

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



SCANNED SEP 27 2010

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

2003
Open to Public
Inspection

A	For the 200	9 calendar year	r, or tax year beginning 07/01/09, and ending 06/	30/10)					
_	Check if applicated	uso IBS	C Name of organization IRON WORKERS LOCAL NO. 92			D	Employ	er identific	ation nur	mber
=	Name change	label or print or	Doing Business As			_	63-	02034	38	
\equiv	· ·	type.	Number and street (or P O box if mail is not delivered to street address)		Room/suite	E		ne number		
\equiv	Initial return	See Specific	2828 4TH AVENUE SOUTH				205	-323-	<u>4551</u>	
\sqcup	Termination	Instruc-	City or town, state or country, and ZIP + 4			G G	ross receip	ts \$	783	<u>,517</u>
	Amended return	tions.	BIRMINGHAM AL 35233			_				
	Application pen	ulig j	and address of principal officer			H(a)		group return fo		₹ .
		P .	ed B Maddox 28 4th Ave S			н(ь	affiliates Are all a	ıffiliates 🗀	一	X No
			mingham AL 35233				included	? attach a list (si	Yes [No
_	Tax-exempt		501(c) (5) ◀ (insert no) 4947(a)(1) or 527			\dashv	11 NU, a	man a iist (si	se ilisu ucuo	115)
	Website: ▶		501(c) (5) 4 (miscritino) 4541(a)(1) (miscritino) 1521			H(c)	Groupe	xemption num	ber >	
	Type of organiz		oration Trust Association Other ▶	LY	ear of formation	197		VI State of leg		AL
	art I	Summary								
			e organization's mission or most significant activities							
ė	T	o provide	e job related services to its members (La	bor Ur	nion).					
anc										
Activities & Governance		ſ								
30	1		if the organization discontinued its operations or disposed of more t	than 25%	of its net ass	sets	i	- 4		
જ	1	-	nembers of the governing body (Part VI, line 1a)			ŀ	3	14		
ties	1		ndent voting members of the governing body (Part VI, line 1b)				4	387		
Ë	ł		nployees (Part V, line 2a)			{	5	<u>5</u> 0		
Å	1	I number of vol		6						
	1	-	ted business revenue from Part VIII, column (C), line 12 ness taxable income from Form 990-T, line 34			ŀ	7a 7b			0
	D Mer	unrelated busil	ness taxable income from Form 990-1, line 54		Рпог	Year		Curr	ent Year	
Revenue	8 Conf	tributions and g	grants (Part VIII, line 1h)							
	9 Prog	gram service re	evenue (Part VIII, line 2g)		7	56,	791		718,	
eve	10 Inve	stment income	e (Part VIII, column (A), lines 3, 4, and 7d)	L						669
œ	11 Othe	er revenue (Pai					844			
			dd lines 8 through 11 (must equal Part VIII, column (A), line 12)		8	25,	522		<u>783,</u>	<u>517</u>
	13 Gran	nts and similar	amounts paid (Part IX, column (A), lines 1–3) , 2010							
	1		for members (Part IX, column (A), line 4)1-17	-					304	016
es	,		npensation, employee benefits (Part IX, column (A), lines 5–10)	-		20,	157		324,	816
Expenses			aising fees (Part IX, column (A)) line 11e)	-			-+			
Ϋ́	1		expenses (Part IX, column (D), line 25)*			172,	040		410,	905
_	1	•	Part IX, column (A), lines 11a–11d, 11f–24f)	-		793,:			735,	
	l .	•	dd lines 13–17 (must equal Part IX, column (A), line 25) enses Subtract line 18 from line 12	F		32,				896
5	S Rev	enue less expe	sises Subtract line to nom line 12		Beginning of			End	of Year	
Net Assets or	20 Tota	al assets (Part)	X, line 16)		2,9	81,		3,	030,	
AS	21 Tota	al liabilities (Par	rt X, line 26)	Ĺ		25,4				584
		assets or fund	balances Subtract line 21 from line 20		2,9	956 <u>,</u> :	<u> 235 </u>	<u> </u>	004,	<u>131</u>
_ <u>F</u>	Part II	Signature				•				
		Under penaltie	es of perjury, I declare that I have examined this return, including accompanying so s true, correct, and complete Declaration of preparer (other than officer) is based o	chedules an	d statements,	and to the	e best of	my knowled knowledge	lge	
C:		107	1 11/1/1/					/10		
Sig	-	Y MA	on Drynasy				<u> </u>	/10		
He	ii e	Signature	of officer Fred B. Maddox, FS-T-BM				Date			
		Type or p	onnt name and title							
_		-	10111	Date	Chi	eck if			identifying r	number
Pa	iid	Preparer's signature	Is Mil cost	09/0	set		. \sqcap	(see instru	ictions) 11177	7.8
Pr	eparer's	J.g.101010	Parker & Townes, PC	09/0.	J/ IUI em		EIN ►		-0867	
Us	e Only	Firm's name (or if self-employe	or yours X - 717 The Paris Paris				Phone			
		address, and 2	r v			- 1		205-6	531-3	3524
Ma	y the IRS d	iscuss this retu	urn with the preparer shown above? (see instructions)			1	F		Yes	No
Fo	r Privacy A		work Reduction Act Notice, see the separate instructions.					F	orm 990	
DA	A								\wedge	

Yes X No the prior Form 990 or 990-EZ? 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? If "Yes," describe these changes on Schedule O. 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.) (Revenue \$ 4a (Code) (Expenses \$ including grants of \$ To provide Job related services to it's members (Labor Union).) (Revenue \$ 4b (Code) (Expenses \$ including grants of \$

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 ▶

Pa	nt 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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		ļ
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	5		X
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	_ 6		X
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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			.
	complete Schedule D, Part III	8		X
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,"	_		x
	complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	40		x
44	quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	11	x	
_	VII, VIII, IX, or X as applicable 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 related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
_	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	<u> </u>	ļ	<u> </u>
	Schedule D, Parts XI, XII, and XIII	12	<u> </u>	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	-		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	 		v
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		x
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		 ^
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		x
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	 	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		x
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	 ''	 	
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<u>.</u> "		† <u></u>
13	If "Yes," complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
		Eon	~ gg(1 (2009)

Form 990 (2009) IRON WORKERS LOCAL NO. 92 Part IV Checklist of Required Schedules (continu

Pa	art IV Checklist of Required Schedules (continued)	1		
			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? If "Yes," complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	<u></u> -		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			!
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	}	X
b		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b	ļ	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
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):	ļ	-	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	 		
	Schedule L, Part IV	28b	 	X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	20-		v
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		x
• •	conservation contributions? If "Yes," complete Schedule M	30	-	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		х
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	"	 	
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
J J	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
J-	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
•	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			1.
	19? Note. All Form 990 filers are required to complete Schedule O	38	<u> </u>	X
		C~*	qq(l (2000)

Page 5

Statements Regarding Other IRS Filings and Tax Compliance 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 1a 1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable X 1c gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 5 2a Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X 3a this return? 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 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 X 4a If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X 6a organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7с required to file Form 8282? 7d d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 70 benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring R organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9b b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12 10a а 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter-11 11a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b If "Yes." enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) IRON WORKERS LOCAL NO. 92 63-0203438 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI 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 Enter the number of voting members of the governing body 387 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 X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors or trustees, or key employees to a management company or other person? X 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 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 7a of the governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? X 8ь Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached Х 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.) No X 10a 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 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 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 13 Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official 15a 15b 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 X 16a with a taxable entity during the year? **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 None List the states with which a copy of this Form 990 is required to be filed ▶ 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 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 State the name, physical address, and telephone number of the person who possesses the books and records of the 20 2828 4th Avenue South Fred B Maddox organization: AL 35233

Birmingham

Partivili 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

(A) Name and Title	(B) Average	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
Hante and Title	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Cyril Benson SAA								0	0	0
Tom Kuhns										
Rec Sec								0	0	0
Dan Mullinax										
Conductor				ļ				0	0	
Larry Helton										
Exec Comm								0	0	
Mike Miles										
Exec Comm						1		0	0	0
Jimmy Nix										
Exam Comm								0	0	
Donald Garmany				ľ						
Exec Comm								0	0	0
Bart Maddox										
Exec Comm						<u></u>		0	0	
Eddie Fair		1								
Exec Comm								0	0	(
Richard Carroll										
Exam Comm		X					L	0	0	(
Thomas Horn						İ				
Trustee		X			<u> </u>			0	0	(
Joe Craddock										
Trustee		X	<u> </u>	_	┖		<u> </u>	0	0	(
Robert P. Nix					l				_	
FS-T-BM	40.00	\perp		X	_		$oxed{oxed}$	67,200	0	
Larry Smith					ļ				_]
Pres/BA	40.00	\perp		X	<u> </u>	_	1_	65,040	0	
William D Perry	1					1		_	_	
VP		\bot	_	X	-	-	↓_	0	0	
		+	\vdash	\vdash	┼-	╂—	+			
					1					
	1			Ц.			<u> —</u>	<u> </u>	l	Form 990 (200)

_Pai	t VII Section A. Officers,	Directors, Trus	tees	, Key	/ En	plo	yees	, an	d Highest Compensated E	mployees (continued)	···		
	(A) Name and Title	(B) Average hours per	<u> </u>	_		k all t	hat ap		(D) Reportable compensation	(E) Reportable compensation	(F) Estima amoui	ated	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	othe compen from organiz and rel organiza	er sation the ation ated	
								_					
									_				
												_	
		· · · · ·											
	-												
				_									
1b	Total		<u> </u>				i		132,240				
2	Total number of individuals (increportable compensation from the			to the	ose	listed	abo	ve)		00,000 in			
3	Did the organization list any for	mer officer, direc	ctor o						ee, or highest compensated		3	Yes	No X
4	employee on line 1a? If "Yes," For any individual listed on line the organization and related organization.	1a, is the sum of	frepo	ortab	le co	mpe	ensat	ion a			-		
5	Individual Did any person listed on line 1a services rendered to the organi										5		x
Sec 1	tion B. Independent Contractor Complete this table for your five compensation from the organiz	e highest comper	nsate	d inc	lepe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of	* * -		
		(A) business address						_	Descrip	(B) tron of services	α	(C) mpensat	<u>bon</u>
													
		<u></u>											
_													
2 DAA	Total number of independent c more than \$100,000 in comper		_				to th	ose	listed above) who received		0 For	n 990	(2009)

Form 990 (2009) IRON WORKERS LOCAL NO. 92

Pa	rt V	III Statement of Rev	enue						
	_					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र र	1a	Federated campaigns	1a				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		312, 313, 31
ran		Membership dues	1b						
호팀		Fundraising events	1c						
ar if		Related organizations	1d						
S,E			1e						
Sis	_	Government grants (contributions)	16				,		
He Let	•	All other contributions, gifts, grants, and similar amounts not included above	4.5						
풀힘	_		1f	<u> </u>				}	
ag	g	Noncash contributions included in lines 1	a-11	\$					
	<u>n</u>	Total. Add lines 1a-1f			- P				
ğ	_				Busn. Code	710 004	710 004		
- S	2a	Dues & Assessments				718,004	718,004		
8	b				 				
Ξ	С								
နှ	d								
Program Service Revenue Contributions, gifts, grants	е				 				
g		All other program service revi	enue		<u> </u>				
-		Total. Add lines 2a-2f			•	718,004			
	3	Investment income (including	dividend	ls, interes					
- 1		other similar amounts)			▶	54,669			54,669
	4	Income from investment of ta	x-exemp	t bond pro	oceeds 🕨				
	5	Royalties							
		(ı) Real		(u) F	Personal				
	6a	Gross Rents		-					
	b	Less rental exps							
	С	Rental inc or (loss)		i					
	d 7a	Net rental income or (loss)		т					
	14	Gross amount from sales of assets (i) Security	ies	(11)	Other			ļ	
		other than inventory							
	b	Less cost or other							
		basis & sales exps		ļ					
	С	Gain or (loss)							
	d	Net gain or (loss)							
9	8a	Gross income from fundraising ev	ents						
จาน		(not including \$							
eve		of contributions reported on line 1	c)						
Other Revenue		See Part IV, line 18	а						
Ĕ.	b	Less direct expenses	b						
٥	С	Net income or (loss) from fun		events	•				
	9a	Gross income from gaming activit	ies						
		See Part IV, line 19	а						
	b	Less: direct expenses	b						
	С	Net income or (loss) from gain	ning act	vities	•				
	10a	Gross sales of inventory, less	5		1				
		returns and allowances	а	<u></u>					
	b	Less. cost of goods sold	b						
	С	Net income or (loss) from sal	es of inv	entory					
		Miscellaneous Reven	ue		Busn. Code				
	11a	Rental				9,205	9,205		
	b	Other				1,639	1,639		
	С								
	d	All other revenue							
	е	Total. Add lines 11a-11d			▶]	10,844			
	12	Total Revenue. See instruct	ions.		▶ [783,517	728,848	0	54,669

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).

		(A)		·	
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	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			_	<u> </u>
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	189,839			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	78,510			
9	Other employee benefits	41,156			
10	Payroll taxes	15,311			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	8,950			
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	1,380			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	3,677			
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	218,483			
22	Depreciation, depletion, and amortization	36,605			
23	Insurance	4,961			
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)				
а	Utilities	36,137			
b	Advertising	16,277			
С	Auto Expense	14,854			
d	Benevolent Disbursements	12,700			
е	Entertainment	11,474			
f	All other expenses	45,307			
25	Total functional expenses. Add lines 1 through 24f	735,621			
26	Joint costs. Check here ▶ ☐ If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
544	fundraising solicitation			<u> </u>	

Part X **Balance Sheet** (A) (B) Beginning of year End of year 251,395 212,144 Cash-non-interest bearing 1,720,873 2 2 1,844,439 Savings and temporary cash investments Pledges and grants receivable, net 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Assets Notes and loans receivable, net 7 Inventories for sale or use R Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment, cost or 1,200,892 10a other basis Complete Part VI of Schedule D 272,094 944,498 928,798 10b 10c b Less accumulated depreciation 99,715 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 14 Intangible assets 4,480 6,083 15 Other assets. See Part IV, line 11 15 2,981,710 3,030,715 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,434 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 26,044 24,041 25 25 Other liabilities Complete Part X of Schedule D 25,475 26,584 26 Total liabilities. Add lines 17 through 25 26 **Net Assets or Fund Balances** Organizations that follow SFAS 117, check here ▶ complete lines 27 through 29, and lines 33 and 34. 2,956,235 3,004,131 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 2,956,235 3,004,131 33 Total net assets or fund balances 2,981,710 3,030,715 Total liabilities and net assets/fund balances

Form 990 (2009)

Form	990 (2009) IRON WORKERS LOCAL NO. 92 63-0203438		Pa	ge 12			
Pa	rt XI Financial Statements and Reporting						
			Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O						
2a	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?	2b	X				
С	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?	2c	X				
	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?	3a					
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.	3b					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Employer identification number

Inspection

IRON WORKERS LOCAL NO. 92 63-0203438 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements 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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? 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 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 Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X Schedule D (Form 990) 2009

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

<u>iche</u>	dule D (Form 990) 2009 LRON WORKE	RS LOCAL N	0. 92		63-020	03438	Page 2
Pa	rt III Organizations Maintaining C	ollections of Art	, Historical	Treasures, o	r Other Si	milar Assets	(continued)
3	Using the organization's acquisition, accession, a collection items (check all that apply).	and other records, che	eck any of the fo	ollowing that are a	significant u	se of its	
а	Public exhibition	d Loa	an or exchange	programs			
b	Scholarly research	e Ott					
С	Preservation for future generations	_		· -			
4	Provide a description of the organization's collect Part XIV	tions and explain how	they further the	e organization's e	xempt purpos	se in	
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be				ular		Yes No
Pa	ert IV Escrow and Custodial Arran				swered "Y	es" to Form 9	990, Part
	IV, line 9, or reported an amo	ount on Form 990), Part X, lin	e 21.			
1a	Is the organization an agent, trustee, custodian of				ot		
	included on Form 990, Part X?	·					Yes No
b	If "Yes," explain the arrangement in Part XIV and	complete the following	ng table.				
	. ,	•					Amount
С	Beginning balance					1c	
	Additions during the year					1d	
	Distributions during the year					1e	
f						1f	
	Did the organization include an amount on Form	990. Part X. line 21?					Yes No
	If "Yes," explain the arrangement in Part XIV.	200, 1 21171, 2 11					1c3
_	ert V Endowment Funds. Complet	e if organization	answered "	es" to Form	990. Part	IV. line 10.	<u> </u>
		(a) Current year	(b) Prior		years back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	.,,	1		• • •	, , , , , , , , , , , , , , , , , , , ,	
b	Contributions	•					-
	Net investment earnings, gains,						<u> </u>
·	and losses						
А	Grants or scholarships					-	
	Other expenditures for facilities		<u> </u>				
·	and programs						
f	Administrative expenses				1		
	End of year balance						
2	Provide the estimated percentage of the year en	d halance held as	L	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	Board designated or quasi-endowment	%					
	Permanent endowment ▶ %	"					
6	Term endowment ▶ %						
22	Are there endowment funds not in the possession	n of the organization	that are held an	d administered fo	r the		
Ų.	organization by	n or the organization					Yes No
	(i) unrelated organizations						3a(i)
	(ii) related organizations						3a(ii)
h	If "Yes" to 3a(ii), are the related organizations lis	ted as required on Sc	hedule R?				3b
4	Describe in Part XIV the intended uses of the organization	•					<u> </u>
_	art VI Investments—Land, Building			m 990. Part X	Line 10		
	Description of investment	(a) Cost or other bas		Cost or other		umulated	(d) Book value
		(investment)	1	isis (other)		eciation	
10	Land			311,850	· · · · · · · · · · · · · · · · · · ·		311,850
	Buildings			,			
	Leasehold improvements						
	Equipment						
	Other			889,042	:	272,094	616,948
	1 Add lines 1a through 1e (Column (d) must equa	al Form 990 Part X c	olumn (B) line				928.798

chedule D (Form 990) 2009 IRON WORKERS LOCAL N Part VII Investments—Other Securities. See Form 99		63-0203438	Page 3
(a) Description of security or category	(b) Book value	(c) Method of va	luation
(including name of security)	(-)	Cost or end-of-year n	
nancial derivatives			
losely-held equity interests			
ther			
	-		
			
	_		
	-		
·	_	-	
· ·	_		
otal. (Column (b) must equal Form 990, Part X, col (B) line 12.)	>		
Part VIII Investments—Program Related. See Form 9			
(a) Description of investment type	(b) Book value	(c) Method of va	
		Cost or end-of-year n	narket value
			<u></u>
			
· · · · · · · · · · · · · · · · · · ·			
		·	
(-)	>		····
Part IX Other Assets. See Form 990, Part X, line 15. (a) Description			(b) Book value
(a) sessipilar	· · · · · · · · · · · · · · · · · · ·		(4) 55511 14.45
			· · · · · · · · · · · · · · · · · · ·
_			
			
otal. (Column (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X Other Liabilities. See Form 990, Part X, line	25.	•	
(a) Description of liability	(b) Amount		
ederal income taxes			
Unrealized Gain/Loss	26,044		

26,044

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

che	dule D (Form 990) 2009 IRON WORKERS LOCAL NO. 92	<u>63-02034.</u>	<u> </u>	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financial Statem	nents	
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	<u> </u>
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	···
9	Total adjustments (net) Add lines 4 through 8		9	
0_	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per Re	turn	
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			
а	Net unrealized gains on investments	2a	1	
þ	Donated services and use of facilities	2b	_	
С	Recoveries of prior year grants	2c	<u> </u>	
d	Other (Describe in Part XIV)	2d	_	
е	Add lines 2a through 2d		2е	_
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	」	
þ	Other (Describe in Part XIV.)	4b	」 .	
C	Add lines 4a and 4b		4c	<u></u>
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	<u>., </u>	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses per F	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	1 1	1 1	
а	Donated services and use of facilities	2a	4	
b	Prior year adjustments	2b	4	
С	Other losses	2c	_	
d	Other (Describe in Part XIV)	2d	↓	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1) f	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	4	
b	Other (Describe in Part XIV)	4b	4	
С	Add lines 4a and 4b		4c	<u>_</u>
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pa	rt XIV Supplemental Information			
om	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line	es 1a and 4, Part IV, lines 1b		
nd :	2b, Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line	es 2d and 4b Also complete		
ıs p	art to provide any additional information.			
-				
		 -		
			_	
				

Schedule D (Fo	orni 990) 200	9_ II	RON I	WORK	ERS :	LOCA	LN	ro.	92				_ 63	-02	<u>0343</u>	38			Page 5
Schedule D (Fo	Supplen	nental I	Inform	ation (contin	ued)													
		·					•												
							_				_			· — ·			 		
							· –				_						 		
											_						 		
		- -					_				_						 		
							_				-			_			 		
							· –				_			–			 		
		- -					-			_ —	_			. 			 		
											_						 		
		_		_							_						 		
_							_										 		
							_		_		_			· –			 		
							-				_			· - ·			 		
		- -									_			. – .			 		
											_						 		
							_				_			-			 		
				– –			· –				_			_			 		
							-				_	- -		· —			 		
								_ _			_						 		
									_		_						 		
											_		_	_					
							-	- -	_		_			-		_	 		
							-							-		<u> </u>	 		- -
							_		_		_						 		
								_ _	_		_					_	 		
																	 	_	
							_				_			_			 		- -
				– –					_		_			_		_	 		
			– –								_	– –				_	 	- -	
							- —		_								 		
					_				_		_					_	 _		
· -				_ _							_			_	_		 		

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

IRON WORKERS LOCAL NO. 92

Employer identification number

63-0203438

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

To provide job related services to it's members (Labor Union).

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attachment Sequence No

► See separate instructions.

► Attach to your tax return

OMB No. 1545-0172

Identifying number Name(s) shown on return IRON WORKERS LOCAL NO. 92 63-0203438 Business or activity to which this form relates Indirect Depreciation Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 1 Maximum amount. See the instructions for a higher limit for certain businesses. 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (c) Elected cost (a) Description of property (b) Cost (business use only) 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 687 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 35,171 16 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (f) Method (business/investment use (e) Convention (g) Depreciation deduction (a) Classification of property placed in period only-see instructions) service 19a 3-year property b 5-year property 4,220 7.0 200DB 604 HY 7-year property С 10-year property e 15-year property 20-year property S/L 25-year property 25 vrs S/L Residential rental 27 5 yrs MM property 27 5 yrs MM S/L 4,450 81 10/20/09 39 yrs MM S/L Nonresidential real 04/30/10 11,548 39.0 property MM S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System S/L 20a Class life 12 yrs. S/L b 12-year 40 vrs MM S/L 40-year Summary (See instructions.) Part IV 21 21 Listed property Enter amount from line 28 Total, Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 36,605 and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23

23