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### 12719 06/04/2010 9 37 AM Form

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 \_ 2009 Open to Public Inspection

 A	For the 2009	calendar y	ear, or tax year beginning , and ending	<u> </u>		
В	Check if applicable		C Name of organization	D	Emplo	yer identification number
	Address change	use IRS label or	SHEET METAL WORKERS' LOCAL NO. 2			
	Name change .	print or	Doing Business As		44-	0429770
	Initial return	type. See	Number and street (or P O box if mail is not delivered to street address)  Room/suite	E	•	one number
$\overline{\sqcap}$	Termination	Specific	P.O. BOX 300378			<del>-254-8021</del>
$\Box$	Amended return	Instruc- tions.	City or town, state or country, and ZIP + 4  KANSAS CITY  MO 64130	G	Gross rece	ipts\$ 4,368,352
$\exists$		E Nom	e and address of principal officer	— н	(a) Is this	a group return for
	Application pendin	9 1 144	, and address of principal circus	1.7	affiliate	
				H	( <b>b)</b> Are all include	affiliates
_		l			If "No,"	attach a list (see instructions)
<u></u>	Tax-exempt sta		501(c) ( 5 ) ◀ (Insert no ) 4947(a)(1) or 527			
<u>J</u>	Website.		METAL2.ORG			exemption number
	Type of organizati		<del> </del>	tion		M State of legal domicile
	T	Summa	he organization's mission or most significant activities			
		describe	ne organization's mission or most significant activities			
nce						
Governance						
Š	2 Check	this box	if the organization discontinued its operations or disposed of more than 25% of its n	et assets		
⊗ ⊗	3 Numbe	er of voting	members of the governing body (Part VI, line 1a)		3	10
ies	4 Numbe	er of indep	endent voting members of the governing body (Part VI, line 1b)		4	7
Activities &	5 Total r		employees (Part V, line 2a)		5	78
Ac			volunteers (estimate if necessary)		6	
	_		ated business revenue from Part VIII, column (C), line 12 siness taxable income from Form 990-T, line 34		7a 7b	
_	b Net un	ileiateu bu		Prior Year	1 70	Current Year
ΑĐ	8 Contril	butions an	d grants (Part VIII, line 1h)	,485,		4,203,935
75	9 Progra	ım service	revenue (Part VIII, line 2g)		976	56,994
TANK A CAN Revenue	10 Invest		ne (Part VIII, column (A), lines 3, 4, and 7d)		723	80,749
2	11 Other		Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		027	19,085
<u>"</u>				,669,	708	4,360,763
	1		ar amounts paid (Part IX, column (A), lines 1–3) or for members (Part IX, column (A), line 4)	59	962	61,401
=	15 Salarie	*		,552,		1,580,478
(       )	16a Profes		draising fees (Part IX, column (A), line 11e)	7 7		
	b Total f	undraising	expenses (Part IX, column (D), line 25) ▶			
03/) 11/10/Ex	17 Other	expenses	(Part IX, column (A), lines 11a–11d, 11f–24f)	,464,		2,066,329
1 1 1	18 Total e	expenses		,077,		3,708,208
	19 Reven	ue less ex	penses Subtract line 18 from line 12	592,		652,555
ets o	항 20 Total a	ecate (Pa	1	g of Curren , 506,		End of Year 5, 183, 168
Ass	21 Total I		Part X line 26)		547	48,126
Net Assets or	22 Net as	•	[ Y ]	, 482 ,		5,135,042
<u></u>		Signatu	re Block			
			ties of perjury, I declare that I have examined this return, including accompanying schedules and statemen			
		and belief	is true, correst and complete. Declaration of preparer (other than officer) is based on all information of will	nich prepare	er nas any	у клоwledge
	gn	1304	(1) Oly			
HE	ere	Signati	re of officer  BENITH ESLINGS		Date	6/23/2010
			print name and title			1,-0,-10
_		· · · · ·	Date Date	Check if		Preparer's identifying number
	aid	Preparer's signature	Cinthia S. OB- CA 06/04/10	self- employed	<b>.</b> [	(see instructions) P00507290
	reparer's		Novak Birks P C	J,p.0,00	EIN D	10 11001
Us	30 01114	Firm's name if self-emplo	(or yours		Phone	
_		address, an				816-931-6111
	<del></del>		eturn with the preparer shown above? (see instructions)			Yes No
Fo		and Pape	rwork Reduction Act Notice, see the separate instructions.		-	Form <b>990</b> (2009)
V						δ' 😾

Form 990 (2009)

	1 990 (2009) SHEET METAL WORKERS' LOCAL NO. 2 44-0429770			P	age 3
Pa	art IV Checklist of Required Schedules				
		Г		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"				
_	complete Schedule A	-	1_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	F	2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to				v
	candidates for public office? If "Yes," complete Schedule C, Part I	F	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II				
_		-	4_		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	1	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	  -	<u> </u>		
Ū	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	[			
	complete Schedule D, Part I		6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 	0		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-	<u>.</u>		
Ü	complete Schedule D, Part III		8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	-	<del>-</del>		
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"				
	complete Schedule D, Part IV	İ	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or				
-	quasi-endowments? If "Yes," complete Schedule D, Part V		10		х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,				
	VII, VIII, IX, or X as applicable		11	х	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	<u> </u>			
	Schedule D, Part VI				
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII				
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII				
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets				
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX				
•	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? If "Yes," complete Schedule D, Part X				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	L			
	Schedule D, Parts XI, XII, and XIII		12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes	No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	⊢	13		X
14a	g	-	14a		X
þ					,,,
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	F	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any				•
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	-	<u>15</u>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		40		v
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	$\vdash$	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		47		x
18	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	H	17		
. 0	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		19		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	⊢	18		
	Die the organization report more than \$15,000 or gross income nom galling activities on half vin, line 3a7				ı

Form **990** (2009)

If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 17 If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	_23	_	<u> </u>
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 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	-		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		_ <u>X</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	_37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		E a	, uun	(2000)

_Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			<del></del>	,  —	1
4	Enter the number reported in Day 2 of Form 1006. Applied Summary and Transmitted of		ı		Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1a	16			ŀ
b	U.S. Information Returns. Enter -0- if not applicable.  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	10	<del></del>		ļ
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			-		
·	gaming (gambling) winnings to prize winners?	, labic		1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	[			<del> </del> -	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	78			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	•				<u> </u>
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	by				
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," 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 at	ithority	1			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fina	ncıal				
	account)?			<u>4a</u>	ļ	X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign B	ank				]
_	and Financial Accounts					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		5a	<del>  -</del>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transacti			5b_	<del> </del>	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regar	ding				
6-2	Prohibited Tax Shelter Transaction?  Does the organization have annual gross recents that are normally greater than \$100,000, and did the			<u>5c</u>	+ -	<del> </del>
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?	'		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or		l da	<del>                                     </del>	<del>                                     </del>
-	gifts were not tax deductible?	<b>.</b>		6ь		
7	Organizations that may receive deductible contributions under section 170(c).					<b>†</b>
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	ods				
	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	i				
	required to file Form 8282?		i	7c		ļ .
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pe	rsonal			}	
	benefit contract?			7e	<del> </del>	-
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	X /		7f	┼	-
g h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	20		<u>7g</u>	<del> </del>	<b>-</b>
"	required?	us		7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			<del>  '''</del>	<u> </u>	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
	organization, have excess business holdings at any time during the year?			8	L.	
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	<u> </u>	<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	ļ	
10	Section 501(c)(7) organizations. Enter		•		1	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_			1
11	Section 501(c)(12) organizations. Enter	 	<b>,</b>			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	ا ا				1
40.	amounts due or received from them )	11b	<u>L</u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		ĺ	12a	+-	1 -
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	l		1	1

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

<u></u>	Aion A. Coverning Body and Management			
<u>Sec</u>	tion A. Governing Body and Management	-	Γ.,	
	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u> </u>	Yes	No
1a	Enter the number of voting members of the governing body  Enter the number of voting members that are independent.  1b 7	$\dashv$		
b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			<b></b>
_	any other officer, director, trustee, or key employee?	2	-	X_
3	Did the organization delegate control over management duties customarily performed by or under the direct			•
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3	-	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	<b></b>	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	77	
6	Does the organization have members or stockholders?	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	1_	٠,,	
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following	_	٠,,	
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	j		
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	venue Code.)		1	-
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	1		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		l	
	form?	11	X	ļ
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990		ļ	L
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	ļ	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	ļ	
13	Does the organization have a written whistleblower policy?	13		X_
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		ļ	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		i	ĺ
	the organization's exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
-	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► ROBERT ESLINGER 2902 BLUE RIDGE BLVD			
	MO 64130			

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee.

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)  Name and Title	(B) Average		(C) Position (check all that apply)		(D) Reportable	(E) Reportable	(F) Estimated			
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CHARLES COATS										
EXEC BOARD	6.00	X						307	0	0
WILLIAM LEWIS										
VICE PRES/FORM E BD	6.00	X		X				304	0	0
BOBBY CANTRELL									*	
EXEC BOARD	6.00	X						0	0	0
DONALD FANNIN										
EXEC BOARD	6.00	X						0	0	0
DAVID HADDIX										
EXEC BOARD	6.00	X						0	0	0
ADAM HANSEN										
EXEC BOARD	6.00	X						o	0	0
DANIEL LOFTIS										
EXEC BOARD	6.00	X						0	0	0
JOHN SCARLETT		I								
EXEC BOARD	6.00	X						0	0	0
RICK BELEW										<del></del>
TRUSTEE	6.00	X						0	0	0
JASON FERGUSON										
TRUSTEE	6.00	X						0	Ō	0
DARYL OBERHOLTZ										
TRUSTEE	6.00	X						0	0	0
JOHNNY BRAXTON		Ī								
FORMER EXEC BOARD	6.00	X						0	0	0
ALLEN JAY LIND	İ i									
FORMER PRESIDENT	6.00			X				49,646	48,681	0
TONY KEITHLEY									<u> </u>	
FORM REC SEC/PRES	6.00	}	ļ.	X	İ			448	93,756	0
RICHARD DEVINEY										
FORMER CONDUCTOR.	6.00			X				0	0	0
ADAM HANSEN										
FORMER WARDEN	6.00			X				0	0	0
DAVID WRIGHT										
RECORDING SECRETARY	6.00			X				0	0	0
DAA										Form <b>990</b> (2009)

Part VII Section A. Officers	, Directors, Tru	stee	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)				
(A)	(B)	D			C)	h-4		(D)	(E)		(F)		
Name and Title	Average hours per week	or director	,	Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization		of ation ie tion	
•		stee	trustee		8	pensated					and relat organizati		
MICHAEL DANIELS		1									_		
CONDUCTOR	6.00	ļ		X	<u> </u>	ļ	ļ	0	0	<del> </del>			0
SCOTT MOORE WARDEN	6.00			x				o	o				0
JAMES HUFFMAN	1					<del> </del>							
BUSINESS MANAGER	44.00					X		108,630	0				0
GREGORY CHASTAIN	44.00							104 676					_
JAMES FLACH	44.00					X	-	104,676	0	<del>                                     </del>		•	0
BUSINESS REP	44.00					x		104,676	o				0
ROBERT ESLINGER													
FINANCIAL SEC/TREAS	44.00	<u> </u>	_	ļ		X		102,729	0				0
			1										
	<del>-</del>	$\vdash$		-	-								
		-	-	ļ			<u> </u>						
										1			
				ļ						<u> </u>			
						L_							
<del></del>		╁╌		<u> </u>						-	-		
				ļ									
1b Total							<b></b>	471,416	142,437	<u> </u>			
2 Total number of individuals (in	•			those	e liste	ed at	oove	) who received more than \$	5100,000 in				
reportable compensation from	the organization	<u> </u>	5								1:	Т	
3 Did the organization list any fo	ormer officer dire	ector	or tr	neter	e ke	v em	nlov	ree or highest compensate	d			Yes	No
employee on line 1a? If "Yes,"	complete Sched	lule .	l for	such	ındı	vidua	al	, , ,			3		X
4 For any individual listed on line the organization and related o													
individual								•			4		X
5 Did any person listed on line 1 services rendered to the organ							•	· ·			5	ŀ	X
Section B. Independent Contract		COII	ipici	e 00	ricut	110 0	101 3	dell person			1 2 1		
1 Complete this table for your five		ensat	ted ır	ndep	ende	ent c	ontra	actors that received more th	nan \$100,000 of				
compensation from the organi	(A) business address						Г		(B) tion of services		1	(C) pensati	
Name and	business address				_		-	Descrip	tion of services		Com	peńsati	on
<del>-</del>							<u> </u>				<u> </u>		
							-				<del> </del>	<del>.</del>	
											<u> </u>		
O T-4-1-2 1: ( )							<u></u>				ļ		
2 Total number of independent of more than \$100,000 in competence.						d to	thos	e listed above) who receive	ed				
DAA		viga	ıııı∠d	don'					<u>-</u>		Form	990	(2009

Part VIII Statement of Revenue (A) (C) Unrelated (B) Related or (D) Revenue Total revenue excluded from tax under sections 512, 513, or 514 exempt function business revenue revenue 1a Federated campaigns 1a 4,122,684 b Membership dues 1b c Fundraising events 1c 1d 81,251 d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f 4,203,935 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 28,646 28,646 2a INITIATION FEES 18,918 18,918 b MEMBER ASSESSMENTS 9,028 9,028 С REINSTATEMENT FEES 702 702 d WITHDRAWAL AND TRANFERS CARD -300 -300 MEMBER FINES f All other program service revenue 56,994 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 79,733 other similar amounts) 79,733 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross Rents b Less rental exps c Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets 8,605 other than inventor b Less cost or other 7,589 basis & sales exps 1.016 c Gain or (loss) Net gain or (loss) 1,016 1,016 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses b c Net income or (loss) from gaming activities  $\triangleright$ 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Busn Code** 11a REFUNDS/REIMBURSEMENTS 19,085 19,085 b d All other revenue 19,085 Total. Add lines 11a-11d ▶ Total Revenue. See instructions 4,360,763 77,095 0 79,733 Form 990 (2009)

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must o				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16		ļ		
4	Benefits paid to or for members	61,401	61,401		<del></del>
5	Compensation of current officers, directors,	02/102	01,101		
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
0	· · · · · · · · · · · · · · · · · · ·				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	1,048,530	1,048,530		
7	Other salaries and wages	1,040,550	1,040,550		
8	Pension plan contributions (include section 401(k)	211 241	311,241		
_	and section 403(b) employer contributions)	311,241			<del> </del>
9	Other employee benefits	137,931	137,931	<del> </del>	
10	Payroll taxes	82,776	82,776	<del></del>	ļ
11	Fees for services (non-employees)				
a	Management	71 707	71 707		
b	Legal	71,707	71,707		<del>                                     </del>
c	Accounting	145,266	145,266		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	4 070	4 070		
f	Investment management fees	4,879	4,879		
g	Other	100 144	100 144		
12	Advertising and promotion	102,144	102,144		
13	Office expenses	133,210	133,210	<u> </u>	
14	Information technology				
15	Royalties	106 400	100 100		
16	Occupancy	106,489	106,489	<del></del>	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				<u> </u>
19	Conferences, conventions, and meetings	20,251	20,251		<del></del>
20	Interest				<u> </u>
21	Payments to affiliates	602,259	602,259	·	<u> </u>
22	Depreciation, depletion, and amortization	68,316	68,316		<u> </u>
23	Insurance	38,947	38,947		
24	•				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	CONTRACT LABOR SUPPORT	434,920	434,920		
b	EDUCATIONAL	99,101	99,101		
С	401K ADMINISTARTION	77,343	77,343	- ···	
d	PUBLIC RELATIONS	48,514	48,514		
е	TRANSFER TO SMW BLDG FUND	39,061	39,061		
f	All other expenses	73,922	73,922		
25	Total functional expenses. Add lines 1 through 24f	3,708,208	3,708,208		
26	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundamental collectation.				
DAA	fundraising solicitation				Form 990 (2009)

**Balance Sheet** Part X (A) (B) Beginning of year End of vear 300 700 Cash-non-interest bearing 1 2,915,504 3,625,647 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Assets 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 10a 575,423 other basis Complete Part VI of Schedule D 10b 294,822 280,130 280,601 b Less accumulated depreciation 10c 1,280,642 1,242,282 Investments—publicly traded securities Investments—other securities See Part IV, line 11 12 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 29,482 33,938 5,183,168 15 Other assets See Part IV, line 11 15 4,506,058 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 23,547 48,126 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 25 23,547 48,126 Total liabilities. Add lines 17 through 25 26 Net Assets or Fund Balances Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34 4,482,511 5,135,042 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 4,482,511 5,135,042 33 Total net assets or fund balances Total liabilities and net assets/fund balances 4,506,058 5,183,168

Form 990 (2009)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2009)

# SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

SI	HEET METAL WORKERS' LOCAL NO. 2		44-0429770						
Pa	rt I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or A	Accounts. Complete if						
	the organization answered "Yes" to Form 990, I	Part IV, line 6							
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised									
	funds are the organization's property, subject to the organization's exclu	_							
6 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?	prization anawared "Vac" to Far	Yes No						
	rt II Conservation Easements. Complete if the orga		11 990, Part IV, line 7.						
1	Purpose(s) of conservation easements held by the organization (check a	·· · ·	and and area						
	Preservation of land for public use (e g , recreation or pleasure)  Protection of natural habitat	Preservation of an historically imp							
	Preservation of open space	Freservation of certified historic's	liucture						
2	Complete lines 2a through 2d if the organization held a qualified conservation	vation contribution in the form of a concen	vation						
_	easement on the last day of the tax year	valion contribution in the form of a conserv	valion						
	,		Held at the End of the Tax Year						
а	Total number of conservation easements		2a						
b	Total acreage restricted by conservation easements		2b						
c	Number of conservation easements on a certified historic structure inclu	ded in (a)	2c						
d	Number of conservation easements included in (c) acquired after 8/17/0	• •	2d						
3	Number of conservation easements modified, transferred, released, exti		on during						
-	the taxable year ▶	· 3,	- · · · · · · · · · · · · · · · · · · ·						
4	Number of states where property subject to conservation easement is lo	cated ▶							
5	Does the organization have a written policy regarding the periodic monit								
	violations, and enforcement of the conservation easements it holds?		Yes No						
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforci	ng conservation easements during the yea							
	<b>&gt;</b>								
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	onservation easements during the year							
	<b>▶</b> \$								
8	Does each conservation easement reported on line 2(d) above satisfy the	ne requirements of section	<del>_</del> .						
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No						
9	In Part XIV, describe how the organization reports conservation easeme								
	balance sheet, and include, if applicable, the text of the footnote to the c	organization's financial statements that des	scribes						
	the organization's accounting for conservation easements	Historical Transport	Oinsile - Anno An						
Pa	rt III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		Similar Assets.						
1a	If the organization elected, as permitted under SFAS 116, not to report i	n its revenue statement and balance shee	et works of						
	art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of p	public service,						
	provide, in Part XIV, the text of the footnote to its financial statements th	at describes these items							
b	If the organization elected, as permitted under SFAS 116, to report in its	revenue statement and balance sheet wo	orks of art,						
	historical treasures, or other similar assets held for public exhibition, edit	ucation, or research in furtherance of publ	ic service,						
	provide the following amounts relating to these items								
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$						
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$						
2	If the organization received or held works of art, historical treasures, or o	other similar assets for financial gain, prov	ride the						
	following amounts required to be reported under SFAS 116 relating to the	nese items							
а	Revenues included in Form 990, Part VIII, line 1		► \$ <u> </u>						
b	Assets included in Form 990, Part X		<pre>&gt; \$</pre>						

	December of investment (a) Co	at as ather bear	(h) Cook on other	(a) Assumulated	(d) Book					
Pa	art VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.									
4	Describe in Part XIV the intended uses of the organization	Describe in Part XIV the intended uses of the organization's endowment funds								
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?										
	(ii) related organizations				3a(ii)					
	(i) unrelated organizations									

(d) Book value basis (other) (investment) depreciation 1a Land b Buildings c Leasehold improvements d Equipment 280,601 575,423 294,822 e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) 280,601

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 SHEET METAL WORKERS' I		44-0429770	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method of valuation	ala
(including name of security)		Cost or end-of-year market va	aiue
Financial derivatives`			
Closely-held equity interests			
Other			
		<del></del>	
		-	
	<del></del>		
Total, (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 )  Part VIII Investments—Program Related. See Form 99	Dart Y line 13		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market va	alue
		Cost of characters in affect ve	
			<del></del>
<del>-</del>			
	<u>-</u>		
		<u> </u>	
			<u> </u>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, line 15	l		
(a) Description	· · · · · · · · · · · · · · · · · · ·	(b)	Book value
(4) 5551	-	(3/	
<del></del>			
	<del></del>		
	· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>	-
Part X Other Liabilities. See Form 990, Part X, line 25	5.		-
1 (a) Description of liability	(b) Amount		
Federal income taxes		7	
	-	7	
		1	
		7	
		7	
		7	
		1	
		7	
· · · · · · · · · · · · · · · · · · ·		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		1	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organi	zation's financial statemer	nts that reports the	
organization's liability for uncertain tax positions under FIN 48			

Schedule D (F	orm 990) 2009	SHEET	METAL WORKERS'	LOCAL NO. 2	44-0429770	Page <b>5</b>
Part XIV	Suppleme	ntal Informa	ation (continued)			
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**SCHEDULE O** 

(Form 990)

**Supplemental Information to Form 990** 

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

• Attach to Form 990.

Open to Public Inspection

Name of the organization

SHEET METAL WORKERS' LOCAL NO. 2

Employer identification number 44-0429770

Form 990, Part III, Line 4d - All Other Achievements

TO ACHIEVE BETTER WORKING CONDITIONS AND COMPENSATION FOR

MEMBERS.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

THE ORGANIZATIONS MEMBERS CONSIST OF JOURNEYMEN SHEET METAL WORKERS AND APPRENTICES. JOURNEYMEN HAVE VOTING RIGHTS AT MONTHLY MEETINGS AND AT ELECTIONS.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE MEMBERS OF THE LOCAL

UNION FOR A TERM OF THREE YEARS.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
DECISIONS OF THE GOVERNING BODY ARE APPROVED BY THE MEMBERS OF THE LOCAL
UNION AT THEIR MONTHLY MEETINGS.

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters
THE LOCAL UNION FOLLOWS THE POLICIES AND PROCEDURES OUTLINED IN THE
CONSTITUTION OF THE SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION AND THE
BY-LAWS OF THE SHEET METAL WORKERS' INTERNATIONL ASSOCIATION LOCAL UNION
NO. 2.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 ORININAL RETURN IS REVIEWED PRIOR TO BEING SIGNED BY ROBERT ESLINGER,

Name of the organization

SHEET METAL WORKERS' LOCAL NO. 2

Employer identification number 44-0429770

FINANCIAL SECRETARY AND TREASURER.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
THE COMPENSATION LEVELS OF ALL OFFICERS ARE AS OUTLINED IN THE BY-LAWS
OF THE LOCAL UNION.

Form 990, Part VI, Line 15b - Compensation Process for Officers

ALL COMPENSATION LEVELS OF OTHER OFFICERS ARE ALSO OUTLINED IN LOCAL'S

BY-LAWS. THE LOCAL'S OFFICE STAFF COMPENSATION LEVELS ARE

APPROVED BY THE LOCAL'S OFFICERS.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation REQUESTS FOR A COPY OF THE FORM 1024, "APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)", ARE REFERRED TO THE NATIONAL HEADQUARTERS OF THE UNION WHERE IT IS MAINTAINED.

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

▶ See separate instructions.

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 44-0429770 (e), End-of-year assets **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, Inne 33.) (d) Total income (c)
Legal domicile (state
or foreign country) (b) Primary activity SHEET METAL WORKERS' LOCAL NO. (a)Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service Part II Part

(a) Name address and ElN of related organization		(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public charity status	(f) Direct controlling
			or foreign country)		(if section 501(c)(3))	entity
THE APPRENTICE AND JOURNEYMEN						
9703 E. 53RD ST	43-1043501					
RAYTOWN MO 64133		TRAINING	MO	501C5		N/A
SMACNA						
1100 MAIN ST, STE 2323	44-0579756					
KANSAS CITY MO 64105		PROMOTION	MO	501C6		N/A
MO-KAN SHEET METAL WORKERS WELFARE						
2902 BLUE RIDGE BLVD	44-0567087					
KANSAS CITY MO 64129		INSURANCE	MO	50109		N/A
SMW BUILDING FUND						
2902 BLUE RIDGE BLVD	43-1223980					
KANSAS CITY MO 64129		BUILDING	MO	501C2		N/A
SHEET METAL WORKERS' INTERNATIONAL						
1750 NEW YORK AVENUE, NW - 6TH FLR	52-1557564					
WASHINGTON DC 20006		INTL ASSOC	20	501C5		N/A

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

Schedule R (Form 990) 2009

General or managing partner?	ritage rship
(i)  ' Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) Percentage ownership
	(g) Share of end-of-year assets
(h) Disproportionate alloc ? Yes No	TO SE Pue
Share of end-of-year assets	poration of itust (Complete in the organization answered res to form 390, Part IV, Ireated as a corporation or trust during the tax year.)  (c) (d) (e) (f) (g) (h) (g) (h) (h) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h
(d)  (d)  (e)  (f)  (iii)  (f)  (f)  (f)  (f)  (f)	ust during the ta  (e)  Type of entity (C corp. S corp. or trust)
Predominal tire (e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Direct controlling entity
(d)  (d)  (entity  or  ry)	c) Legal domicile (state or foreign country)
(c) Legal domicile (state or foreign country)	as a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast and a cast a cast a cast and a cast a cast a cast a cast a cast a cast a cast a cast a cast a
Primary activity	Primary activity
Name, address, and EIN of Primary activity Legal related organization organization country)  Country)  Country)	Ine 34 because it had one or more related organizations to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state o
	Part IV

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SHEET METAL WORKERS' LOCAL NO. 2

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) Part V

Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule	or IV of this schedule		Yes	2
1 During the tax year, did the organization engage in al	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	-		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	rent from a controlled entity		, 1a	×
b Gift, grant, or capital contribution to other organization(s)	00(\$)		4	×
c Gift grant, or capital contribution from other organization(s)	ration(s)		10	×
	nn(e)		10	×
				<b>&gt;</b>
<ul> <li>Loans or loan guarantees by other organization(s)</li> </ul>			<u>е</u>	¢
f Sale of assets to other organization(s)			1,	×
g Purchase of assets from other organization(s)			19	×
h Exchange of assets			두	×
i Lease of facilities, equipment, or other assets to other organization(s)	ner organization(s)		<b>;=</b>	×
j Lease of facilities, equipment, or other assets from other organization(s)	other organization(s)		i,	
k Performance of services or membership or fundraising solicitations for other organization(s)	ing solicitations for other organization(s)		¥	×
Performance of services or membership or fundraising solicitations by other organ	sing solicitations by other organization(s)		= {	×
	er assets		E,	<b>(</b>  ;
n Sharing of paid employees			- -	<b>ب</b>
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>	ses		10 X	_
p Reimbursement paid by other organization for expenses	inses		d X	1
<ul> <li>q Other transfer of cash or property to other organization(s)</li> </ul>	lion(s)		19	×
Other transfer of cash or property from other organization(s)     If the answer to any of the above is "yes " see the instructor."	Other transfer of cash or property from other organization(s)	thresholds	1.	<u> </u>
1		200	3	
	(a) Name of other organization	Transaction Am type (a-r)	(c) Amount involved	
SMACINE (1)	4	ρ	. 67	792
		la la	1	
(2) THE AP	APPRENTICE AND JOURNEYMEN TRAIN	Ω	12	12,500
(3) SMW BU	SMW BUILDING FUND	Ĺ	100	100,364
(4) SMW BU	SMW BUILDING FUND	0	39	39,061
(5) SMW BU	SMW BUILDING FUND	ď	43	, 943
(6) SMWIA		Q.	37	37,308
		Schedule	Schedule R (Form 990) 2009	9002 (

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SHEET METAL WORKERS' LOCAL NO. 2

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

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

5 8	9 N		·						60
(h) General or managing partner?			 		· ·				90) 20
<u> </u>	Yes			<u>.</u>		<u>-</u> <u>-</u>	_		 отп 9
(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)									Schedule R (Form 990) 2009
ionate ins?	No	 ·							
(f) Disproportionate allocations?	Yes								
(e) Share of end-of-year assets	1								
rtners n 3)	Š						-		
(d) Are all partners section 501(c)(3) organizations?	Yes							-	
(c) Legal domicile (state or foreign country)									
Lega (state cc							:		
(b) Primary activity									
(a) (b) Name, address, and EIN of entity Primary a									