



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**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 year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010****B** Check if  
applicable

- ☐ Address  
change
- ☐ Name  
change
- ☐ Initial  
return
- ☐ Termin-  
ated
- ☒ Amend-  
ed return
- ☐ Applica-  
tion  
pending

Please  
use IRS  
label or  
print or  
typeSee  
Specific  
Instruc-  
tions**C** Name of organization**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Doing Business As

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

**750 DORCHESTER AVE**

Room/suite

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

**BOSTON, MA 02125****F** Name and address of principal officer. **MARK ERlich****750 DORCHESTER AVE., BOSTON, MA 02125****D** Employer identification number**04-3322535****E** Telephone number**(800) 275-6200****G** Gross receipts \$ **23,450,773.****H(a)** Is this a group return  
for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No  
If "No," attach a list. (see instructions)**H(c)** Group exemption number ▶**I** Tax-exempt status ☒ 501(c) ( 5 ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **N/A****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1996** **M** State of legal domicile: **MA****Part I Summary****1** Briefly describe the organization's mission or most significant activities: **ASSISTING IN CONTRACT  
NEGOTIATIONS****2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets**3** Number of voting members of the governing body (Part VI, line 1a)**3** **13****4** Number of independent voting members of the governing body (Part VI, line 1b)**4** **1****5** Total number of employees (Part V, line 2a)**5** **107****6** Total number of volunteers (estimate if necessary)**6** **0****7a** Total gross unrelated business revenue from Part VIII, column (C), line 12**7a** **0.****b** Net unrelated business taxable income from Form 990-T, line 34**7b** **0.****8** Contributions and grants (Part VIII, line 1h)**9** Program service revenue (Part VIII, line 2g)**10** Investment income (Part VIII, column (A), lines 3, 4, and 7d)**11** Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)**12** Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)**13** Grants and similar amounts paid (Part IX, column (A), lines 1-3)**14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25)**17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)**18** Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)**19** Revenue less expenses. Subtract line 18 from line 12

Prior Year

Current Year

**22,870,983.** **19,589,655.****523,559.** **73,122.****805,739.** **1,788,611.****24,200,281.** **21,451,388.****128,741.****15,668,616.** **14,051,946.****8,734,987.** **5,765,129.****24,403,603.** **19,945,816.****-203,322.** **1,505,572.**

Beginning of Current Year

End of Year

**29,678,553.** **37,664,370.****4,478,745.** **10,335,893.****25,199,808.** **27,328,477.**Revenue  
Expenses  
Net Assets or  
Fund Balances**Part II Signature Block**Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct,  
and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.Sign  
Here

Signature of officer

Date

**MARK ERlich, EXECUTIVE SECRETARY**

Type or print name and title

Paid  
Preparer's  
Use OnlyPreparer's  
signature**KENNETH DAVIN**

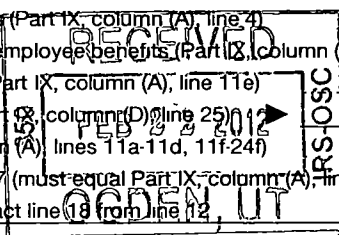
Date

**02/14/12**Check if  
self-  
employed ☐Preparer's identifying number  
(see instructions)Firm's name (or  
yours if  
self-employed),  
address, and  
ZIP + 4**KEVIN P. MARTIN & ASSOCIATES, P.C.  
10 FORBES WEST  
BRAINTREE, MA 02184**

EIN ▶

Phone no. ▶ **(781) 380-3520**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ NoSCANNED MAR 14 2012  
Activities & Governance

20 2

NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS

Form 990 (2009)

04-3322535 Page 2

**Part III** Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

**ASSISTING IN CONTRACT NEGOTIATIONS**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**ASSISTING IN CONTRACT NEGOTIATIONS, ARBITRATION OF CASES, AND  
CONDUCTING ALL OTHER NECESSARY ACTIVITIES TO ENSURE PROPER WORKING  
CONDITIONS AND ECONOMIC ADVANTAGES FOR ITS AFFILIATED LOCAL UNIONS.**

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses **▶** \$

Form 990 (2009)

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page **3**

**Part IV Checklist of Required Schedules**

|                                                                                                                                                                                                                                                                     | Yes      | No       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?<br><i>If "Yes," complete Schedule A</i>                                                                                                                |          | <b>X</b> |
| <b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?                                                                                                                                                                             |          | <b>X</b> |
| <b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>                                                                | <b>X</b> |          |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>                                                                                                                  |          |          |
| <b>5</b> <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>                                        |          | <b>X</b> |
| <b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>  |          | <b>X</b> |
| <b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>                                      |          | <b>X</b> |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>                                                                                                   |          | <b>X</b> |
| <b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | <b>X</b> |          |
| <b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>                                                                                       |          | <b>X</b> |
| <b>11</b> Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>                                                                                                      | <b>X</b> |          |
| • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>                                                                                                                       |          |          |
| • 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? <i>If "Yes," complete Schedule D, Part VII.</i>                                                   |          |          |
| • 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? <i>If "Yes," complete Schedule D, Part VIII.</i>                                                   |          |          |
| • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>                                                                      |          |          |
| • Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>                                                                                                                                     |          |          |
| • 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? <i>If "Yes," complete Schedule D, Part X.</i>                      |          |          |
| <b>12</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>                                                                                           |          | <b>X</b> |
| <b>12A</b> Was the organization included in consolidated, independent audited financial statements for the tax year?<br><i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>                                                                 | <b>X</b> |          |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>                                                                                                                                                  |          | <b>X</b> |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?                                                                                                                                                              |          | <b>X</b> |
| <b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>                             |          | <b>X</b> |
| <b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>                                      |          | <b>X</b> |
| <b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>                                          |          | <b>X</b> |
| <b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>                                                         |          | <b>X</b> |
| <b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>                                                                     |          | <b>X</b> |
| <b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>                                                                                               |          | <b>X</b> |
| <b>20</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>                                                                                                                                                                  |          | <b>X</b> |

Form **990** (2009)

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page 4

**Part IV Checklist of Required Schedules** (continued)

|                                                                                                                                                                                                                                                                                                 | Yes      | No       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| <b>21</b> 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 1? <i>If "Yes," complete Schedule I, Parts I and II</i>                                                               | <b>X</b> |          |
| <b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i>                                                                                | <b>X</b> |          |
| <b>23</b> 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," complete Schedule J</i>                           | <b>X</b> |          |
| <b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> |          | <b>X</b> |
| <b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                                                                                                                                                                                    |          |          |
| <b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?                                                                                                                                           |          |          |
| <b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                                                                                                                                                                              |          |          |
| <b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>                                                                          |          |          |
| <b>25b</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? <i>If "Yes," complete Schedule L, Part I</i>           |          |          |
| <b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i>                                         |          | <b>X</b> |
| <b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i>                 |          | <b>X</b> |
| <b>28</b> 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)                                                                                         |          |          |
| <b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>                                                                                                                                                                       |          | <b>X</b> |
| <b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>                                                                                                                                                    |          | <b>X</b> |
| <b>28c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i>                                            |          | <b>X</b> |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>                                                                                                                                                                       |          | <b>X</b> |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>                                                                                                       |          | <b>X</b> |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations?<br><i>If "Yes," complete Schedule N, Part I</i>                                                                                                                                                          |          | <b>X</b> |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>                                                                                                                                           |          | <b>X</b> |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>                                                                                           | <b>X</b> |          |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity?<br><i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>                                                                                                                                           | <b>X</b> |          |
| <b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)?<br><i>If "Yes," complete Schedule R, Part V, line 2</i>                                                                                                                                     | <b>X</b> |          |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?<br><i>If "Yes," complete Schedule R, Part V, line 2</i>                                                                                             |          |          |
| <b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i>                                                  |          | <b>X</b> |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?                                                                                                                                                                         |          | <b>X</b> |

**Note.** All Form 990 filers are required to complete Schedule O

Form 990 (2009)

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page 5

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

|            |                                                                                                                                                                                                                                                                              | Yes | No |
|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1a</b>  | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.                                                                                                                                    | 8   |    |
| <b>1b</b>  | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.                                                                                                                                                                                             | 0   |    |
| <b>1c</b>  | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?                                                                                                                     |     |    |
| <b>2a</b>  | 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.                                                                                               | 107 |    |
| <b>2b</b>  | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)                              | X   |    |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?                                                                                                                                                         |     | X  |
| <b>3b</b>  | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.                                                                                                                                                                            |     |    |
| <b>4a</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)?                                   |     | X  |
| <b>4b</b>  | If "Yes," enter the name of the foreign country: _____<br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.                                                                                  |     |    |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?                                                                                                                                                                        |     | X  |
| <b>5b</b>  | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                                                                                                                                             |     | X  |
| <b>5c</b>  | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?                                                                                                                             |     |    |
| <b>6a</b>  | 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?                                                                                                  |     | X  |
| <b>6b</b>  | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?                                                                                                                                |     |    |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>                                                                                                                                                                                         |     |    |
| <b>7a</b>  | 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?                                                                                                                              |     | X  |
| <b>7b</b>  | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                                                                                                                                                              |     |    |
| <b>7c</b>  | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?                                                                                                                                         |     | X  |
| <b>7d</b>  | If "Yes," indicate the number of Forms 8282 filed during the year.                                                                                                                                                                                                           |     |    |
| <b>7e</b>  | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                                            |     |    |
| <b>7f</b>  | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                                                 |     |    |
| <b>7g</b>  | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?                                                                                                                                                                   |     |    |
| <b>7h</b>  | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?                                                                                                                                                        |     |    |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? |     |    |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>                                                                                                                                                                                                             |     |    |
| <b>9a</b>  | Did the organization make any taxable distributions under section 4966?                                                                                                                                                                                                      |     |    |
| <b>9b</b>  | Did the organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                                                                       |     |    |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter                                                                                                                                                                                                                                |     |    |
| <b>10a</b> | Initiation fees and capital contributions included on Part VIII, line 12.                                                                                                                                                                                                    |     |    |
| <b>10b</b> | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.                                                                                                                                                                                 |     |    |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter                                                                                                                                                                                                                               |     |    |
| <b>11a</b> | Gross income from members or shareholders.                                                                                                                                                                                                                                   |     |    |
| <b>11b</b> | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).                                                                                                                                                 |     |    |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?                                                                                                                                                            |     |    |
| <b>12b</b> | If "Yes," enter the amount of tax-exempt interest received or accrued during the year.                                                                                                                                                                                       |     |    |

Form 990 (2009)

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

|                                                                                                                                                                                                                              | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1a</b> Enter the number of voting members of the governing body                                                                                                                                                           | 13  |    |
| <b>1b</b> Enter the number of voting members that are independent                                                                                                                                                            | 1   |    |
| <b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?                                               |     | X  |
| <b>3</b> 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? |     | X  |
| <b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?                                                                                               |     | X  |
| <b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets?                                                                                                             |     | X  |
| <b>6</b> Does the organization have members or stockholders?                                                                                                                                                                 | X   |    |
| <b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?                                                                                        | X   |    |
| <b>7b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?                                                                                                            |     | X  |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:                                                                                   |     |    |
| <b>a</b> The governing body?                                                                                                                                                                                                 | X   |    |
| <b>b</b> Each committee with authority to act on behalf of the governing body?                                                                                                                                               |     | X  |
| <b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O        |     | X  |

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

|                                                                                                                                                                                                                                                                                                         | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>10a</b> Does the organization have local chapters, branches, or affiliates?                                                                                                                                                                                                                          | X   |    |
| <b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?                                                                             | X   |    |
| <b>11</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                            | X   |    |
| <b>11A</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.                                                                                                                                                                                                |     |    |
| <b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13                                                                                                                                                                                                     |     | X  |
| <b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                                                                                                                                              |     |    |
| <b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done                                                                                                                                             |     |    |
| <b>13</b> Does the organization have a written whistleblower policy?                                                                                                                                                                                                                                    |     | X  |
| <b>14</b> Does the organization have a written document retention and destruction policy?                                                                                                                                                                                                               |     | X  |
| <b>15</b> 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?                                                                          |     |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official                                                                                                                                                                                                                         |     | X  |
| <b>b</b> Other officers or key employees of the organization                                                                                                                                                                                                                                            |     | X  |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)                                                                                                                                                                                                                     |     |    |
| <b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?                                                                                                                                        |     | X  |
| <b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? |     |    |

**Section 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    ☒ 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: **MARK ERLICH - (800) 275-6200**  
**750 DORCHESTER AVE., BOSTON, MA 02125**

**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."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

| (A)<br>Name and Title              | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position<br>(check all that apply) |                       |         |              |                              |        | (D)<br>Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | (F)<br>Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
|------------------------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
|                                    |                                        | Individual trustee or director            | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                                     |                                                                                       |                                                                                                                    |
| CHARLES APPLEBY<br>EXEC. COMMITTEE | 40.00                                  | X                                         |                       |         |              |                              |        | 89,750.                                                                             | 0.                                                                                    | 58,088.                                                                                                            |
| BRYAN BOUCHARD<br>EXEC. COMMITTEE  | 40.00                                  | X                                         |                       |         |              |                              |        | 97,131.                                                                             | 0.                                                                                    | 56,153.                                                                                                            |
| GARY DECOSTA<br>EXEC. COMMITTEE    | 40.00                                  | X                                         |                       |         |              |                              |        | 96,584.                                                                             | 0.                                                                                    | 61,889.                                                                                                            |
| MARK ERLICH<br>SECRETARY/TREASURER | 40.00                                  | X                                         |                       | X       |              |                              |        | 191,626.                                                                            | 0.                                                                                    | 77,836.                                                                                                            |
| TOM FLYNN<br>EXEC. COMMITTEE       | 40.00                                  | X                                         |                       |         |              |                              |        | 121,078.                                                                            | 0.                                                                                    | 65,385.                                                                                                            |
| GLENN MARSHALL<br>EXEC. COMMITTEE  | 40.00                                  | X                                         |                       |         |              |                              |        | 96,543.                                                                             | 0.                                                                                    | 59,259.                                                                                                            |
| GEORGE MEADOWS<br>TRUSTEE          | 40.00                                  | X                                         |                       |         |              |                              |        | 87,784.                                                                             | 0.                                                                                    | 57,928.                                                                                                            |
| DAVE PALMISCIANO<br>TRUSTEE        | 40.00                                  | X                                         |                       |         |              |                              |        | 118,602.                                                                            | 0.                                                                                    | 67,236.                                                                                                            |
| JOE POWER<br>CONDUCTOR             | 40.00                                  | X                                         |                       | X       |              |                              |        | 93,181.                                                                             | 0.                                                                                    | 60,905.                                                                                                            |
| BRIAN RICHARDSON<br>TRUSTEE        | 40.00                                  | X                                         |                       |         |              |                              |        | 121,734.                                                                            | 0.                                                                                    | 64,149.                                                                                                            |
| RICHARD MONARCA<br>PRESIDENT       | 2.00                                   | X                                         |                       | X       |              |                              |        | 0.                                                                                  | 0.                                                                                    | 0.                                                                                                                 |
| BILL HOLMES<br>VICE PRESIDENT      | 40.00                                  | X                                         |                       | X       |              |                              |        | 92,775.                                                                             | 0.                                                                                    | 63,189.                                                                                                            |
| JACK DONAHUE<br>WARDEN             | 40.00                                  | X                                         |                       | X       |              |                              |        | 92,546.                                                                             | 0.                                                                                    | 61,227.                                                                                                            |
| ELIZABETH CONWAY<br>CFO            | 40.00                                  |                                           |                       | X       |              |                              |        | 87,018.                                                                             | 0.                                                                                    | 44,148.                                                                                                            |
| RICHARD DEAN<br>EXEC. COMMITTEE    | 40.00                                  |                                           |                       |         |              |                              | X      | 81,085.                                                                             | 0.                                                                                    | 56,066.                                                                                                            |
|                                    |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                                    |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page **8**

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

| (A)<br>Name and title | (B)<br>Average<br>hours<br>per<br>week | (C)<br>Position<br>(check all that apply) |                       |         |              |                              |        | (D)<br>Reportable<br>compensation<br>from<br>the<br>organization<br>(W-2/1099-MISC) | (E)<br>Reportable<br>compensation<br>from related<br>organizations<br>(W-2/1099-MISC) | (F)<br>Estimated<br>amount of<br>other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
|-----------------------|----------------------------------------|-------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|
|                       |                                        | Individual trustee or director            | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
|                       |                                        |                                           |                       |         |              |                              |        |                                                                                     |                                                                                       |                                                                                                                    |
| <b>1b Total</b>       |                                        |                                           |                       |         |              |                              |        | <b>1,467,437.</b>                                                                   | <b>0.</b>                                                                             | <b>853,458.</b>                                                                                                    |

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **4**

|                                                                                                                                                                                                                                       | Yes      | No       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| <b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual                                        | <b>X</b> |          |
| <b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | <b>X</b> |          |
| <b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person                                     |          | <b>X</b> |

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| (A)<br>Name and business address                       | (B)<br>Description of services | (C)<br>Compensation |
|--------------------------------------------------------|--------------------------------|---------------------|
| KRAKOW & SOURIS LLC<br>225 FRIEND ST, BOSTON, MA 02114 | LEGAL                          | 313,160.            |
|                                                        |                                |                     |
|                                                        |                                |                     |
|                                                        |                                |                     |
|                                                        |                                |                     |

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **1**

Form **990** (2009)

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page **9**

**Part VIII Statement of Revenue**

|                                                                   |                                         |                                                                                                                                  |                                                                                 | (A)<br>Total revenue | (B)<br>Related or<br>exempt function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections 512,<br>513, or 514 |          |
|-------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------------------|-------------------------------------------------|-----------------------------------------|------------------------------------------------------------------------------|----------|
| <b>Contributions, gifts, grants<br/>and other similar amounts</b> | 1 a                                     | Federated campaigns                                                                                                              | 1a                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | b                                       | Membership dues                                                                                                                  | 1b                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | c                                       | Fundraising events                                                                                                               | 1c                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | d                                       | Related organizations                                                                                                            | 1d                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | e                                       | Government grants (contributions)                                                                                                | 1e                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | f                                       | All other contributions, gifts, grants, and<br>similar amounts not included above                                                | 1f                                                                              |                      |                                                 |                                         |                                                                              |          |
|                                                                   | g                                       | Noncash contributions included in lines 1a-1f \$                                                                                 |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | h                                       | <b>Total.</b> Add lines 1a-1f                                                                                                    |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | <b>Program Service<br/>Revenue</b>      |                                                                                                                                  |                                                                                 |                      | <b>Business Code</b>                            |                                         |                                                                              |          |
| 2 a                                                               |                                         | <b>MEMBERSHIP DUES &amp; ASSE</b>                                                                                                | 900099                                                                          | 18,177,471.          | 18,177,471.                                     |                                         |                                                                              |          |
| b                                                                 |                                         | <b>DEVELOPMENT FEES</b>                                                                                                          | 900099                                                                          | 1500000.             | 1500000.                                        |                                         |                                                                              |          |
| c                                                                 |                                         | <b>INT INCOME PROG N/R</b>                                                                                                       | 900099                                                                          | 327,094.             | 327,094.                                        |                                         |                                                                              |          |
| d                                                                 |                                         | <b>EARNING PROG REL INVST</b>                                                                                                    | 900099                                                                          | -414,910.            | -414,910.                                       |                                         |                                                                              |          |
| e                                                                 |                                         |                                                                                                                                  |                                                                                 |                      |                                                 |                                         |                                                                              |          |
| f                                                                 |                                         | All other program service revenue                                                                                                |                                                                                 |                      |                                                 |                                         |                                                                              |          |
| g                                                                 |                                         | <b>Total.</b> Add lines 2a-2f                                                                                                    |                                                                                 |                      | 19,589,655.                                     |                                         |                                                                              |          |
| <b>Other Revenue</b>                                              |                                         | 3                                                                                                                                | Investment income (including dividends, interest, and<br>other similar amounts) |                      | 197,952.                                        |                                         |                                                                              | 197,952. |
|                                                                   | 4                                       | Income from investment of tax-exempt bond proceeds                                                                               |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | 5                                       | Royalties                                                                                                                        |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | 6 a                                     | (i) Real                                                                                                                         |                                                                                 | (ii) Personal        |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | 497510.                                                                                                                          |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | b Less rental expenses                                                                                                           |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | c Rental income or (loss)                                                                                                        |                                                                                 | 497510.              |                                                 |                                         |                                                                              |          |
|                                                                   | d                                       | Net rental income or (loss)                                                                                                      |                                                                                 | 497,510.             |                                                 |                                         | 497,510.                                                                     |          |
|                                                                   | 7 a                                     | (i) Securities                                                                                                                   |                                                                                 | (ii) Other           |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | 1,750,000.                                                                                                                       |                                                                                 | 124555.              |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | b Less: cost or other basis<br>and sales expenses                                                                                |                                                                                 | 1,825,366.           | 174019.                                         |                                         |                                                                              |          |
|                                                                   |                                         | c Gain or (loss)                                                                                                                 |                                                                                 | -75366.              | -49464.                                         |                                         |                                                                              |          |
|                                                                   | d                                       | Net gain or (loss)                                                                                                               |                                                                                 | -124,830.            |                                                 |                                         | -124830.                                                                     |          |
|                                                                   | 8 a                                     | Gross income from fundraising events (not<br>including \$ _____ of<br>contributions reported on line 1c) See<br>Part IV, line 18 |                                                                                 | a                    |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | b Less direct expenses                                                                                                           |                                                                                 | b                    |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | c Net income or (loss) from fundraising events                                                                                   |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | 9 a                                     | Gross income from gaming activities. See<br>Part IV, line 19                                                                     |                                                                                 | a                    |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | b Less direct expenses                                                                                                           |                                                                                 | b                    |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | c Net income or (loss) from gaming activities                                                                                    |                                                                                 |                      |                                                 |                                         |                                                                              |          |
|                                                                   | 10 a                                    | Gross sales of inventory, less returns<br>and allowances                                                                         |                                                                                 | a                    |                                                 |                                         |                                                                              |          |
|                                                                   |                                         | b Less cost of goods sold                                                                                                        |                                                                                 | b                    |                                                 |                                         |                                                                              |          |
| c Net income or (loss) from sales of inventory                    |                                         |                                                                                                                                  |                                                                                 |                      |                                                 |                                         |                                                                              |          |
| <b>Miscellaneous Revenue</b>                                      |                                         |                                                                                                                                  | <b>Business Code</b>                                                            |                      |                                                 |                                         |                                                                              |          |
| 11 a                                                              | <b>EXPENSE REIMBURSEMENTS</b>           | 900099                                                                                                                           | 603,787.                                                                        | 603,787.             |                                                 |                                         |                                                                              |          |
| b                                                                 | <b>DEVELOPMENT COST REIMB</b>           | 900099                                                                                                                           | 584,388.                                                                        | 584,388.             |                                                 |                                         |                                                                              |          |
| c                                                                 | <b>SETTLEMENT &amp; APPRAISAL</b>       | 900099                                                                                                                           | 102,926.                                                                        | 102,926.             |                                                 |                                         |                                                                              |          |
| d                                                                 | All other revenue                       |                                                                                                                                  |                                                                                 |                      |                                                 |                                         |                                                                              |          |
| e                                                                 | <b>Total.</b> Add lines 11a-11d         |                                                                                                                                  |                                                                                 | 1291101.             |                                                 |                                         |                                                                              |          |
| 12                                                                | <b>Total revenue.</b> See instructions. |                                                                                                                                  |                                                                                 | 21,451,388.          | 20,880,756.                                     | 0.                                      | 570,632.                                                                     |          |

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page 10

**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).**

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.                                                                                                                                                     | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| <b>1</b> Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21                                                                                                                             | 10,355.               |                                 |                                        |                             |
| <b>2</b> Grants and other assistance to individuals in the U S See Part IV, line 22                                                                                                                                                | 118,386.              |                                 |                                        |                             |
| <b>3</b> Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16                                                                                                  |                       |                                 |                                        |                             |
| <b>4</b> Benefits paid to or for members                                                                                                                                                                                           |                       |                                 |                                        |                             |
| <b>5</b> Compensation of current officers, directors, trustees, and key employees                                                                                                                                                  | 2,183,011.            |                                 |                                        |                             |
| <b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)                                                                             |                       |                                 |                                        |                             |
| <b>7</b> Other salaries and wages                                                                                                                                                                                                  | 6,550,897.            |                                 |                                        |                             |
| <b>8</b> Pension plan contributions (include section 401(k) and section 403(b) employer contributions)                                                                                                                             | 3,419,352.            |                                 |                                        |                             |
| <b>9</b> Other employee benefits                                                                                                                                                                                                   | 1,261,748.            |                                 |                                        |                             |
| <b>10</b> Payroll taxes                                                                                                                                                                                                            | 636,938.              |                                 |                                        |                             |
| <b>11</b> Fees for services (non-employees)                                                                                                                                                                                        |                       |                                 |                                        |                             |
| <b>a</b> Management                                                                                                                                                                                                                |                       |                                 |                                        |                             |
| <b>b</b> Legal                                                                                                                                                                                                                     | 351,141.              |                                 |                                        |                             |
| <b>c</b> Accounting                                                                                                                                                                                                                | 16,887.               |                                 |                                        |                             |
| <b>d</b> Lobbying                                                                                                                                                                                                                  |                       |                                 |                                        |                             |
| <b>e</b> Professional fundraising services. See Part IV, line 17                                                                                                                                                                   |                       |                                 |                                        |                             |
| <b>f</b> Investment management fees                                                                                                                                                                                                |                       |                                 |                                        |                             |
| <b>g</b> Other                                                                                                                                                                                                                     | 145,214.              |                                 |                                        |                             |
| <b>12</b> Advertising and promotion                                                                                                                                                                                                | 244,167.              |                                 |                                        |                             |
| <b>13</b> Office expenses                                                                                                                                                                                                          | 387,475.              |                                 |                                        |                             |
| <b>14</b> Information technology                                                                                                                                                                                                   | 55,389.               |                                 |                                        |                             |
| <b>15</b> Royalties                                                                                                                                                                                                                |                       |                                 |                                        |                             |
| <b>16</b> Occupancy                                                                                                                                                                                                                | 866,987.              |                                 |                                        |                             |
| <b>17</b> Travel                                                                                                                                                                                                                   | 477,185.              |                                 |                                        |                             |
| <b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials                                                                                                                           |                       |                                 |                                        |                             |
| <b>19</b> Conferences, conventions, and meetings                                                                                                                                                                                   | 73,382.               |                                 |                                        |                             |
| <b>20</b> Interest                                                                                                                                                                                                                 | 72,416.               |                                 |                                        |                             |
| <b>21</b> Payments to affiliates                                                                                                                                                                                                   |                       |                                 |                                        |                             |
| <b>22</b> Depreciation, depletion, and amortization                                                                                                                                                                                | 757,052.              |                                 |                                        |                             |
| <b>23</b> Insurance                                                                                                                                                                                                                | 317,567.              |                                 |                                        |                             |
| <b>24</b> Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)                                                    |                       |                                 |                                        |                             |
| <b>a</b> <u>RETURN OF WORK ASSESSME</u>                                                                                                                                                                                            | 1,285,895.            |                                 |                                        |                             |
| <b>b</b> <u>ORGANIZING PICKET EXPEN</u>                                                                                                                                                                                            | 461,457.              |                                 |                                        |                             |
| <b>c</b> <u>TRADE COUNCIL MEMBERSHI</u>                                                                                                                                                                                            | 108,349.              |                                 |                                        |                             |
| <b>d</b> <u>COLLECTION FEES</u>                                                                                                                                                                                                    | 88,799.               |                                 |                                        |                             |
| <b>e</b> <u>TRAINING</u>                                                                                                                                                                                                           | 26,267.               |                                 |                                        |                             |
| <b>f</b> All other expenses                                                                                                                                                                                                        | 29,500.               |                                 |                                        |                             |
| <b>25</b> Total functional expenses. Add lines 1 through 24f                                                                                                                                                                       | 19,945,816.           |                                 |                                        |                             |
| <b>26</b> Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       |                                 |                                        |                             |

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page **11**

**Part X Balance Sheet**

|                                                                     |                                                                                                                                                                         | (A)<br>Beginning of year |             | (B)<br>End of year |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|--------------------|
| <b>Assets</b>                                                       | 1 Cash - non-interest-bearing                                                                                                                                           | 1,636,048.               | 1           | 683,521.           |
|                                                                     | 2 Savings and temporary cash investments                                                                                                                                | 3,586,082.               | 2           | 2,446,148.         |
|                                                                     | 3 Pledges and grants receivable, net                                                                                                                                    |                          | 3           |                    |
|                                                                     | 4 Accounts receivable, net                                                                                                                                              | 1,879,906.               | 4           | 2,332,270.         |
|                                                                     | 5 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           |                    |
|                                                                     | 7 Notes and loans receivable, net                                                                                                                                       | 102,888.                 | 7           | 10,705,835.        |
|                                                                     | 8 Inventories for sale or use                                                                                                                                           |                          | 8           |                    |
|                                                                     | 9 Prepaid expenses and deferred charges                                                                                                                                 | 158,400.                 | 9           | 113,082.           |
|                                                                     | 10a Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D                                                                                 | 10a 17,124,923.          |             |                    |
|                                                                     | b Less: accumulated depreciation                                                                                                                                        | 10b 1,587,417.           | 15,645,698. | 10c 15,537,506.    |
|                                                                     | 11 Investments - publicly traded securities                                                                                                                             |                          | 11          |                    |
|                                                                     | 12 Investments - other securities. See Part IV, line 11                                                                                                                 | 6,482,625.               | 12          | 5,445,717.         |
|                                                                     | 13 Investments - program-related. See Part IV, line 11                                                                                                                  |                          | 13          | 347,561.           |
|                                                                     | 14 Intangible assets                                                                                                                                                    |                          | 14          |                    |
|                                                                     | 15 Other assets. See Part IV, line 11                                                                                                                                   | 186,906.                 | 15          | 52,730.            |
| 16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) | 29,678,553.                                                                                                                                                             | 16                       | 37,664,370. |                    |
| <b>Liabilities</b>                                                  | 17 Accounts payable and accrued expenses                                                                                                                                | 3,106,023.               | 17          | 1,107,575.         |
|                                                                     | 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          | 192,619.           |
|                                                                     | 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 Secured mortgages and notes payable to unrelated third parties                                                                                                       |                          | 23          | 8,276,733.         |
|                                                                     | 24 Unsecured notes and loans payable to unrelated third parties                                                                                                         |                          | 24          |                    |
|                                                                     | 25 Other liabilities. Complete Part X of Schedule D                                                                                                                     | 1,372,722.               | 25          | 758,966.           |
|                                                                     | 26 <b>Total liabilities.</b> Add lines 17 through 25                                                                                                                    | 4,478,745.               | 26          | 10,335,893.        |
| <b>Net Assets or Fund Balances</b>                                  | <b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>                        |                          |             |                    |
|                                                                     | 27 Unrestricted net assets                                                                                                                                              | 25,199,808.              | 27          | 27,328,477.        |
|                                                                     | 28 Temporarily restricted net assets                                                                                                                                    |                          | 28          |                    |
|                                                                     | 29 Permanently restricted net assets                                                                                                                                    |                          | 29          |                    |
|                                                                     | <b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>                                                 |                          |             |                    |
|                                                                     | 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          |                    |
|                                                                     | 33 <b>Total net assets or fund balances</b>                                                                                                                             | 25,199,808.              | 33          | 27,328,477.        |
| 34 <b>Total liabilities and net assets/fund balances</b>            | 29,678,553.                                                                                                                                                             | 34                       | 37,664,370. |                    |

Form 990 (2009)

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Form 990 (2009)

04-3322535 Page **12**

**Part XI Financial Statements and Reporting**

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
- b** Were the organization's financial statements audited by an independent accountant?
- 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?  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both  
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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.

|           | Yes      | No       |
|-----------|----------|----------|
| <b>2a</b> |          | <b>X</b> |
| <b>2b</b> | <b>X</b> |          |
| <b>2c</b> |          | <b>X</b> |
| <b>3a</b> |          | <b>X</b> |
| <b>3b</b> |          |          |

Form **990** (2009)

**SCHEDULE C**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

**2009**

Open to Public  
Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$
- 3 Volunteer hours

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV **SEE PART IV FOR CONTINUATION**

| (a) Name                 | (b) Address      | (c) EIN    | (d) Amount paid from filing organization's funds. If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0- |
|--------------------------|------------------|------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| N.E. CARPENTERS PAC FUND | BOSTON, MA 02125 | 04-3526887 | 0.                                                                   | 28,989.                                                                                                                                     |
|                          |                  |            |                                                                      |                                                                                                                                             |
|                          |                  |            |                                                                      |                                                                                                                                             |
|                          |                  |            |                                                                      |                                                                                                                                             |
|                          |                  |            |                                                                      |                                                                                                                                             |
|                          |                  |            |                                                                      |                                                                                                                                             |

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009  
LHA

## NEW ENGLAND REGIONAL COUNCIL

Schedule C (Form 990 or 990-EZ) 2009 OF CARPENTERS

04-3322535 Page 2

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                   | (a) Filing organization's totals                | (b) Affiliated group totals        |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------|------------------------------------|--------------------|-------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|--------------|--|--|
| <b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>c</b> Total lobbying expenditures (add lines 1a and 1b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>d</b> Other exempt purpose expenditures                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> |                                                   | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000. |  |  |
| If the amount on line 1e, column (a) or (b) is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | The lobbying nontaxable amount is:                |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| Not over \$500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 20% of the amount on line 1e.                     |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| Over \$500,000 but not over \$1,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$100,000 plus 15% of the excess over \$500,000   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| Over \$1,000,000 but not over \$1,500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$175,000 plus 10% of the excess over \$1,000,000 |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| Over \$1,500,000 but not over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$225,000 plus 5% of the excess over \$1,500,000  |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| Over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$1,000,000.                                      |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |
| <b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   |                                                 |                                    |                    |                               |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |              |  |  |

☐ Yes ☐ No
**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

| Calendar year<br>(or fiscal year beginning in)                      | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
|---------------------------------------------------------------------|----------|----------|----------|----------|-----------|
| <b>2a</b> Lobbying nontaxable amount                                |          |          |          |          |           |
| <b>b</b> Lobbying ceiling amount<br>(150% of line 2a, column(e))    |          |          |          |          |           |
| <b>c</b> Total lobbying expenditures                                |          |          |          |          |           |
| <b>d</b> Grassroots nontaxable amount                               |          |          |          |          |           |
| <b>e</b> Grassroots ceiling amount<br>(150% of line 2d, column (e)) |          |          |          |          |           |
| <b>f</b> Grassroots lobbying expenditures                           |          |          |          |          |           |

Schedule C (Form 990 or 990-EZ) 2009

## NEW ENGLAND REGIONAL COUNCIL

Schedule C (Form 990 or 990-EZ) 2009 OF CARPENTERS

04-3322535 Page 3

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

|                                                                                                                                                                                                                                        | (a) |    | (b)    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------|
|                                                                                                                                                                                                                                        | Yes | No | Amount |
| <b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: |     |    |        |
| <b>a</b> Volunteers?                                                                                                                                                                                                                   |     |    |        |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?                                                                                                                                  |     |    |        |
| <b>c</b> Media advertisements?                                                                                                                                                                                                         |     |    |        |
| <b>d</b> Mailings to members, legislators, or the public?                                                                                                                                                                              |     |    |        |
| <b>e</b> Publications, or published or broadcast statements?                                                                                                                                                                           |     |    |        |
| <b>f</b> Grants to other organizations for lobbying purposes?                                                                                                                                                                          |     |    |        |
| <b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?                                                                                                                                   |     |    |        |
| <b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?                                                                                                                                     |     |    |        |
| <b>i</b> Other activities? If "Yes," describe in Part IV                                                                                                                                                                               |     |    |        |
| <b>j</b> Total Add lines 1c through 1i                                                                                                                                                                                                 |     |    |        |
| <b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?                                                                                                                                |     |    |        |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912                                                                                                                                                             |     |    |        |
| <b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912                                                                                                                                    |     |    |        |
| <b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?                                                                                                                                  |     |    |        |

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

|                                                                                                           | Yes | No |
|-----------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Were substantially all (90% or more) dues received nondeductible by members?                     |     |    |
| <b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?                |     |    |
| <b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? |     |    |

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

|                                                                                                                                                                                                                                                     |           |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--|
| <b>1</b> Dues, assessments and similar amounts from members                                                                                                                                                                                         | <b>1</b>  |  |
| <b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).                                                                                 |           |  |
| <b>a</b> Current year                                                                                                                                                                                                                               | <b>2a</b> |  |
| <b>b</b> Carryover from last year                                                                                                                                                                                                                   | <b>2b</b> |  |
| <b>c</b> Total                                                                                                                                                                                                                                      | <b>2c</b> |  |
| <b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues                                                                                                                                            | <b>3</b>  |  |
| <b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | <b>4</b>  |  |
| <b>5</b> Taxable amount of lobbying and political expenditures (see instructions)                                                                                                                                                                   | <b>5</b>  |  |

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information

**PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:**

N.E. CARPENTERS PAC FUND

750 DORCHESTER AVE, SUITE 3100 BOSTON, MA 02125

**Schedule D**  
(Form 990).

Department of the Treasury  
Internal Revenue Service

**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

**2009**

Open to Public  
Inspection

Name of the organization **NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, 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 exclusive legal control?                                                            |                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 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? |                         | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

|                                                                                             |                                                                              |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat                                      | <input type="checkbox"/> Preservation of a certified historic structure      |
| <input type="checkbox"/> Preservation of open space                                         |                                                                              |

2 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 Tax Year |
|--------------------------------------------------------------------------------------|---------------------------------|
| a Total number of conservation easements                                             | 2a                              |
| b Total acreage restricted by conservation easements                                 | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a) | 2c                              |
| d Number of conservation easements included in (c) acquired after 8/17/06            | 2d                              |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 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 ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8 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)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 | ► \$ _____ |
| (ii) Assets included in Form 990, Part X             | ► \$ _____ |

2 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 relating to these items:

|                                                    |            |
|----------------------------------------------------|------------|
| a Revenues included in Form 990, Part VIII, line 1 | ► \$ _____ |
| b Assets included in Form 990, Part X              | ► \$ _____ |

## NEW ENGLAND REGIONAL COUNCIL

Schedule D (Form 990) 2009

OF CARPENTERS

04-3322535 Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition d ☐ Loan or exchange programs  
 b ☐ Scholarly research e ☐ Other \_\_\_\_\_  
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance  
 d Additions during the year  
 e Distributions during the year  
 f Ending balance

|    | Amount |
|----|--------|
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

2a Did the organization include an amount on Form 990, Part X, line 21? ☒ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

|                                                  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► \_\_\_\_\_ %  
 b Permanent endowment ► \_\_\_\_\_ %  
 c Term endowment ► \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

|        | Yes | No |
|--------|-----|----|
| 3a(i)  |     |    |
| 3a(ii) |     |    |
| 3b     |     |    |

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? \_\_\_\_\_

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

| Description of investment                                                                       | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|-------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land                                                                                         |                                      | 948,387.                        |                              | 948,387.       |
| b Buildings                                                                                     |                                      | 13,910,058.                     | 159,488.                     | 13,750,570.    |
| c Leasehold improvements                                                                        |                                      |                                 |                              | 0.             |
| d Equipment                                                                                     |                                      | 329,224.                        | 190,531.                     | 138,693.       |
| e Other                                                                                         |                                      | 1,937,254.                      | 1,237,398.                   | 699,856.       |
| Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) |                                      |                                 |                              | 15,537,506.    |

Schedule D (Form 990) 2009



## NEW ENGLAND REGIONAL COUNCIL

Schedule D (Form 990) 2009

OF CARPENTERS

04-3322535 Page 4

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

|    |                                                                                         |    |  |
|----|-----------------------------------------------------------------------------------------|----|--|
| 1  | Total revenue (Form 990, Part VIII, column (A), line 12)                                | 1  |  |
| 2  | Total expenses (Form 990, Part IX, column (A), line 25)                                 | 2  |  |
| 3  | Excess or (deficit) for the year Subtract line 2 from line 1                            | 3  |  |
| 4  | Net unrealized gains (losses) on investments                                            | 4  |  |
| 5  | Donated services and use of facilities                                                  | 5  |  |
| 6  | Investment expenses                                                                     | 6  |  |
| 7  | Prior period adjustments                                                                | 7  |  |
| 8  | Other (Describe in Part XIV.)                                                           | 8  |  |
| 9  | Total adjustments (net) Add lines 4 through 8                                           | 9  |  |
| 10 | Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 | 10 |  |

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

|   |                                                                                 |    |  |
|---|---------------------------------------------------------------------------------|----|--|
| 1 | Total revenue, gains, and other support per audited financial statements        | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |    |  |
| a | Net unrealized gains on investments                                             | 2a |  |
| b | Donated services and use of facilities                                          | 2b |  |
| c | Recoveries of prior year grants                                                 | 2c |  |
| d | Other (Describe in Part XIV.)                                                   | 2d |  |
| e | Add lines 2a through 2d                                                         | 2e |  |
| 3 | Subtract line 2e from line 1                                                    | 3  |  |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1             |    |  |
| a | Investment expenses not included on Form 990, Part VIII, line 7b                | 4a |  |
| b | Other (Describe in Part XIV.)                                                   | 4b |  |
| c | Add lines 4a and 4b                                                             | 4c |  |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5  |  |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

|   |                                                                                  |    |  |
|---|----------------------------------------------------------------------------------|----|--|
| 1 | Total expenses and losses per audited financial statements                       | 1  |  |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25                 |    |  |
| a | Donated services and use of facilities                                           | 2a |  |
| b | Prior year adjustments                                                           | 2b |  |
| c | Other losses                                                                     | 2c |  |
| d | Other (Describe in Part XIV.)                                                    | 2d |  |
| e | Add lines 2a through 2d                                                          | 2e |  |
| 3 | Subtract line 2e from line 1                                                     | 3  |  |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1                |    |  |
| a | Investment expenses not included on Form 990, Part VIII, line 7b                 | 4a |  |
| b | Other (Describe in Part XIV.)                                                    | 4b |  |
| c | Add lines 4a and 4b                                                              | 4c |  |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5  |  |

**Part XIV Supplemental Information**

Complete this part to 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 XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

**PART IV, LINE 2B: ACCOUNT REPRESENTS AMOUNTS RECEIVED ON DEPOSIT FROM**

**NEW CONTRACTORS (WHO ARE EMPLOYING UNION CARPENTERS) THAT CAN BE USED TO**  
**PAY BENEFITS FOR THE CARPENTERS IF THE CONTRACTOR DOESN'T PAY THEIR**  
**PORTION.**

**PART X: THE FINANCIAL STATEMENT DID NOT INCLUDE A FOOTNOTE**

**REGARDING THE ORGANIZATION'S LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER**

**FIN 48**

Name of the organization

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
04-3322535

|        |                                              |
|--------|----------------------------------------------|
| Part I | General Information on Grants and Assistance |
|--------|----------------------------------------------|

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States**

**Part II** **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

[illegible]

- |   |                                                                      |   |
|---|----------------------------------------------------------------------|---|
| 2 | Enter total number of section 501(c)(3) and government organizations | ▲ |
| 3 | Enter total number of other organizations                            | ▲ |

**Schedule I (Form 990) 2009**

**NEW ENGLAND REGIONAL COUNCIL**

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

| (a) Type of grant or assistance            | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|--------------------------------------------|--------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|
| SCHOLARSHIPS TO INDIVIDUALS                | 214                      | 56,250.                  |                                   | 0. CASH - FMV                                         |                                        |
| DONATIONS IN MEMORY DUE TO DEATH OF MEMBER | 23                       | 46,000.                  |                                   | 0. CASH - FMV                                         |                                        |
| ASSISTANCE TO MILITARY PERSONNEL           | 32                       | 16,036.                  |                                   | 0. CASH - FMV                                         |                                        |
|                                            |                          |                          |                                   |                                                       |                                        |
|                                            |                          |                          |                                   |                                                       |                                        |

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROCEDURES FOR MONITORING USE OF GRANT FUNDS ARE AS FOLLOWS:

REQUESTS FOR DONATIONS ARE PRESENTED TO THE EXECUTIVE BOARD AND

DONATIONS ARE MADE BASED ON NEED AND PAST PRACTICES. SCHOLARSHIPS ARE

PROVIDED TO CHILDREN OF UNION MEMBERS WHOSE PARENT MUST BE IN GOOD

STANDING. THE STUDENT PROVIDES AN ESSAY ON TOPIC THAT IS INDEPENDENTLY

REVIEWED BY 4 READERS AND THEY PROVIDE CERTIFICATION OF ATTENDANCE IN

AN ACCREDITED PROGRAM.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,  
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |                                                                    |                                                                          |
|--------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or  
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,  
trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's  
CEO/Executive Director. Check all that apply.

- |                                                              |                                                                                     |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing  
organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  
contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  
contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments  
not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the  
initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in  
Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

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

Schedule J (Form 990) 2009

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name         | (B) Breakdown of W-2 and/or 1099-MISC compensation |                                     |                                     | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|------------------|----------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------|-------------------------|---------------------------------|------------------------------------------------------------|
|                  | (i) Base compensation                              | (ii) Bonus & incentive compensation | (iii) Other reportable compensation |                                                |                         |                                 |                                                            |
| BRYAN BOUCHARD   | (i) 97,131.                                        | 0.                                  | 0.                                  | 44,009.                                        | 12,144.                 | 153,284.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| GARY DECOSTA     | (i) 96,584.                                        | 0.                                  | 0.                                  | 47,572.                                        | 14,317.                 | 158,473.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| MARK ERLICH      | (i) 191,626.                                       | 0.                                  | 0.                                  | 63,519.                                        | 14,317.                 | 269,462.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| TOM FLYNN        | (i) 121,078.                                       | 0.                                  | 0.                                  | 51,068.                                        | 14,317.                 | 186,463.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| GLENN MARSHALL   | (i) 96,543.                                        | 0.                                  | 0.                                  | 47,998.                                        | 11,261.                 | 155,802.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| DAVE PALMISCIANO | (i) 118,602.                                       | 0.                                  | 0.                                  | 51,432.                                        | 15,804.                 | 185,838.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| JOE POWER        | (i) 93,181.                                        | 0.                                  | 0.                                  | 46,588.                                        | 14,317.                 | 154,086.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| BRIAN RICHARDSON | (i) 121,734.                                       | 0.                                  | 0.                                  | 50,075.                                        | 14,074.                 | 185,883.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| BILL HOLMES      | (i) 92,775.                                        | 0.                                  | 0.                                  | 47,385.                                        | 15,804.                 | 155,964.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| JACK DONAHUE     | (i) 92,546.                                        | 0.                                  | 0.                                  | 46,910.                                        | 14,317.                 | 153,773.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
| RICHARD DEAN     | (i) 81,085.                                        | 0.                                  | 0.                                  | 43,291.                                        | 12,775.                 | 137,151.                        | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (i) 0.                                             | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (i) 0.                                             | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (i) 0.                                             | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (i) 0.                                             | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |
|                  | (ii) 0.                                            | 0.                                  | 0.                                  | 0.                                             | 0.                      | 0.                              | 0.                                                         |

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

**FORM 990, PART VI, SECTION A, LINE 6: ORGANIZATION REPRESENTS CARPENTER  
UNION MEMBERS.**

**FORM 990, PART VI, SECTION A, LINE 7A: OFFICERS OF THIS COUNCIL SHALL BE  
NOMINATED AND ELECTED BY THE DELEGATE BODY OF THE COUNCIL, AND MUST BE  
WORKING WITHIN THE BARGAINING UNIT REPRESENTED BY THEIR LOCAL UNION, OR  
EMPLOYED FULL TIME WITHIN THE FRAMEWORK OF THE UNITED BROTHERHOOD OF  
CARPENTERS TO BE ELIGIBLE.**

**FORM 990, PART VI, SECTION A, LINE 8B: THIS QUESTION IS NOT APPLICABLE AS  
THERE ARE NO OTHER COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE  
GOVERNING BODY.**

**FORM 990, PART VI, SECTION B, LINE 11: CFO AND BOARD MEMBERS WILL BE GIVEN  
OPPORTUNITY TO REVIEW FORM 990 DRAFT BEFORE FILING.**

**FORM 990, PART VI, SECTION C, LINE 19: ORGANIZATION'S DOCUMENTS AVAILABLE  
UPON REQUEST.**

**FORM 990, PAGE 1, QUESTION B**

**AMENDED RETURN**

**THE RETURN HAS BEEN AMENDED TO DECONSOLIDATE NERCC HEADQUARTERS, LLC AN  
ENTITY IN WHICH NEW ENGLAND REGIONAL COUNCIL OF CARPENTERS (COUNCIL)  
DID NOT HAVE A 100% OWNERSHIP INTEREST. NERCC HEADQUARTERS WAS FORMED  
TO OWN AND DEVELOP AND OPERATE REAL ESTATE IN WHICH THE COUNCIL MAIN  
OFFICE IS LOCATED.**

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

1. THE DECONSOLIDATION RESULTED IN REDUCING CASH BY APPROXIMATELY  
\$300,000, REDUCING FIXED ASSETS BY \$13,058,000 AND ACCUMULATED  
DEPRECIATION OF \$430,000 AND INCREASING INTER-COMPANY PAYABLES BY  
\$235,000 THAT WERE PREVIOUSLY ELIMINATED IN CONSOLIDATION.

2. THE DECONSOLIDATION RESULTED IN REDUCING EXPENSES BY APPROXIMATELY  
\$300,000 FOR RENTAL COSTS RELATED TO ACTIVITY IN NERCC HEADQUARTERS.

3. THE DECONSOLIDATION RESULTED IN THE REMOVAL OF \$4,387,500 OF  
RECEIPTS REPORTED AS INCOME THAT RELATED TO ACTIVITY ON NERCC  
HEADQUARTERS.

4. THE DECONSOLIDATION RESULTED IN REFLECTING AN INVESTMENT BALANCE IN  
NERCC HEADQUARTERS OF \$347,561 (NET OF A K-1 LOSS OF \$(414,910)) THAT  
WAS PREVIOUSLY ELIMINATED IN CONSOLIDATION.

5. THE DECONSOLIDATION RESULTED IN REFLECTING \$1,500,000 IN DEVELOPMENT  
FEE INCOME AND \$584,388 IN DEVELOPMENT COST REIMBURSEMENTS THAT WERE  
PREVIOUSLY ELIMINATED IN CONSOLIDATION

6. THE PREVIOUSLY FILED RETURN FAILED TO REFLECT A \$10,612,500  
"LEVERAGE LOAN" MADE PART OF A NMTC FINANCING STRUCTURE, ALONG WITH  
RELATED ACCRUED INTEREST INCOME OF \$257,861.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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**

Name of the organization

**NEW ENGLAND REGIONAL COUNCIL  
OF CARPENTERS**

Employer identification number  
**04-3322535**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33 )

| (a)<br>Name, address, and EIN<br>of disregarded entity                                       | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Total income | (e)<br>End-of-year assets | (f)<br>Direct controlling<br>entity |
|----------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------|---------------------|---------------------------|-------------------------------------|
| NERCC DEVELOPMENT LLC - 27-1137223<br>C/O THE ORG., 750 DORCHESTER AVE.,<br>BOSTON, MA 02125 | OWN REAL ESTATE         | MASSACHUSETTS                                       | 413,927.            | 15,473,171.               | NERCC                               |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |
|                                                                                              |                         |                                                     |                     |                           |                                     |

**Part II 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.)

| (a)<br>Name, address, and EIN<br>of related organization | (b)<br>Primary activity | (c)<br>Legal domicile (state or<br>foreign country) | (d)<br>Exempt Code<br>section | (e)<br>Public charity<br>status (if section<br>501(c)(3)) | (f)<br>Direct controlling<br>entity |
|----------------------------------------------------------|-------------------------|-----------------------------------------------------|-------------------------------|-----------------------------------------------------------|-------------------------------------|
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |
|                                                          |                         |                                                     |                               |                                                           |                                     |

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

Schedule R (Form 990) 2009

**Part III** Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year)

[illegible]

**Part IV** Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

[illegible]

# NEW ENGLAND REGIONAL COUNCIL OF CARPENTERS

04-3322535 Page 8

Schedule R (Form 990) 2009

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

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

**1** 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 or (iv) rent from a controlled entity

**b** Gift, grant, or capital contribution to other organization(s)

**c** Gift, grant, or capital contribution from other organization(s)

**d** Loans or loan guarantees to or for other organization(s)

**e** Loans or loan guarantees by other organization(s)

**f** Sale of assets to other organization(s)

**g** Purchase of assets from other organization(s)

**h** Exchange of assets

**i** Lease of facilities, equipment, or other assets to other organization(s)

**j** Lease of facilities, equipment, or other assets from other organization(s)

**k** Performance of services or membership or fundraising solicitations for other organization(s)

**l** Performance of services or membership or fundraising solicitations by other organization(s)

**m** Sharing of facilities, equipment, mailing lists, or other assets

**n** Sharing of paid employees

**o** Reimbursement paid to other organization for expenses

**p** Reimbursement paid by other organization for expenses

**q** Other transfer of cash or property to other organization(s)

**r** Other transfer of cash or property from other organization(s)

**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)<br>Name of other organization(s) | (b)<br>Transaction<br>type (a-r) | (c)<br>Amount involved |
|--------------------------------------|----------------------------------|------------------------|
| (1) NERCC HEADQUARTERS LLC           | B                                | 762,471.               |
| (2) NERCC HEADQUARTERS LLC           | D                                | 4,387,500.             |
| (3) NERCC HEADQUARTERS LLC           | J                                | 286,336.               |
| (4) NERCC HEADQUARTERS LLC           | K                                | 1,500,000.             |
| (5) NERCC HEADQUARTERS LLC           | O                                | 577,388.               |
| (6) NERCC HEADQUARTERS LLC           | D                                | 129,462.               |

**Part VI**   **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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.

[illegible]