization(s)	19		-110
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i	Yes	
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
Performance of services or membership or fundraising solicitations for related organization(s)	11		No
	1	-	No

i	Exchange of assets with related organization(s)	1i	Yes	
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
ı	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		No
0	Sharing of paid employees with related organization(s)	10		No
p	Reimbursement paid to related organization(s) for expenses	1p		No
	Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s		No
	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			

<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)			1k No						
l Performance of services or membership or fundraising solicitations for related organization(s)			1l No						
<b>m</b> 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 No						
$oldsymbol{o}$ Sharing of paid employees with related organization(s)			1o No						
p Reimbursement paid to related organization(s) for expenses			1p No						
<b>q</b> Reimbursement paid by related organization(s) for expenses			1q No						
r Other transfer of cash or property to related organization(s)			1r No						
f s Other transfer of cash or property from related organization(s)			1s No						
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									
(a) Name of related organization	(b) (c) Transaction Amount involve type (a-s)	d Method of determining an	nount involved						

Schedule R (Form 990) 2017

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

- See management of garileactors see and accords regarding exclusion													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) e all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	1 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017 Software ID: Software Version:

**EIN:** 41-6024791

Name: CARPENTERS AND JOINERS WELFARE FUND

Form 990, Schedule R, Part II - Identification of Related	Tax-Exempt Organizati	ons 	1 40	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))	<b>(f)</b> Direct controlling entity	Section (b)(i contro enti	13) olled
						Yes	No
3001 METRO DRIVE SUITE 500 BLOOMINGTON, MN 55425 41-6043137	RETIREMENT BENEFITS TO PARTICIPANTS	MN	401(A)	N/A	N/A		No
3001 METRO DRIVE SUITE 500 BLOOMINGTON, MN 55425 41-1824896	RETIREMENT BENEFITS TO PARTICIPANTS	MN	401(A)	N/A	N/A		No
700 OLIVE STREET ST PAUL, MN 55101 41-1771841	PROVIDE TRAINING FACILITIES	MN	501(C)(2)	N/A	N/A		No
740 OLIVE STREET ST PAUL, MN 55130 41-6041903	APPRENTICE TRAINING	MN	501(C)(3)	N/A	N/A		No
700 OLIVE STREET ST PAUL, MN 55130 39-0776395	TO PROMOTE AND PROTECT THE INTEREST OF MEMBERS	MN	501(C)(5)				No

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations											
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	<b>(f)</b> Direct controlling entity	Section (b)( contro	13) olled ty?				
						Yes	No				

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

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (c) Legal (j) (h) General (d) (g) (a) Name, address, and EIN of Disproprtionate (k) (b) Predominant Domicile Direct Share of total | Share of endallocations? Primary activity income(related, Code V-UBI amount in Percentage ıncome of-year assets Managing (State Controlling related organization unrelated, Box 20 of Schedule K-1 ownership Partner? Entity or excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes No Yes No A & K INSTALLATIONS LLC ACF LLC ADVANTAGE INDUSTRIAL ALDEN DRYWALLLLC AMJ CONSTRUCTION LLC BERG DRYWALL LLC BERKEL & CO BLACKSTONE CONTRACTORS LLC CECO CONCRETE CONSTRUCTION LLC CEILING PROS LLC CONCRETE STRATEGIES LLC CORE STRUCTURAL SERVICES LLC CRAWFORD MERZ LLC CUSTOM MILLWORK LLC DML CONSTRUCTION SERVICES

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(g) Share of end- of-year assets			ortionate (i) or Order V-UBI amount in Box 20 of Schedule K-1 (Form 1065)		eral r aging ner?	(k) Percentage ownership
							Yes	No		Yes	No	
EDEN LAKE BUILDERS												
F4 INSTALLATIONS LLC												
GARDNER LLC												
INCOR INSTALLATION LLC												
INNOVATIVE BLDG CONCEPTS LLC												
ICS HOLDINGS LLC												
KEVITT EXCAVATING LLC												
KORTECH CONSULTING LLC												
LEMKE & SONS LLC												
M & M RENOVATION LLC												
M&M CONSTRUCTION LLC												
MCT SERVICES LLC (MARLEY												
MAVO SYSTEMS ND LLC												
MCC LLC												
MINUTI-OGLE CONTRACTORS LLC												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

Form 990, Schedule R, Part I	II - Identification		ed Organizat	ions Taxable a	is a Partners	_	I			l /:	. 1	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections	(f) Share of total Income	(g) Share of end- of-year assets	(h Dispropi allocat	i) tionate tions?	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	<b>(j</b> Gene or Mana Partr	eral r aına	(k) Percentage ownership
				512-514)			Yes	No		Yes	No	_
MULCAHY NICKOLAUS LLC												
NEUFELDT INDUSTRIAL SER												
NORTHSIDE CONSTRUCTIONLLC												
NORTHSTAR INSTALLATIONS LLC												
OPUS CORPORATION												
PINNACLE WOODWORK INC												
PLIBRICO COMPANY LLC												
REDSTONE CONSTRUCTION LLC												
R J M CONSTRUCTION LLC												
ROSKOP CONSTRUCTION LLC												
SHAW-LUNDQUIST ASSOC												
STANDARD CONSTRUCTION LLC												
STENGER DAVID L CONST												
CB&I SERVICES LLC												
ETHOSENERGY FIELD SERVICES LLC												

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a)  Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total Income	(h Dispropi allocat	tionate	(i) Code V-UBI amount in Box 20 of Schedule K-1 (Form 1065)	Gene or Mana Partr	eral r ging ner?	(k) Percentage ownership
TRINITY CONST GROUP LTD											
TURBINEPROS LLC											
WA KLINGER LLC											
WEBSTER'S NORTHLAND CONST LLC											
YALE MECHANICAL											
JAEGER CONSTRUCTION LLC											
BULACH CUSTOM ROCK LLC											
HUFCOR MINNESOTA LLC											
ICON CONSTRUCTORS LLC											
JSH CONSTRUCTION LLC											
TRADE ACCESS											
SUPERIOR ERECTORS LLC											
PCI ROADS LLC											
MIC SERVICES LLC											
B&P DRYWALL AND											

(a)

Name, address, and EIN of
related organization

BRAND ENERGY SERVICE LLC

BRINDLEY PLANT SERVICES LLC

COMMERCIAL FLOORING SVCS

LLC

**(b)** Primary activity

# y C

#### Legal Domicile (State or Foreign Country)

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(c)

#### (d) Direct Controlling Entity

(e)

Predominant

income(related,

unrelated,

excluded from

tax under

sections 512-514) (j)

General

or

Managing !

Partner?

Yes No

Code V-UBI amount in

Box 20 of Schedule K-1

(Form 1065)

(k)

Percentage

ownership

(h)

Disproprtionate

allocations?

No

Yes

(g)

Share of end-

of-year assets

Share of total

income

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes API INC AM CONSTRUCTION OF AK INSTALLATION INC A&L CONSTRUCTION INC ACOUSTICAL CONCEPTS INC ACOUSTICS ASSOCIATES INC ADAATLANTIC PLANT MAINT ADAMS DOOR CO INC ADB CONSTRUCTION CO INC ADOLFSON & PETERSON ADVANCED CRANE ERECTORS ADVANTAGE OFFICE SERVICES ALL PHASE CONTRACTING INC ALLEN MAX CONSTRUCTION

ALLIED CONSTRUCTION SERV INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) (c) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign controlled or trust) assets country) entity? Yes No ALTA CONTRACTOR SERVICES OF MN ALLTECH ENGINEERING COR ALVIN E BENIKE INC AMES CONSTRUCTION ANDERSON DRYWALLING ANDERSON-LADD INC APTIM SERVICES LLC ARCHITECTURAL IMAGES ARCHITECTURAL SPECIALTIES INC ARCHITECTURAL MILLWORK INSTALL ARCHITECTURAL SALES INC ARCHITECTURAL PANEL ARNDT INTERIOR CONSTRUCTION ATACCON LLC

ATLAS FOUNDATION CO

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) Direct controlling (c) (e) (f) (h) (i) (g) Name, address, and EIN of Legal 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 country) entity? Yes No ATOMIC ARCHITECTURAL AXEL H OHMAN CO AZCO INC **B&B BROTHERS DBA** B N SERVICE BABCOCK & WILCOX BADGER SCAFFOLD INC BAKER INTERIOR SYSTEMS BANDED CONSTRUCTION LLC BEN SCOTT CONSTRUCTION & BENCHMARK LLC BERWALD ROOFING BFH CONSTRUCTION AND BHI SPECIALTY SERVICES

TL CONSTRUCTION INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes BLACK L S CONSTRUCTORS BLACKHAWK FOUNDATION CO **BOLANDERCARL & SONS CO BOLDT COMPANY** BMG ENTERPRISES BOLDUC L H CO INC BORTON CONSTRUCTION INC HECIMOVICH BOB MECHANICAL LIPE BROTHERS CONSTRUCTION BREDEMUS HARDWARE CO IN BREIHOLZ CONSTRUCTION CO BRENNAN CO INC BRIESER CONSTRUCTION COMPANY **BUHLER CONST** 

BUNTING GRAPHICS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign controlled or trust) assets country) entity? Yes No BURKE ENGINEERING SALES CO MEYER CR AND SONS COMPANY MEYER CONTRACTING INC CALACCI CONSTRUCTION CO INC CAMERON MITCHELL INC CAPITAL WOOD PRODUCTS CARLON CONTRACT FLOORING CARLSON LAVINE INC CARLSTROM INC ROBERT CARPENTRY BUILDERS INC CARR ROBERT & ASSOC INC CBI SERVICES INC LENCI ENTERPRISES INC CEILING PRO INC CENTRAL CEILINGS

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes CENTRAL MINNESOTA BG BRECKE INC CENTRAL ROOFING CO CENTURY CONSTRUCTION CO INC CENTURY GROUP CHRISTIANSEN CONSTRUCTION CO GEISLER BROTHERS INC CITYWIDE WOOD FLOORS CM CONSTRUCTION COMPANY CMC CONSTRUCTION INC COBRA CONSTRUCTION INC COMMERCIAL CONSTRUCTION 360 WALL SYSTEMS INC COMMERCIAL DRYWALL INC

COMMERCIAL FLOORING

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes 3-D CONCRETE & CONSTRUCTION CONRAD A E CO CONSTRUCTION RESULTS CONTROL INSTALLATION OF IA INC CONVEYOR SPECIALTIES DIV COOK GEORGE F CONST CO CORMACI CONSTRUCTION CO COTA FORMING INC CRAWFORD DOOR SALES CO CROSSROAD CONSTRUCTION ST GERMAIN CAB & COUNTERTOPS CUSTOM DRYWALL INC D & J FLOORING INC C70 BUILDERS INC

**D&D INSTALLATION** 

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) Direct controlling (c) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile entity (C corp, S corp, ownership (b)(13)ıncome year (state or foreign or trust) assets controlled country) entity? Yes No DAKOTA LATITUDES LLC DALLCO INC DATA ENVIRONMENT SERV DAVE OSBORNE CONSTRUCTI DAVID WAYNE CONST DAVID M SCHMITT DAY & ZIMMERMAN NPS DAY CO CONCRETE COMPANY DEL'S CONST DGI-MENARD DIAMOND ACOUSTICS DIAMOND DRYWALL **EMERGE CONSTRUCTION** DIVISION V SHEET METAL INC

DIX CORPORATION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) (c) (e) (f) (h) (i) (g) Name, address, and EIN of 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 country) entity? Yes No DKS CONSTRUCTION SCHAEFER ACOUSTICS INC DONLAR CONST CO DONNELLY STEPHEN CO INC DOORS INC DOORCO DRESSER RAND COMPANY DUN PAR ENGINEERED FORM EAU CLAIRE ACOUSTICS IN ECCO CONSTRUCTION EG&J INC EGAN COMPANIES INC E&K OF OMAHA ELITE TRADESHOW SERVICE

EMERALD BUILDERS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes ENGELSMA CONSTRUCTION INC **ENGINEERING & CONSTRUCT** EXTERIOR BUILDING SERVICES INC FALEWITCH CONST SERV INC FALLS AND NYHUSMOEN CON FAZENDIN JEFFREY T & AS 1ST INTERIORS INC FISCHBACH CONSTRUCTION FLANNERY CONSTRUCTION FOUNDATION SERVICE CORP FOWLER & HAMMER INC FOX THEATER MAINT CO FRANA COMPANIES INC FRANDRUP MASONRY INC

FRERICHS CONSTRUCTION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) (c) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes FRIDA DRYWALL SYSTEMS LLC GAGNON INC GENESYS CORP GEORGE BOUGALIS AND SONS CO GEORGE J SHAW CONSTR CO GES EXPOSITION SERVICES UP NORTH BUILDERS GLOBAL SPECIALTY CONTRACTORS GOEBEL FIXTURE CO GLOBAL WRAP & SERVICES INC GRAHAM CONST CO GRAHAM CONSTRUCTION SER GREINER CONST INC GRESSER COMPANIES INC

GRIDOR CONST INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No **GUNDERSON CONST GUSTAFSON & GOUDGE INC** HALL W L CO HAYES MECHANICAL HEARTLAND CONSTRUCTION INC HEARTLAND FINISHES INC HENDLEY'S INC HEYMANN CONSTRUCTION HILSABECK SCHACHT INC HOLCOMB CORPORATION HOLLENBACK & NELSON INC HOMECARE INC HOMECO INSULATION INC HOWARD IMMEL INC

IDEAL COMMERCIAL INSTALLATION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes III RIVERS ENTERPRISE IMPERIAL WALL INC INDUSTRIAL COATINGS CO INDUSTRIAL CONTRACTORS INDUSTRIAL MACHINE SERV INDUSTRIAL ROOFING & INFINITY ACCESS INC INNOVATIVE ACOUSTICS INTEGRITY INSTALLATION INTERCON GROUP INC INTERIOR INSTALLATION SRVCS **IYAWE & ASSOCIATES BLDR** J & D BUILDERS JH FINDORFF & SON INC JR JENSEN CONSTRUCTION CO

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No J&K BUILDERS INC JAMAR COMPANY INC JAN-LASSERUD CONST INC JANNINGS ACOUSTICS INC JC PENNEY JOB CORP-BOXELDER JOE MILLER HOMES JOHNSON M P CONST INC JOHNSON WILSON CONSTRUCTORS SA JORDAN CONST INC JORGENSON CONSTRUCTION JUST SEATS INC PHIL'S GARAGE DOOR SERVICE KASELLA CONCRETE INC

KELLEHER CONST INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) Direct controlling (c) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No KELLINGTON CONSTRUCTION KEY WEST METAL INDUSTRIES INC KEYSTONE CONTRACTING INC KGM INC KIFFMEYER INC KIRK ACOUSTICS INC KIRK ERECTORSINC KNUTSON CONS CO KNUTSON CONST ROCHESTER KRAEMER CONST INC KE FLEX CONTRACTING KRAEMER EDWARD & SONS KRANZ D J CO INC KRAUS ANDERSON MIDWEST

KUNZ CONSTRUCTION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (i) (f) (g) (h) Name, address, and EIN of Direct controlling Type of entity Percentage Legal Share of total Share of end-of-Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes KURTTI CONST INC KUSTOM BLINDS & DRAPERIES L&E WINDOW INSTALLATION INC LAKE AREA ROOFING & CONST LAKEHEAD CONSTRUCTORS INC LAMETTI & SONS INC LANCASTER MANAGEMENT SERVICES LANGER CONSTRUCTION LANKFORD CONSTRUCTION LARSON CONSTRUCTION CO INC LARSON & LARSON CONSTRUCTION NORTHERN HORIZONS INC LEHNER CONST INC LEMKETIM CONSTRUCTION

LEXICON CONSTRUCTION INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes LOEFFEL CONSTRUCTION LOVEGREEN INDUSTRIAL LUNDA CONSTRUCTION CO LYLE'S GARAGE DOOR SERVICE LYSNE A J CONTR CORP MAERTENS BRENNY CONST MARCY CONSTRUCTION CO LLC MARICK REFRIGERATION MARINE TECH INC

### MAGNEY CONSTRUCTION MAJESTIC FLOORING INC MARCO RJ CONST INC

MARKET & JOHNSON INC PO

MARSHALL ERECTING INC

MAVO SYSTEMS SCAFFOLDING

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? No Yes MC CARTHY BUILDING CO INC MCCROSSAN C S INC MCFARLAND CONSTRUCTION MCGOUGH CONST CO INC MEISINGER CONST CO INC MENDEZ DRYWALL MG MCGRATH INC HOLMDONALD CONSTRUCTION CO MIDWEST ACOUSTIC INC MIDWEST DRILLED FOUNDATIONS & MIDWEST DRYWALL

## METRO SHADE SERVICE METROPOLITAN MECHANICAL MEYER CR & SONS

MILLWRIGHT & MACHINERY

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes MINNOWA CONSTRUCTION INC MINNESOTA ACOUSTICS INC MINORITY OWNED INSULATION MIRON CONSTRUCTION COMPANY INC. MORCON CONSTRUCTION MA MORTENSON CO MURPHY RIGGING & ERECTI NPD INC FOUR STAR CONSTRUCTION NATIONAL CONVENTION SERVICES NATIONWIDE INSTALLATION NELSON REFRIGERATION INC NEUMANN BROTHERS INC NEWELL MACHINERY CO INC

CORVAL CONSTRUCTORS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes NORDSTROM ARCHITECTURAL NORSEMEN WINDOW INSTALLER NORMINN INDUSTRIAL LLC NORTHERN INDUSTRIAL ERECTORS NORTHERN INDUSTRIAL SERVICES XCEL ENERGY INC NORTHSTAR INSULATING SYSTEMS NOVA INSTALLATION SERV NTH DEGREE HOME MENDERS INC OLYMPIC COMPANIES INC OLYMPIC COMPANIES INC OLYMPIC COMPANIES INC OLYMPIC COMPANIES INC

OREGON-WASHINGTON CARPENTERS

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes OZIAS INC PALMER WEST CONSTRUCT PALMER-SODERBERG INC PARK CONSTRUCTION PARKOS CONSTRUCTION CO INC PCL CONSTRUCTION PERFORMANCE CONTRACTING INC PLATINUM SCAFFOLDING SERVICES PINNACLE WALL SYSTEMS POINDEXTER FLOORING INSTAL PONTIAC DRYWALL SYSTEMS INC PORTER TRUSTIN CARLSON POWER GENERATION SERVICES POWER TEC INC PRECISION CONTRACTING CORP

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes PRECISION COOLING TOWERS INC PREFERRED PROPERTIES INC PRESTIGE CONTRACT FLOORING PRESTIGE DRYWALL INC PROGRESSIVE BUILDING SYSTEMS PROSTAR SURFACES INC PUGLEASA COMPANY INC QUALITY DRYWALL INC QUEEN CITY CONSTRUCTION R A M WEST CONST CO INC RACHEL CONTRACTING INC RAINVILLE CARLSON INC **RAK CONST INC** RALPH N SMITH INC

RAMSEY EXCAVATING CO

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes RAY RIIHILUOMA INC REBER-FRIEL CO REILING CONST CO REINER CONTRACTING INC RESHETAR SYSTEMS INC REWARD ENTERPRISES LLC RICE LAKE CONSTRUCTION GROUP RIESGRAFS INSTALLATION ROBERT SCHROEDER INC ROGERS AUTOMATIC ROSENQUIST CONSTRUCTION ROSTI CONSTRUCTION RTL CONSTRUCTION INC RUSSELL CONSTRUCTION

RUSSELL CONSTRUCTION COMPANY

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (i) (f) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? No Yes RYAN COMPANIES US INC RYAN RJ CONSTRUCTION **S&P CONSTRUCTION** S&S CONCRETE AND MASONRY SAFEGUARD ROOFING CO SAFWAY SERVICES INC SAJO INCORPORATED SAFWAY SERVICES LLC IOWA SAFWAY SERVICES LLC MISSOURI SCHAEFER HARDWOOD FLOOR SCHECK INDUSTRIAL CORP SCHLEIS FLOOR COVERING SCHNABEL FOUNDATION COM SCHREIBER & MULLANEY CO

SDC MANAGEMENT LLC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No SEBCO INC SENOMA INC DBA CENTURY SERICE CONST SHAFER CONTRACTING CO SHEEHY CONSTR CO INC SHERWOOD KESSLER SHORCO INC SHOULDICE INDUSTRIAL SIECO CONSTRUCTION SIEGFRIED GEORGE CONST SIEMENS GENERATION SERVICE CO SONUS INTERIORS INC SORENSEN & SORENSEN PAINTING SPECIALTY SYSTEMS INC

ST CLOUD ACOUSTICS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) (c) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No ST CROIX WALL SYSTEMS INC ST PAUL LINOLEUM CARPET STACK BROS MECHANICAL STAINLESS SPECIALISTS INC STANDARD CONTRACTING INC STATE GROUP INDUSTRIAL LTD STEELE JAMES CONST CO STEININGER MAX INC STERLING SYSTEMS STERN DRYWALL INC STREETWAY MASONRY INC SULLIVAN CONSTRUCTION SUMMIT CONCRETE & MASONRY SUNRISE CARPENTERS

SUPERL INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) Direct controlling (c) (e) (f) (i) (g) (h) Name, address, and EIN of Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No **SWANSON & YOUNGDALE INC** SWIFT CONSTRUCTION SERVICES SYSTEMS ENTERPRISE CORP TAB STOREFORCE INC T&G CONSTRUCTION T&K BUILDERS INC TASLER CONST TATE ORNAMENTAL INC HUSSMANN CORPORATION TEKTON CONSTRUCTION COMPANY THE CADEIRA GROUP INC THE MARATHON GROUP INC THE SAMUELS GROUP THE WEITZ COMPANY

THE WEITZ CO

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No THE WEITZ COMPANY INC THOR CONSTRUCTION INC WW TIMBERS INC TIMCO CONST CO TJ CONST TMG CONSTRUCTION INC TOPS FIELD SERVICES TOTAL CONSTRUCTION & TRI CONSTRUCTION INC DS TRUDEAU CONSTRUCTION TWIN CITIES SPECIALTIES TWIN CITY ACOUSTICS INC USFRAMERS & FINISHERS INC ULTRA CONCRETE

UNI-STRUT INTERNATIONAL CORP

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Legal Share of total Share of end-of-Percentage Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign controlled or trust) assets country) entity? No Yes BELLKATO CORPORATION UNION TEMPORARY SERVICES INC UNIPRO CONSTRUCTION INC UNITED INSTALLATION SER UNITED STATES MECHANICAL INC UNIVERSAL PAINTING AND UNIVERSAL PLANT SERVICES INC V&S CONSTRUCTION SERVICES INC VAN OSDEL PLASTERING & DRYWALL VEIT & CO INC VIKING CONST LOWRY BLDG VINCE BIRD CONSTRUCTION WAGNER CONSTRUCTION OF WATSON FORSBERG CO

WEIS BUILDERS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No WENGER TRAFFIC CORP WESTERN INDUSTRIAL CONT WESTIN CONST CO WESTPORT POOLS INC WILLIAMS BROTHERS CONST INC WINGER CONTRACTING JE DUNN CONSTRUCTION COMPANY WOODS CONSTRUCTION INC WTW CONSTRUCTION SERVICES ZEMAN CONST CO ZENITH TECH INC ZINTL INC DAVIS DRYWALL INC DOW ACOUSTICS INC

COMMERCIAL WALL SYSTEMS INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (i) (f) (g) (h) Name, address, and EIN of Direct controlling Type of entity Percentage Legal Share of total Share of end-of-Section 512 related organization (C corp, S corp, ownership (b)(13)domicile entity income year (state or foreign or trust) assets controlled country) entity? Yes No BADGER SWIMPOOLS INC GORDON CONST OF MAHNOMEN INC HAMMERLUND CONSTRUCTION INC HAWK CONSTRUCTION BERGSTROM CONSTRUCTION PATRIOT CRANE & RIGGING D R ANDERSON CONSTRUCTION KIEWIT BUILDING GROUP INC KIEWIT INFRASTRUCTURE CO CONSTRUCTION SPECIALISTS INC GREEN LIGHT ARCHITECTURAL GREEN CONSTRUCTION SERVICES TWIN CITY HARDWOOD ADVANCEMENTS IN FLOORING

PRIME CONSTRUCTION SOLUTION

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Direct controlling Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No K&H EXTERIORS INC DBA LANCE SERVICE INC **BULTE COMPANY** DOOR SERVICE COMPANY OF LYDON MILLWRIGHT SER INSULATION GUYS INC GENERAL OFFICE PRODUCTS S M HENTGES & SONS INC INDUSTRIAL MAIN SERVICE RESIDUAL MATERIALS INC ACOUSTICAL CEILINGS INC W SOULE & CO ICE INSTALLING COOLERS ETC ICON INDUSTRIAL SERVICES

**B&B ROOFING & SM INC** 

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (d) Direct controlling (c) (e) (f) (h) (i) (g) Name, address, and EIN of Legal Type of entity Share of total Share of end-of-Percentage Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign or trust) assets controlled country) entity? Yes No VER HALEN INC ENVIROMENTAL PLANT SERV FREEMAN MATTISON CONTRACTORS INC BIBROOKS & SONS INC HUNTER SITE SERVICES BRAXTON & SONS INC DORAL CORPORATION ST COTTER TURBINE SER INC MAX GRAY CONSTRUCTION INC CHICAGO FLYHOUSE INC BASS LAKE BUILDERS AND SPORT SYSTEMS UNLIMITED CORP VOELLER INSULATION INC

MINER'S INC

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Percentage Legal Share of total Share of end-of-Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign controlled or trust) assets country) entity? No Yes NORTHWOODS BUILDERS INC NORTHLAND CONST OF DULUTH BALDWIN SUPPLY COMPANY OHMAN PUMP SERVICE AMENDOLA BUILDERS INC TFEINC LAKES & PLAINS CONSTRUCTION UNITED REFRACTORIES INC PELLAND SWENSON ASSOCIATES PELCO CONSTRUCTION SORLIE ACOUSTICS INC VANGUILDER CONTRACTING INC QUALITY DRYWALL & PLASTERING BECKERS INC

HANOVER LINOLEUM & TILE

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust **(b)** Primary activity (c) (d) (e) (f) (i) (g) (h) Name, address, and EIN of Direct controlling Type of entity Percentage Legal Share of total Share of end-of-Section 512 related organization domicile (C corp, S corp, ownership (b)(13)entity income year (state or foreign controlled or trust) assets country) entity? No Yes INTEGRITY FLOOR COVERING INC KIEFER SPECIALTY FLOORING INC LAVAN FLOOR COVERING MASTERS FLOOR COVERING MARLOW FLOOR COVERING INC NATUS INSTALLATIONS PLATINUM FLOORCOVERING MN INC SCHNEIDER CO ZIEMS CARPET WORKROOM INC PREMIUM CARPET INSTALLATIONS R F DURESKY FLOOR COVERING IMPACT FLOORING INC CONTRACT TILE & CARPET JOHNSON CARPET

TCL FLOOR COVERING