



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



Return of Organization Exempt From Income Tax

2009

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2009 calendar year, or tax year beginning July 1, 2009, and ending June 30, 20 10

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization LOUISVILLE CHAPTER OF THE NATIONAL TOOL & Die Mfg. Assn.
 Doing Business As _____
 Number and street (or P O box if mail is not delivered to street address) Room/suite
P.O. BOX 35650
 City or town, state or country, and ZIP + 4
LOUISVILLE, KY 40232-5650

D Employer identification number
61 0958790

E Telephone number
 (502) 561-2200

F Name and address of principal officer _____

G Gross receipts \$ _____

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 ▶ N/A

I Tax-exempt status 501(c) () (insert no) 4947(a)(1) or 527

J Website: ▶ N/A

K Form of organization Corporation Trust Association Other ▶ _____

L Year of formation _____

M State of legal domicile KY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
APPRENTICE TRAINING PROGRAMS PROMOTING WELFARE OF THE TOOL AND DIE INDUSTRY

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)	<u>3</u>	<u>4</u>
4 Number of independent voting members of the governing body (Part VI, line 1b)	<u>4</u>	<u>4</u>
5 Total number of employees (Part V, line 2a)	<u>5</u>	<u>2</u>
6 Total number of volunteers (estimate if necessary)	<u>6</u>	<u>1</u>
7a Total gross unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	<u>0</u>
7b Net unrelated business taxable income from Form 990-T, line 34	<u>7b</u>	<u>0</u>

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		
9 Program service revenue (Part VIII, line 2g)	<u>104,325</u>	<u>67565</u>
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>176</u>	<u>81</u>
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>6,787</u>	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>111,288</u>	<u>67646</u>
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		
20 Total assets (Part X, line 16)	<u>53628</u>	<u>52304</u>
21 Total liabilities (Part X, line 26)	<u>0</u>	<u>0</u>
22 Net assets or fund balances. Subtract line 21 from line 20	<u>53628</u>	<u>52304</u>

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: [Signature] Date: 5-17-11
 Type or print name and title: DENNIS R HANNA

Paid Preparer's Use Only
 Preparer's signature: [Signature] Date: 5/17/11 Check if self-employed
 Preparer's identifying number (see instructions): P01208359
 Firm's name (or yours if self-employed), address, and ZIP + 4: Aimee Sapp
4432 Abbott Grove Drive, Crestwood, KY 40014 EIN: _____
 Phone no: (502) 618-2822

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

SCANNED JUN 28 2011

3

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

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 \$ _____)

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 ►

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A _____		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors? _____		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I _____		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II _____		✓
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III _____		✓
6	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? If "Yes," complete Schedule D, Part I _____		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II _____		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III _____		✓
9	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? If "Yes," complete Schedule D, Part IV _____		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V _____		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable _____		✓
	<ul style="list-style-type: none"> • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. • Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. • Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. • Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional _____	Yes	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E _____		✓
14a	Did the organization maintain an office, employees, or agents outside of the United States? _____		✓
14b	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? If "Yes," complete Schedule F, Part I _____		✓
15	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? If "Yes," complete Schedule F, Part II _____		✓
16	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? If "Yes," complete Schedule F, Part III _____		✓
17	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? If "Yes," complete Schedule G, Part I _____		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II _____		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III _____		✓
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H _____		✓

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> _____	21	✓
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> _____	22	✓
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> _____	23	✓
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i> _____	24a	✓
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? _____	24b	✓
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? _____	24c	✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? _____	24d	✓
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> _____	25a	✓
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i> _____	25b	✓
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i> _____	26	✓
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i> _____	27	✓
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> _____	28a	✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> _____	28b	✓
c 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> _____	28c	✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> _____	29	✓
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> _____	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> _____	31	✓
32 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> _____	32	✓
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> _____	33	✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i> _____	34	✓
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> _____	35	✓
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> _____	36	✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> _____	37	✓
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. _____	38	✓

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable <u> </u>		
	1a <u> </u> 0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable <u> </u>		
	1b <u> </u> 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <u> </u>		
	1c <u> </u>		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return <u> </u>		
	2a <u> </u> 2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	<input checked="" type="checkbox"/>	
	2b <u> </u>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? <u> </u>		<input checked="" type="checkbox"/>
	3a <u> </u>		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O <u> </u>		<input checked="" type="checkbox"/>
	3b <u> </u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? <u> </u>		<input checked="" type="checkbox"/>
	4a <u> </u>		
b	If "Yes," enter the name of the foreign country: ▶ <u> </u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4b <u> </u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? <u> </u>		<input checked="" type="checkbox"/>
	5a <u> </u>		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<input checked="" type="checkbox"/>
	5b <u> </u>		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? <u> </u>		<input checked="" type="checkbox"/>
	5c <u> </u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? <u> </u>		<input checked="" type="checkbox"/>
	6a <u> </u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <u> </u>		
	6b <u> </u>		
7 Organizations that may receive deductible contributions under section 170(c).			
a	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? <u> </u>		<input checked="" type="checkbox"/>
	7a <u> </u>		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? <u> </u>		<input checked="" type="checkbox"/>
	7b <u> </u>		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? <u> </u>		<input checked="" type="checkbox"/>
	7c <u> </u>		
d	If "Yes," indicate the number of Forms 8282 filed during the year <u> </u>		
	7d <u> </u>		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <u> </u>		<input checked="" type="checkbox"/>
	7e <u> </u>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<input checked="" type="checkbox"/>
	7f <u> </u>		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		<input checked="" type="checkbox"/>
	7g <u> </u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? <u> </u>		<input checked="" type="checkbox"/>
	7h <u> </u>		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? <u> </u>		<input checked="" type="checkbox"/>
	8 <u> </u>		
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966? <u> </u>		<input checked="" type="checkbox"/>
	9a <u> </u>		
b	Did the organization make a distribution to a donor, donor advisor, or related person? <u> </u>		<input checked="" type="checkbox"/>
	9b <u> </u>		
10 Section 501(c)(7) organizations.	Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 <u> </u>	10a <u> </u>	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <u> </u>	10b <u> </u>	
11 Section 501(c)(12) organizations.	Enter:		
a	Gross income from members or shareholders <u> </u>	11a <u> </u>	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) <u> </u>	11b <u> </u>	
12a Section 4947(a)(1) non-exempt charitable trusts.	Is the organization filing Form 990 in lieu of Form 1041? <u> </u>	12a <u> </u>	<input checked="" type="checkbox"/>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. <u> </u>	12b <u> </u>	

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
1a	Enter the number of voting members of the governing body _____		
1b	Enter the number of voting members that are independent _____		
2	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? _____		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? _____		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? _____		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets? _____		✓
6	Does the organization have members or stockholders? _____		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? _____		✓
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? _____		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body? _____	✓	
8b	b Each committee with authority to act on behalf of the governing body? _____		
9	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 _____		

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates? _____	✓	
10b	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? _____		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? _____		✓
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. _____		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13 _____		✓
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? _____		✓
12c	c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done _____		✓
13	Does the organization have a written whistleblower policy? _____		✓
14	Does the organization have a written document retention and destruction policy? _____		✓
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	a The organization's CEO, Executive Director, or top management official _____		✓
15b	b Other officers or key employees of the organization _____		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) _____		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? _____		✓
16b	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 ► _____
- 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: ► **PRISCILLA FIELDS**
P.O. BOX 35650, LOUISVILLE, KY 40232-5650

Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a 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 similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f _____ ▶						
Program Service Revenue	2a APPRENTICE TRAINING/FEE _____	Business Code			67565		
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue _____						
	g Total. Add lines 2a-2f _____ ▶			67565			
	3 Investment income (including dividends, interest, and other similar amounts) _____ ▶				81		
4 Income from investment of tax-exempt bond proceeds _____ ▶							
5 Royalties _____ ▶							
Other Revenue	6a Gross Rents _____	(i) Real	(ii) Personal				
	b Less: rental expenses _____						
	c Rental income or (loss) _____						
	d Net rental income or (loss) _____ ▶						
	7a Gross amount from sales of assets other than inventory _____	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses _____						
	c Gain or (loss) _____						
	d Net gain or (loss) _____ ▶						
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 _____	a					
	b Less direct expenses _____	b					
	c Net income or (loss) from fundraising events _____ ▶						
	9a Gross income from gaming activities See Part IV, line 19 _____	a					
	b Less direct expenses _____	b					
	c Net income or (loss) from gaming activities _____ ▶						
	10a Gross sales of inventory, less returns and allowances _____	a					
	b Less. cost of goods sold _____	b					
	c Net income or (loss) from sales of inventory _____ ▶						
	Miscellaneous Revenue		Business Code				
11a _____							
b _____							
c _____							
d All other revenue _____							
e Total. Add lines 11a-11d _____ ▶							
12 Total revenue. See instructions. _____ ▶				67646			

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	11050	11050		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	500			
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	600			
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 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.)				
a				
b				
c				
d				
e				
f All other expenses SEE STATEMENT	57000			
25 Total functional expenses. Add lines 1 through 24f				
26 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing _____	42793	1	43840
	2 Savings and temporary cash investments _____		2	
	3 Pledges and grants receivable, net _____		3	
	4 Accounts receivable, net _____		4	
	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 _____		7	
	8 Inventories for sale or use _____		8	
	9 Prepaid expenses and deferred charges _____	4571	9	2199
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____	6264	10a	
	b Less: accumulated depreciation _____	6264	10b	6264
	11 Investments—publicly traded securities _____		11	
	12 Investments—other securities. See Part IV, line 11 _____		12	
	13 Investments—program-related. See Part IV, line 11 _____		13	
	14 Intangible assets _____		14	
	15 Other assets. See Part IV, line 11 _____		15	
16 Total assets. Add lines 1 through 15 (must equal line 34) _____	53628	16	52303	
Liabilities	17 Accounts payable and accrued expenses _____		17	
	18 Grants payable _____		18	
	19 Deferred revenue _____		19	
	20 Tax-exempt bond liabilities _____		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D _____		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L _____		22	
	23 Secured mortgages and notes payable to unrelated third parties _____		23	
	24 Unsecured notes and loans payable to unrelated third parties _____		24	
25 Other liabilities. Complete Part X of Schedule D _____		25		
26 Total liabilities. Add lines 17 through 25 _____	0	26	0	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets _____		27	
	28 Temporarily restricted net assets _____		28	
	29 Permanently restricted net assets _____		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds _____		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund _____		31	
	32 Retained earnings, endowment, accumulated income, or other funds _____	53628	32	52303
33 Total net assets or fund balances _____		33		
34 Total liabilities and net assets/fund balances _____		34		

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing _____	42793	1	43840
	2 Savings and temporary cash investments _____		2	
	3 Pledges and grants receivable, net _____		3	
	4 Accounts receivable, net _____		4	
	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 _____		7	
	8 Inventories for sale or use _____		8	
	9 Prepaid expenses and deferred charges _____	4571	9	2199
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____	6264		
	b Less: accumulated depreciation _____	6264	10c	6264
	11 Investments—publicly traded securities _____		11	
	12 Investments—other securities. See Part IV, line 11 _____		12	
	13 Investments—program-related. See Part IV, line 11 _____		13	
	14 Intangible assets _____		14	
	15 Other assets. See Part IV, line 11 _____		15	
16 Total assets. Add lines 1 through 15 (must equal line 34) _____	53628	16	52303	
Liabilities	17 Accounts payable and accrued expenses _____		17	
	18 Grants payable _____		18	
	19 Deferred revenue _____		19	
	20 Tax-exempt bond liabilities _____		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D _____		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L _____		22	
	23 Secured mortgages and notes payable to unrelated third parties _____		23	
	24 Unsecured notes and loans payable to unrelated third parties _____		24	
	25 Other liabilities. Complete Part X of Schedule D _____		25	
	26 Total liabilities. Add lines 17 through 25 _____	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets _____		27	
	28 Temporarily restricted net assets _____		28	
	29 Permanently restricted net assets _____		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds _____		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund _____		31	
	32 Retained earnings, endowment, accumulated income, or other funds _____	53628	32	52303
33 Total net assets or fund balances _____	53628	33	52303	
34 Total liabilities and net assets/fund balances _____	53628	34	52303	

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
2a		✓
2b		✓
2c		✓
3a		✓
3b		✓

Form 990	Other Expenses				Statement
	(A)	(B)	(C.)	(D)	
Description	Total	Program Services	Management and General	Fundraising	
School Supplies	8,682	8,682			
Meeting & Seminar	121	121			
Misc Expense	464	464			
Discount for NTMA	2,600	2,600			
Apprentice Contest Exp	2,135	2,135			
State Registration Fee Paid	42,998	42,998			
Total to Fm 990, ln 43	<u>57,000</u>	<u>57,000</u>			

Form 990	Other Funds		Statement
	(A)	(B)	
Description	Beginning of year	End of year	
Endowment Fund	<u>53,628</u>	<u>52,303</u>	
Total included on Form 990, line 72	<u>53,628</u>	<u>52,303</u>	

NTMA CHAPTER OFFICER DATA FORM

For Year 2010

Effective Dates: January 1, 2010__ –December 31, 2010_____

CHAPTER:

WEBSITE ADDRESS:

OFFICERS

PRESIDENT: Robert Anderson

Six Sigma
2811 Watterson Trail
Louisville, KY 40299

PHONE: 812-288-8285
FAX: 812-283-1584
E-MAIL: dcperkins@mcreccwb.com

VICE PRESIDENT:

PHONE:
FAX:
E-MAIL:

SECRETARY: Dennis Hanna

Atlas Machine & Supply, Inc.
7000 Global Drive
Louisville, KY 40258

PHONE: 502-584-7262
FAX: 502-589-0310
E-MAIL: drhanna@atlasmachine.com

TREASURER: Tom Meisner

Kentucky Machine & Tool Co.
3107 Millers Lane
Louisville, KY

PHONE:
FAX:
E-MAIL:

TRUSTEE: Dave Embry

Rite-Way Industries
4201 Reas Lane
New Albany, in 47150

PHONE: 812-206-8665
FAX:
E-MAIL:

ALTERNATE TRUSTEE:

PHONE:
FAX:
E-MAIL: