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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2009**Open to Public
Inspection****A For the 2009 calendar year, or tax year beginning January 1st, 2009, and ending December 31st, 2009****B Check if applicable:**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type
See
Specific
Instruc-
tions**C Name of organization****USW INTERNATIONAL UNION, LOCAL 11-574**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

4516 Carmel dr

City or town, state or country, and ZIP + 4

Cheyenne, WY 82009**D Employer identification number****83-0182697****E Telephone number****307 635-5290****F Group Exemption**Number ▶ **0260**

* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method ☒ Cash ☐ Accrual
Other (specify) ▶**I Website:** ▶**J Tax-exempt status** (check only one) — ☒ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H Check** ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K Check** ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **43,894******Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	0
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	30,518
	4	Investment income	4	10,071
	5a	Gross amount from sale of assets other than inventory	5a	0
	b	Less: cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G. If any amount is from gaming, check here ☐)		
	a	Gross revenue (not including sales of contributions reported on line 1)	6a	2705
	b	Less: direct expenses other than fundraising expenses	6b	0
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	2705	
7a	Gross sales of inventory, less returns and allowances	7a	0	
b	Less: cost of goods sold	7b	0	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8	Other revenue (describe ▶)	8	600	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	43,894	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	0
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	21,891
	13	Professional fees and other payments to independent contractors	13	7177
	14	Occupancy, rent, utilities, and maintenance	14	5925
	15	Printing, publications, postage, and shipping	15	0
	16	Other expenses (describe ▶ donation)	16	4409
17	Total expenses. Add lines 10 through 16	17	39,402	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	4492
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	139,399
	20	Other changes in net assets or fund balances (attach explanation)	20	0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	143,891

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	139,399	143,891
23 Land and buildings	23	
24 Other assets (describe ▶)	24	
25 Total assets	25	
26 Total liabilities (describe ▶)	26	
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	139,399	143,891

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2009)

SCANNED APR 19 2010

p12

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28	"Local Union enforced collective bargaining agreement to better working conditions of the Local union and provide representation to its members."		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	28a	0
29			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	29a	0
30			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	30a	0
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	31a	0
32	Total program service expenses (add lines 28a through 31a) ▶	32	0

[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b 0	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a N/A	
b Gross receipts, included on line 9, for public use of club facilities	39b N/A	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► <u>N/A</u> ; section 4912 ► <u>N/A</u> ; section 4955 ► <u>N/A</u>		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		N/A
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ► <u>N/A</u>		
42a The organization's books are in care of ► <u>Gary De Mello Secretary-Treasurer</u> Telephone no. ► <u>307 635-5290</u> Located at ► <u>4516 CARMEL DR CHEYENNE WY</u> ZIP + 4 ► <u>82009</u>		
b 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)?	42b	✓
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 Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ► _____		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	☐
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	☐	☒
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	☐	☒
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	☐	☒
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	☐	☒
b	If "Yes," was the related organization a section 527 organization?	49b	☐	☒
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."			

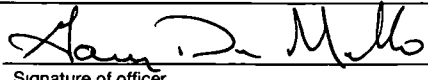
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		3/20/10 Date	
Paid Preparer's Use Only	 Type or print name and title		Sec/Treasurer	
	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Phone no
May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No				

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.)

Yes ☒ No ☐

56. ADDITIONAL INFORMATION	
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PRESIDENT
(If other title, see instructions.)

58. SIGNED Stanley D. Mills

3/20/10 Date 307-635-5290 Telephone Number

COMPLETE ITEMS 10 THROUGH 23

FILE NUMBER: 007-702

10. During the reporting period did the labor organization have a 'subsidiary organization' as defined in section X of the instructions? Yes ☐ No ☒

11. During the reporting period did the labor organization create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? Yes ☐ No ☒

12. During the reporting period did the labor organization have a political action committee (PAC) fund? Yes ☐ No ☒

13. During the reporting period did the labor organization acquire or dispose of any assets in any manner other than by purchase or sale? Yes ☐ No ☒

14. During the reporting period did the labor organization have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? Yes ☐ No ☒

15. During the reporting period did the labor organization discover any loss or shortage of funds or other assets? (Answer "Yes" even if there has been repayment or recovery.) Yes ☐ No ☒

16. During the reporting period did the labor organization have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? Yes ☐ No ☒

17. During the reporting period did the labor organization pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? Yes ☐ No ☒

18. During the reporting period did the labor organization have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise? Yes ☐ No ☒

19. How many members did your organization have at the end of the reporting period?

20. What is the maximum amount recoverable under your organization's fidelity bond, for a loss caused by any officer or employee of your organization?

21. During the reporting period did the labor organization have any changes in its constitution and bylaws, other than the rates of dues and fees, or in practices/procedures listed in the instructions? (If the constitution and bylaws or practices/procedures have changed, see the instructions.) Yes ☐ No ☒

22. What is the date of your organization's next regular election of officers?

23. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate applies for any line.)

Rates of Dues and Fees				
Dues/Fees	Amount	Unit	Minimum	Maximum
(a) Regular Dues/Fees	48.94	per		
(b) Initiation Fees	10.00	per		
(c) Transfer Fees		per		
(d) Work Permits		per		

If the answer to any of the above questions is "Yes", provide details in Item 56 (Additional Information) as explained in the instructions for each item.

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER:

007-702

(A) Name		(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.)		(C) Status *	Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title	(Enter title of officer, such as PRESIDENT or TREASURER.)						
1. Last Name	First Name	Middle Initial	Status				
Bocanegra	Felix		C		\$1,185	\$1,465	\$2,650
President							
2. Last Name	First Name	Middle Initial	Status				
De Mello	Gary	B	C		\$4,200	\$2,901	\$7,101
Title							
Sec/Treasurer							
3. Last Name	First Name	Middle Initial	Status				
Elasser	Kevin		C		\$0	\$0	\$0
Title							
Vice-President							
4. Last Name	First Name	Middle Initial	Status				
Day	Jim		C		\$0	\$0	\$0
Title							
Trustee							
5. Last Name	First Name	Middle Initial	Status				
Kemnitz	Chris		C		\$0	\$0	\$0
Title							
Trustee							
6. Last Name	First Name	Middle Initial	Status				
Ruud	Kevin		C		\$0	\$0	\$0
Title							
Trustee							
7. Last Name	First Name	Middle Initial	Status				
trujillo	greg		C		\$0	\$0	\$0
Title							
Recording/sec							
8. Totals from additional pages (if any)					\$0	\$0	\$0
9. Totals of Lines 1 through 8					\$5,385	\$4,366	\$9,751
						10. Less Deductions	\$640
						11. Net Disbursements	\$9,111

* Code for (C) Status: past officer – P, continuing officer – C, new officer during the reporting period – N.
 The Total from Line 11 will be entered in Item 45 (If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER 007-702

STATEMENT A ASSETS AND LIABILITIES					
Item	ASSETS	Start of Reporting Period (A)	End of Reporting Period (B)	LIABILITIES Item	Start of Reporting Period (C) End of Reporting Period (D)
25. Cash		\$139,399	\$143,891	32. Accounts Payable	\$0 \$0
26. Loans Receivable		\$0	\$0	33. Loans Payable	\$0 \$0
27. U.S. Treasury Securities		\$0	\$0	34. Mortgages Payable	\$0 \$0
28. Investments		\$0	\$0	35. Other Liabilities	\$0 \$0
29. Fixed Assets		\$0	\$0	36. TOTAL LIABILITIES	\$0 \$0
30. Other Assets		\$0	\$0		
31. TOTAL ASSETS		\$139,399	\$143,891	37. NET ASSETS (Item 31 less Item 36)	\$139,399 \$143,891

STATEMENT B RECEIPTS AND DISBURSEMENTS					
Item	CASH RECEIPTS	AMOUNT	CASH DISBURSEMENTS Item	AMOUNT	
38. Dues		\$30,518	45. To Officers (from Item 24)		\$9,111
39. Per Capita Tax		\$0	46. To Employees (less deductions)		\$10,116
40. Fees, Fines, Assessments & Work Permits		\$0	47. Per Capita Tax		\$3,802
41. Interest & Dividends		\$71	48. Office & Administrative Expense		\$5,925
42. Sale of Investments & Fixed Assets		\$0	49. Professional Fees		\$1,300
43. Other Receipts		\$13,305	50. Benefits		\$0
44. TOTAL RECEIPTS		\$43,894	51. Contributions, Gifts & Grants		\$4,409
If total receipts reported in Item 44 are \$250,000 or more, your organization must file Form LM-2 instead of this form.				52. Purchase of Investments & Fixed Assets	\$0
				53. Loans Made	\$0
				54. Other Disbursements	\$4,739
				55. TOTAL DISBURSEMENTS	\$39,402

56. ADDITIONAL INFORMATION

FILE NUMBER

007-702