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Form 990

Form	1990 (2010)				Page 2
Par			ce Accomplishments onse to any question in this P	art III	
1	Briefly describe the	organization's mission			
AND WAY INTE SHO MET AND WHI MEM	O ALLIED TRADES - BI S AND MEANS FOR T ERNATIONAL UNION RTER HOURS AND BE HODS IN FAVOR OFC BRING INTO EXISTE CH THE MEMBERS OF	ELIEVING THAT ORGA THE CONTINUOUS IMP , TO SECURE LEGISLA ETTER WORKING CONI DUR AFFILIATED ORG, ENCE SATISFACTORY F OUR AFFILIATES ARI	NIZATION AND COLLECT PROVEMENT OF THE WORK TION INTHE INTERESTS O DITIONS FOR THEM, TO IN ANIZATIONS AND ALL ORO CONTRACTUAL RELATION E DRAWN, TO ADVANCE A	IVE ACTION ISNECESSARY ING AND LIVING STANDAR OF OUR MEMBERS, TO BRIN NFLUENCE PUBLIC OPINION GANIZED LABOR GENERALI ISHIPS WITH EMPLOYERS I ND MAINTAIN BETTER RELA	DS OF THE MEMBERS OF THIS G ABOUT HIGHER WAGES, N BY PEACEFUL AND LEGAL Y, TO PROMOTE, ENCOURAGE N THE INDUSTRIES FROM
2	Did the organization the prior Form 990 or		nt program services during th	ne year which were not listed o	on
	If "Yes," describe the	ese new services on Sch	iedule O		
3	Did the organization of services?	cease conducting, or ma	ake significant changes in ho • • • • • • • •	w it conducts, any program	
	If "Yes," describe the	ese changes on Schedul	e O		
4	Section 501(c)(3) an	nd 501(c)(4) organizatio		s three largest program servic rusts are required to report th ogram service reported	
4a	(Code) (Expenses \$	including grants o	f\$)(Revenu	e \$)
	NEGOTIATED WAGES AN		R LABOR STANDARDS AND PRACTIC	S AND WORKERS IN THE ALLIED TRA CES, TRAINED WORKERS TO MEET E	NDES - ORGANIZED WORKERS, MPLOYERS' NEEDS AND TO ADVANCE
	(Code) (Expenses \$	ıncludıng grants o	f \$) (Revenu	e \$)
	SINCE 1969 AND IS ONE CORPS PROGRAMS IN 3: PROGRAMS, ONE SIGN, ON-THE-JOB TRAINING, THE REQUIREMENTS NE	E OF FIVE BUILDING TRADES OF STATES ALTHOUGH THE MADISPLAY, AND BILLBOARD PRESOCIAL SKILLS DEVELOPMENT OF SOCIAL SKILLS DEVELOPMENT	UNIONS OFFERING TRAINING PROC AJORITY ARE PAINTING PROGRAMS OGRAMS ALL IUPAT JOB CORPS PR IT AND GENERAL EDUCATION STUI IN APPRENTICESHIP PROGRAM TH	5, THE IUPAT ALSO OFFERS 2 FLOOR OGRAMS TAKE APPROXIMATELY ONE	Y, OUR UNION SPONSORS OVER 52 JOB COVERING PROGRAMS, THREE GLAZING YEAR TO COMPLETE, AND CONSIST OF OF THE PROGRAM IN ORDER TO MEET RAL EDUCATION AND ON-THE-JOB
4c	(Code) (Expenses \$	ıncludıng grants o	f \$) (Revenu	e \$)
	DEPARTMENT HELPS TH	·	COUNCILS DEVELOP THEIR OWN STI	COMOTE AND GROW THE ORGANIZA RATEGIC ORGANIZING PLANS AND H	TION THE IUPAT ORGANIZING ELPS TO COORDINATE CAMPAIGNS THAT
	Other program serv	ıces (Describe in Sche	dule O)		
	(Expenses \$	ınclu	ding grants of \$) (Revenue \$)
4e	Total program servi	 ce 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	1		Νo
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
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	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b		No
c	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
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 U S? If "Yes," complete Schedule F, Parts II and IV.	15	Yes	
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 U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
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 (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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-24d and complete Schedule K. If "No," go to line 25	24a		No
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</i> "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a	Yes	
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	•	No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V							
			Yes	No				
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 23							
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1						
	1b 0							
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?							
	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							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes					
	Did the organization have unrelated business gross income of \$1,000 or more during the							
	year?	3a	Yes					
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes					
	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)?	4a	Yes					
b	If "Yes," enter the name of the foreign country ▶CA							
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N				
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N				
:	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?							
		5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		N				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
	Organizations that may receive deductible contributions under section 170(c).			,,				
3	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		N				
)	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
:	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c						
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	I						
h	required?	7g						
"	Form 1098-C?	7h						
	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?	8						
	Sponsoring organizations maintaining donor advised funds.							
a	Did the organization make any taxable distributions under section 4966?	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
	Section 501(c)(7) organizations. Enter							
	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-						
	Section 501(c)(12) organizations. Enter							
a	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources							
	against 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						
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
	Section 501(c)(29) qualified nonprofit health insurance issuers.							
a	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O	138						
_								
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
c	Enter the amount of reserves on hand	1						
-	Did the executation received any new months for undeed to make a series of the top years?			, a,				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N				

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
b	Enter the number of voting members included in line 1a, above, who 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?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
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?	10b	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	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		No
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Νo
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
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?	16b		
Se	ection 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 Form 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. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization FGEORGE GALIS
 7234 PARKWAY DRIVE

HANOVER, MD 21076 (410) 564-5900

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	erage Position (check all ours that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) JAMES A WILLIAMS GENERAL PRESIDENT	45 00			х				356,816	0	75,522
(2) GEORGE GALIS GENERAL SEC -TEASURER	45 00			х				269,328	0	75,064
(3) KENNETH E RIGMAIDEN EXEC GEN VICE PRESIDENT	45 00			х				272,266	0	57,216
(4) WILLIAM D CANDELORI JR GENERAL VICE PRESIDENT	45 00			х				219,614	0	37,750
(5) RAYMOND PRICE III GENERAL VICE PRESIDENT	45 00			х				221,419	0	44,536
(6) RAYMOND N SESMA GENERAL VICE PRESIDENT	45 00			х				222,911	0	40,199
(7) ROBERT KUCHERAN GENERAL VICE PRESIDENT	45 00			х				200,887	0	11,255
(8) CHARLES D HARRIS EXEC ASST TO GEN SEC-TREA	45 00				Х			189,859	0	44,378
(9) WILLIAM A COURTIEN AGREEMENTS DIRECTOR	45 00				Х			192,973	0	34,486
(10) GREGORY D RAFTERY ORGANIZING DIRECTOR	45 00				Х			151,176	0	25,932
(11) TIMOTHY A STRICKER EXECUTIVE ASST TO G PRES	45 00				Х			178,790	0	29,556
(12) RICK L ROOT REG ORG COORDINATOR	45 00					Х		135,070	0	44,126
(13) HARRY J ZELL GENERAL PRESIDENT REP	45 00					Х		139,813	0	45,853
(14) JAMES A WILLIAMS JR REG ORG COORDINATOR	45 00					х		153,902	0	28,627
(15) JACK HAYN ASST TO G PRESIDENT	45 00					х		141,752	0	23,575
(16) GAVIN MCDONALD COMMUNICATIONS DIRECTOR	45 00					х		127,609	0	38,918

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

								(E) Reportable compensation from related		(F) Estimated amount of other compensation				
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	organız	m the zation (W- 9-MISC)	;	from the organization and related organizations		
												+		
to Sub-Total														
d	to total from continuation sheets to rule VII, section A									0	656,993			
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►28														
3	Did the organization list any forr on line 1a? <i>If</i> "Yes," complete Sch					ey e •	mploy •	ee, o	r highes	t compens	ated employee	3	Yes	No No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such									110				
5	Individual	receive or accri	ie comp	• ensa	• ition	• fror	n any	• unrel	ated org	• • • janization d	r individual for	4	Yes	
services rendered to the organization? If "Yes," complete Schedule J for such person								No						
Se	ction B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	nt c	ontra	ctors	that red	eived more	e than			
(A) (B) Name and business address Description of services								(C Comper) nsation					
CONCERTIVE 1361-B FARMINGTON AVE POTTSTOWN, PA 19464 IT SUPPORT								556,645						
MAGPIE 12050 PECOS ST 210 WESTMINSTER, CO 80234 IT SUPPORT								121,328						
ONE P BALA C	FRANCELLA LLC RESIDENTIAL BLVD STE 330 CYNWYD, PA 19004									ACCOUNTING	SERVICES		108,574	
РО ВО	OHI GROUP INC X 64 ETT PARK, MD 20896									IT SUPPORT				107,335
	otal number of independent conti	raatara (maludu	. a bt n	a+ lin	t.a.d	1 + 0 4	thoo.	liotoi	d should'	l Vybo rogov	and more than			

\$100,000 in compensation from the organization 🗠 4

		(2010)				Page 9		
Part \	<u>/***</u>	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
								under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts		Federated campaigns Membership dues	1a . 1b					
emo mo		Fundraising events						
ara I								
s, g mii		Related organizations Government grants (contributions)	. 1a	6,796,843				
tion ir si								<u> </u>
of the	Ť	All other contributions, gifts, grants similar amounts not included above	2					
펄	g	Noncash contributions included in li	nes 1a-1f \$					
इंट	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·		6,913,159			
an	_			Business Code				
Program Service Revenue	2a	PER CAPITA		900099	23,450,955	23,450,955		
94 144	b			900099	5,066,553	5,066,553		
¥Ć.	c d	PUBLICATION INCOME		511190	22,800		22,800	
<u>8</u>	e							
ran		All other program service re	venue					
્ર	-		_					
_	<u>д</u> 3				28,540,308			
	3	Investment income (including and other similar amounts)			586,894			586,89
	4	Income from investment of tax-ex						
	5	Royalties						
			(ı) Real	(II) Personal				
		Gross Rents	290,175					
		Less rental expenses	465,703					
	С	Rental income or (loss)	-175,528					
	d	Net rental income or (loss)			-175,528		-175,528	
	7a	Gross amount from sales of assets other than inventory	(1) Securities 10,295,844	(II) O ther				
	b	Less cost or other basis and	10,185,669					
		sales expenses Gain or (loss)	110,175					
		Net gain or (loss)			110,175			110,17
۸.		Gross income from fundraisi			, , , , , , , , , , , , , , , , , , ,			,
Other Kevenue		(not including \$ of contributions reported on See Part IV, line 18	line 1c)					
<u>.</u>		,	а					
5		Less direct expenses .						
_		Net income or (loss) from fur						
			ctivities See Part IV , line 19 . a					
		Net income or (loss) from ga	_	ь				
		Gross sales of inventory, les						
		returns and allowances .						
	L	Local cost of and a self-	a	26,213				
		Less cost of goods sold . Net income or (loss) from sa		-70,422	96,635	96,635		
		Miscellaneous Revenue	• •	Business Code	•			
	11 a	MISC & SALE OF UNION		900099	532,025			532,02
		INSURANCE INCOME		900099	455,612			455,61
		ROYALTIES		900099	280,602			280,60
		All other revenue	<u> </u>		53,395			53,39
		• Total. Add lines 11a-11d			1 221 624			
			•		1,321,634			
	12	Total revenue. See Instructi	ons •		37,393,277			2,018,70
						28,614,143		L

	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).						
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses		
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	279,771					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	42,000		•			
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	42,000					
4	Benefits paid to or for members	1,926,202					
5	Compensation of current officers, directors, trustees, and key employees	2,888,437					
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	4,480,975					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,237,471					
9	Other employee benefits	2,012,963					
10	Payroll taxes	416,612					
а	Fees for services (non-employees) Management	,					
Ь	Legal	601,435					
С	Accounting	109,930					
d	Lobbying						
e	Professional fundraising services See Part IV, line 17						
f	Investment management fees	96,724					
g	Other	384,666					
.2	Advertising and promotion	51,472					
.3	Office expenses	1,436,713					
4	Information technology	1,191,625					
.5	Royalties	1,151,625					
.6	Occupancy	1,929,988					
.7	Travel	1,771,262					
.8	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,771,202					
.9	Conferences, conventions, and meetings	1,772,987					
:0	Interest	428,676					
1	Payments to affiliates	8,351,708					
	Depreciation, depletion, and amortization	1,572,151					
:3	Insurance	305,476					
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	303,170					
а	JOBS CORP PRO GRAM	6,796,843					
b	ORGANIZING	153,304					
c	COMMUNICATIONS	53,755					
d	PERSONAL PROPERTY TAX	25,119					
e	TRAINING	10,505					
f	All other expenses						
25	Total functional expenses. Add lines 1 through 24f	40,328,770					
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) 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) (B) Beginning of year End of year 1,845,573 2,052,731 1 37,148,765 2 30.934.646 2 Savings and temporary cash investments 3 3 4,831,242 4 4,915,158 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 4ssets 7 8 129,002 192,226 Prepaid expenses and deferred charges 111,034 80,867 10a Land, buildings, and equipment cost or other basis Complete 34,407,688 10a Part VI of Schedule D 10b 4.529.664 ь Less accumulated depreciation 16,537,303 **10c** 29,878,024 11 18.966.768 11 9.981.181 39,826 369,826 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 688.217 15 444,657 15 16 80,627,730 16 78,519,316 Total assets. Add lines 1 through 15 (must equal line 34) . . . 2.911.506 17 3,584,577 17 Accounts payable and accrued expenses . 18 18 196.491 19 19 63.075 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 371.634 25 492.223 Other liabilities Complete Part X of Schedule D 26 3.479.631 26 4,139,875 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 77.148.099 74,379,441 Temporarily restricted net assets 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 77,148,099 33 74,379,441 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 80.627.730 78,519,316

Par	Check if Schedule O contains a response to any question in this Part XI			.┏			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		37.3	393,277		
2	Total expenses (must equal Part IX, column (A), line 25)	2			328,770		
3	Revenue less expenses Subtract line 2 from line 1	3		-2,9	35,493		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4						
5	Other changes in net assets or fund balances (explain in Schedule O)						
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		74,3	379,441		
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			F			
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			Yes	No		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo		
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes			
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t 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		2c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued					
	Separate basis Consolidated basis Both consolidated and separated 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?	2	3a		Νο		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b				

DLN: 93493314023951

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

if the organization answered	"Yes," to Form 990, Part IV	, Line 3, or Form 990-E∠, Pai	rt V, iine 46 (Political Cam)	paign Activities),
then				

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

Νa	ame of the organization TERNATIONAL UNION OF PAINTE	RS AND ALLIED TRADES		Employe	rıde	ntıfıcatıon number
				35-019		
Par	t I-A Complete if the	he organization is exempt	under section 501	(c) or is a section	52	7 organization.
1	Provide a description of	the organization's direct and indire	ct political campaign ac	tivities in Part IV		
2	Political expenditures			ŀ	•	\$
3	Volunteer hours					
Pai	rt I-B Complete if t	he organization is exempt	under section 501	(c)(3).		
1	Enter the amount of any	excise tax incurred by the organiza	atıon under sectıon 495	5	Þ	\$
2	Enter the amount of any	excise tax incurred by organization	n managers under sectio	on 4955	۰	\$
3	If the organization incur	red a section 4955 tax, did it file F	orm 4720 for this year?			┌ Yes
4a	Was a correction made?					┌ Yes
b	If "Yes," describe in Par	rt IV				
Pai	rt I-C Complete if t	he organization is exempt	under section 501	(c) except section	า 50)1(c)(3).
1	Enter the amount direct	ly expended by the filing organization	on for section 527 exem	npt function activities	۰	\$
2	Enter the amount of the exempt funtion activities	filing organization's funds contribut s	ted to other organizatior	ns for section 527	-	\$
3	Total exempt function ex	xpenditures Add lines 1 and 2 Ent	ter here and on Form 11	20-POL, line 17b	۰	\$
4	Did the filing organizatio	on file Form 1120-POL for this year?				☐ Yes ☐ No
5	organization made paym amount of political contr	sses and employer identification nu nents For each organization listed, ributions received that were prompt id or a political action committee (F	enter the amount paid fr tly and directly delivered	om the filing organizat to a separate politica	ion's il org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fro filing organization funds If none, enter	's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
ŤÓG	IUPAT - POLITICAL ACTION SETHER - LEGISLATIVE AND ICATIONAL FUND	7234 PARKWAY DRIVE HANOVER, MD 21076	23-7387939			474,713
	IUPAT - POLITICAL ACTION ETHER - PC	7234 PARKWAY DRIVE HANOVER, MD 21076	23-7185561			2,612,389

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
С	Total lobbying expenditures							
d	Grassroots non-taxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

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

	(erection under section sez(ii)).	(;	a)		(b)	
		Yes	No	4	A moun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
Ь	Carryover from last year	2b				

Taxable amount of lobbying and political expenditures (see instructions)Part IV Supplemental Information

political expenditure next year?

c Total

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

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and

Ident if ier	Ret urn Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES		DURING THE YEAR IUPAT MEMBERS AND EMPLOYEES WERE PRESENT AT VARIOUS POLITICAL RALLIES TO SUPPORT VARIOUS CANDIDATES RUNNING FOR POLITICAL OFFICE APPROXIMATELY 4% OF IUPAT'S EMPLOYEES TIME IS SPENT WORKING ON POLITICAL ACTIVITIES

2c

3

4

5

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493314023951

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Name of the organization
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if

	(a) Donor advised funds	(b) Funds a	nd other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono funds are the organization's property, subject t			□ Yes □ N
Did the organization inform all grantees, donors used only for charitable purposes and not for th conferring impermissible private benefit			┌ Yes ┌ N
rt III Conservation Easements. Comp	plete if the organization answered "Yes	s" to Form 990, Par	t IV, line 7.
Purpose(s) of conservation easements held by			
<u> </u>	creation or pleasure) Preservation o		•
Protection of natural habitat	Preservation o	f a certified historic s	tructure
Preservation of open space			
Complete lines 2a-2d if the organization held a	a qualified conservation contribution in the fo	orm of a conservation	
easement on the last day of the tax year		Hold at	the End of the Year
Total number of conservation easements		2a	the that of the real
Total acreage restricted by conservation easer	ments	2b	
Number of conservation easements on a certifi		2c	
Number of conservation easements included in		2d	
Number of conservation easements modified, t			cion during
the taxable year	ransierreu, reieaseu, extinguisneu, or termir	iated by the organizat	ion during
the taxable year P			
Number of states where property subject to cor			
Does the organization have a written policy reg enforcement of the conservation easements it		nandling of violations,	and
Staff and volunteer hours devoted to monitoring	g, inspecting and enforcing conservation eas	sements during the ye	ear ►
A mount of expenses incurred in monitoring, ins	pecting, and enforcing conservation easeme	ents during the year 🖡	- \$
Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirements of	section	ΓYes ΓΝ
In Part XIV, describe how the organization repo balance sheet, and include, if applicable, the te the organization's accounting for conservation	xt of the footnote to the organization's finan		
rt III Organizations Maintaining Colle Complete if the organization answer			ar Assets.
	31 da 103 do 101111 330/1 a1t 11/ mile of		
If the organization elected, as permitted under art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to	SFAS 116, not to report in its revenue states held for public exhibition, education or rese	earch in furtherance o	
art, historical treasures, or other similar assets	SFAS 116, not to report in its revenue state s held for public exhibition, education or rese its financial statements that describes thes SFAS 116, to report in its revenue stateme ld for public exhibition, education, or researce	earch in furtherance o e items nt and balance sheet	f public service, works of art,
art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he	SFAS 116, not to report in its revenue states held for public exhibition, education or resolits financial statements that describes thes SFAS 116, to report in its revenue statemeld for public exhibition, education, or research	earch in furtherance of e items nt and balance sheet ch in furtherance of pu	f public service, works of art,
art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets hel provide the following amounts relating to these	SFAS 116, not to report in its revenue states held for public exhibition, education or resolits financial statements that describes thes SFAS 116, to report in its revenue statemeld for public exhibition, education, or research	earch in furtherance of e items nt and balance sheet th in furtherance of pu	f public service, works of art, iblic service,
art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to these (i) Revenues included in Form 990, Part VIII,	SFAS 116, not to report in its revenue states held for public exhibition, education or reservits financial statements that describes thes SFAS 116, to report in its revenue statemeld for public exhibition, education, or research items line 1 c, historical treasures, or other similar asset	earch in furtherance of e items nt and balance sheet th in furtherance of pu	of public service, works of art, ublic service,
art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to If the organization elected, as permitted under historical treasures, or other similar assets helprovide the following amounts relating to these (i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X If the organization received or held works of art	SFAS 116, not to report in its revenue states held for public exhibition, education or reserves its financial statements that describes thes SFAS 116, to report in its revenue statemeld for public exhibition, education, or research items line 1 c, historical treasures, or other similar asset its SFAS 116 relating to these items	earch in furtherance of e items nt and balance sheet th in furtherance of pu	of public service, works of art, ublic service,

Part	411 Organizations Maintaining Co	llections of Ar	t, His	stori	<u>cal T</u>	reasi	ures, or C	the	r Similar A	ssets	(coi	<u>ntınued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of tl	he fol	lowing	that a	re a significa	ant u	ise of its colle	ction		
а	Public exhibition		d	\vdash	Loan	orexo	hange prog	rams				
ь	Scholarly research		e	\vdash	O the	r						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and eval	ain ho	w the	v furth	ar tha	organization	'c a	vemnt nurnose	ın.		
7	Part XIV	·								: 111		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					nılar	ΓYe	·s	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ıızatıo			es" to Form			, 110
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets	not	┌ Ye	:s	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		_					
									Α	mount		
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lır	ne 21?	,			_			Γ γe	:s	
ь	If "Yes," explain the arrangement in Part XIV	,										
Pai	rt V Endowment Funds. Complete		n ans	swer	ed "Ye	es" to	Form 990,	Pai	rt IV, line 10			
		(a)Current Year	(b) Prior	Year	(c)Tv	wo Years Back	(d)	Three Years Back	(e) Fo	ur Ye	ars Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as							_		
а	Board designated or quasi-endowment											
ь	Permanent endowment											
c	Term endowment ▶											
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that	are hel	d and	admınıstere	d for	the	Гу	'es	No No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations								3	a(ii)		
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	d on S	Sched	lule R?	•			[3Ь		
4	Describe in Part XIV the intended uses of th	e organızatıon's en	dowm	ent fu	ınds							
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	<u>see F</u>	orm ^c	990, P	art X, line	10.	T			
	Description of investment				Cost or s (inves		(b)Cost or o basis (othe		(c) Accumulate depreciation	ed (d	l) Boo	k value
1a	Land						859	,428				859,428
Ь	Buildings											
	Leasehold improvements											
	Equipment											
	Other						33,548	3,260	4,529,6	664	29	,018,596
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>		mn (B), line	10(c).)	·					,878,024
	, (2)	, , , , , , , , ,	, -,		\ - / *	· .	<u>-</u>	•	Schedule	D (For		

Investments—Other Securities. See	orm 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	. ,	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion		(b) Book value
(
Zay a sassif			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	, line 25.		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X	, line 25. (b) A mount 470,901		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes OVERPAID MEMBERSHIP FEES	, line 25. (b) A mount 470,901		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	37,393,277
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	40,328,770
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,935,493
4	Net unrealized gains (losses) on investments	4	166,835
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	166,835
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-2,768,658
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	37,894,794
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	649,948
3	Subtract line 2e from line 1	3	37,244,846
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 148,431		
C	Add lines 4a and 4b	4c	148,431
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	37,393,277
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1 1	40,786,683
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	
a	Donated services and use of facilities		
ь	Prior year adjustments	1	
С	Other losses	1	
d	Other (Describe in Part XIV) 2d 606,344	1	
e	Add lines 2a through 2d	2e	606,344
3	Subtract line 2e from line 1	3	40,180,339
4	A mounts 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		
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	4c	148,431
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	40,328,770
Pai	rt XIV Supplemental Information	I I	· · · ·
Cor	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Po	art IV , line	s 1b and 2b,

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

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Ret urn Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS		FINISHING TRADES DISASTER-U RELIEF INTEREST INCOME 20 RESIDENCE HALL EXPENSE 465,703 COST OF GOODS SOLD 17,390
PART XII, LINE 4B - OTHER ADJUSTMENTS		GAIN ON FOREIGN CURRENCY TRANSLATION 53,395 BOND EXPENSE 7,224 COGS RETURNS & ALLOWANCES 87,812
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FINISHING TRADES DISASTER RELIEF-U ADMINISTRATIVE EXPENSES 123,251 RESIDENCE HALL EXPENSE 465,703 COST OF GOODS SOLD 17,390
PART XIII, LINE 4B - OTHER ADJUSTMENTS		COGS/RETURNS & ALLOWANCES 87,812 BOND EXPENSE 7,224 GAIN ON FOREIGN CURRENCY TRANSLATION 53,395

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DLN: 93493314023951

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

Name of the organization

Employer identification number

NT	ERNATIONAL UNION OF PAINT	EDS AND ALLT	ED TDADES			
	ERNATIONAL UNION OF FAINT	LKS AND ALLI	LD TRADES		35-0198600	
Pa	"Yes" to Form 990, Pa			he United States. C	Complete if the organiz	zation answered
1	For grantmakers. Does the of assistance, the grantees' eligible the grants or assistance?	organization r gibility for the	naıntaın record grants or assı:	stance, and the select	tion criteria used to aw	
2	For grant makers. Describe in Pa United States	irt V the organiz	zation's procedu	res for monitoring the us	e of grant funds outside t	he
3	Activites per Region (Use Part '	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g.,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	NORTH AMERICA		2	PROGRAM SERVICES	ORGANIZING ASSISTANCE AND AFFILIATION FEES RELATED TO CANADIAN AFFILIATES	575,154
3	Sub-total		2			575,154
	Total from continuation sheets					,

to Part I

c Totals (add lines 3a and 3b)

575,154

Pa	Part IV, I	ine 15, for any				nited States. Comp x if no one recipient			
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	Enter total nur	mber of recipie	ent organizations lis	ted above that are	recognized as chari	ties by the foreign o	country, recognized	as	
3		,	_	·		1(c)(3) equivalency		. ▶	
								Schedule F	(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>				
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	V	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
racitimer	Returniterence	Explanation

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DLN: 93493314023951 OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspect ion

INTERNATIONAL UNION OF PAINTE	RS AND ALLIED T	RADES					
						35-0198600	
Part I General Information	n on Grants and	Assistance					
 Does the organization maintain rethe selection criteria used to awa Describe in Part IV the organizat 	ard the grants or as:	sistance?					✓ Yes
Part II Grants and Other As Form 990, Part IV, line duplicated if additional	21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 503 Enter total number of other organ							1

	•	•
Part III	G	ants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 2
	Us	e Schedule I-1 (Form 990) ıf addıtıonal space ıs needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) S F RAFTERY SCHOLARSHIP	11	22,000			
(2) SPORTS SCHOLARSHIP	4	20,000			

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

Ident if ier	Return Reference	Explanation
	1	SCHEDULE I, PART I, LINE 2 ANY ORGANIZATION RECEIVING GRANTS OR ASSISTANCE FROM IUPAT MUST
MONITORING GRANTS		SUBMIT PROPER DOCUMENTATION AS TO ITS ELIGIBILITY TO RECEIVE SUCH ASSISTANCE ALL REQUESTS FOR
IN THE U S		GRANTS OR ASSISTANCE ARE REVEIWED BY IUPAT PERSONNEL

Software ID: **Software Version:**

EIN: 35-0198600

Name: INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
JAMES R HOFFA MEMORIAL SCHOLARSHIP FUND25 LOUISIANA AVE NW WASHINGTON,DC 20001	52-2206826	501(C)(3)	5,000				8TH ANNUAL "DRIVE FOR EDUCATION" INVITATIONAL GOLF TOURNAMENT			
A PHILIP RANDOLPH INSTITUTE815 16TH STREET NW WASHINGTON, DC 20006			5,000				41ST NATIONAL EDUCATION CONFERENCE			
THE ASSOCIATION OF WALL-CEILING & CARPENTRY INDUSTRIES OF NEW YORK INC125 JERICHO TURNPIKE SUITE 301 JERICHO, NY 11753			5,000				13TH ANNUAL SPRING DINNER & DANCE HONORING W SCOTT RIVES & JOSEPH RAMAGILA			
PAINTERS DISTRICT COUNCIL #141456 W ADAMS STREET CHICAGO,IL 60607			5,500				100TH ANNIVERSARY PARTY AND PATCH FUNDRAISER			
LABOR COUNCIL FOR LATIN AMERICAN ADVANCEMENT815 16TH STREET NW 4TH FLOOR WASHINGTON, DC 20006			10,000				18TH NATIONAL MEMBERSHIP CONVENTION			
AMERICA'S WORK FORCE 4091 ERIE STREET WILLOUGHBY,OH 44094			10,000				AMERICA'S WORK FORCE 17 YEARS			
THE AMERICAN FRIENDS OF THE YITZHAK RABIN CENTER (AFYRC)866 SECOND AVE 10TH FLOOR NEW YORK, NY 10017			5,000				HONOR TERRY O' SULLIVAN			
NATIONAL CAPITAL AREA COUNCIL9190 ROCKVILLE PIKE BESTHESDA,MD 20814			5,000				GOOD SCOUT AWARDS RECEPTION			
CORNELL UNIVERSITY815 16TH STREET NW WASHINGTON,DC 20006			5,000				54TH BEN MINTZ43/CFA GOLF OUTING			
UNION SPORTSMEN'S ALLIANCE3340 PERIMETER HILL DRIVE NASHVILLE,TN 37211			5,000				SPORTING CLAY SHOOTING 9/25/10			
WORKERS INDEPENDENT NEWS520 UNIVERSITY AVE SUITE 320 MADISON,WI 53703			5,000				WIN RADIO SUPPORT 2010			
THE INTERNATIONAL MASONARY FOUNDATION 620 F STREET NW WASHINGTON, DC 20004			5,000				JOHN FLYNN TRIBUTE			

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEBORAH HOSPITAL FOUNDATION218-14 NORTHERN BLVD BAYSIDE,NY 11361			6,500				EMERALD PACKAGE/EXTRA TABLE
COMMITTEE TO ELECT LE SAUNDERSPO BOX 517 LINDEN,MI 48451			5,000				THE COMMITTEE TO ELECT LEE SAUNDERSTHE COMMITTEE TO ELECT LEE SAUNDERS
BUILDING AND CONSTRUCTION TRADES DEPARTMENT815 16TH STREET NW WASHINGTON, DC 20006			10,000				NATIONAL LEGISLATIVE CONFERENCENATIONAL LEGISLATIVE CONFERENCE

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DLN: 93493314023951

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Name of the organization INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES **Employer identification number**

35-0198600

Pa	rt I Questions Regarding Compensation	า	<u>.</u>			
					Yes	Νο
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	굣	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses descr			1b	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive			2		No
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the					
	Compensation committee	Γ	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	Γ	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	Part VII	I, Section A, line $1 extstyle{a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymer	nt from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplemen	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		
Ь	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation ع	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) JAMES A WILLIAMS	(1) (11)		0	55,053 0	37,620 0	37,902 0	432,338	
(2) GEORGE GALIS	(1) (11)		0	43,006	35,256 0	39,808 0	344,392	
(3) KENNETH E RIGMAIDEN	(1) (11)		- 1	45,944 0	26,411 0	30,805 0	329,482	
(4) WILLIAM D CANDELORI JR	(1) (11)		0	38,556 0	20,468 0	17,282 0	257,364	
(5) RAYMOND PRICE III	(1) (11)		0	40,361	23,032	21,504 0	265,955	
(6) RAYMOND N SESMA	(1) (11)		0	41,853 0	21,745 0	18,454 0	263,110	
(7) ROBERT KUCHERAN	(1) (11)		- 1	0	5,125 0	6,130 0	212,142	
(8) CHARLES D HARRIS	(1) (11)			39,848 0	24,640 0	19,738 0	234,237	
(9) WILLIAM A COURTIEN	(1) (11)		0	44,715 0	18,543 0	15,943 0	227,459	
(10) GREGORY D RAFTERY	(1) (11)		0	36,743 0	10,100	15,832 0	177,108	
(11) TIMOTHY A STRICKER	(1) (11)		0	38,790 0	15,836 0	13,720 0	208,346	
(12) RICK L ROOT	(ı) (ıı)		0 0	0	28,141 0	15,985 0	179,196 0	
(13) HARRY J ZELL	(ı) (ıı)		- 1	0	29,521 0	16,332 0	185,666	
(14) JAMES A WILLIAMS JR	(ı) (ıı)		0	0	11,603	17,024 0	182,529	
(15) JACK HAYN	(ı) (ıı)		- 1	0	15,598 0	7,977 0	1	
(16) GAVIN MCDONALD	(I) (II)			0	21,599	17,319 0		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Explanation
RST CLASS AIR TRAVEL FOR GENERAL EXECUTIVE BOARD MEMBERS IS LIMITED TO FLIGHTS THAT EXCEED ONE AND ONE HALF HOURS (1 1/2) IN JRATION UNLESS PRIOR AUTHORIZATION IS GRANTED BY THE GENERAL PRESIDENT AIR FARE FOR TRAVEL COMPANIONS IS REPORTED AS DEPOSED ON THE OFFICERS AND EMPLOYEES WHO RECEIVED THE BENEFIT SECTION 44(G) OF IUPAT'S CONSTITUTION DISCUSSES DEPOSED ON THE GENERAL PRESIDENT, EXECUTIVE GENERAL VICE PRESIDENT AND ENERAL SECRETARY-TREASURER ARE \$10,000, \$3,000 AND \$3,000, RESPECTIVELY THE DISCRETIONARY ACCOUNTS ARE DISCUSSED IN ECTIONS 48, 50 AND 61 OF IUPAT'S GENERAL CONSTITUTION PAYMENTS FOR BUSINESS USE OF PERSONAL RESIDENCE ALLOWANCE IS EPORTED AS COMPENSATION FOR OFFICERS RAYMOND PRICE, WILLIAM CANDELORI, JR, RAYMOND SESMA AND ROBERT KUCHERAN BUSINESS OF PERSONAL RESIDENCE ALLOWANCE IS DISCUSSED IN IUPAT WRITTEN EXPENSE POLICY HIGHLY COMPENSATED EMPLOYEES GREGORY DOWN AFTERY, TIMOTHY A STRICKER AND JACK HAYN MOVED TO THE IUPAT REGION DURING 2008 IUPAT PAID THE APARTMENT LEASE FOR MR

Schedule J (Form 990) 2010

Software ID: Software Version:

EIN: 35-0198600

Name: INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

orm 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	C compensation	(C) Deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation (ii) Bonus & Incentive compensation		(iii) Other compensation	compensation	Deficits	(B)(ı)-(D)	990 or Form 990-EZ
JAMES A WILLIAMS	(I) (II)		o 0	55,053 0	37,620 0	37,902 0	432,338	0
GEORGE GALIS	(I) (II)		0	43,006 0	35,256 0	39,808 0	344,392 0	0
KENNETH E RIGMAIDEN	(I) (II)		0	45,944 0	26,411 0	30,805 0	329,482 0	0
WILLIAM D CANDELORI JR	(I) (II)		0 0	38,556 0	20,468 0	17,282 0	257,364 0	0
RAYMOND PRICE III	(I) (II)		0	40,361 0	23,032 0	21,504 0	265,955 0	0
RAYMOND N SESMA	(I) (II)	181,058 0	0	41 ,853 0	21,745 0	18,454 0	263,110 0	0
ROBERT KUCHERAN	(I) (II)	200,887 0	0	0	5,125 0	6,130 0	212,142	0
CHARLES D HARRIS	(I) (II)	150,011 0	0	39,848 0	24,640 0	19,738 0	234,237	0
WILLIAM A COURTIEN	(I) (II)		0 0	44 ,7 1 5 0	18,543 0	15,943 0	227,459 0	0
GREGORY D RAFTERY	(I) (II)	114,433 0	0	36,743 0	10,100	15,832 0	177,108 0	0
TIMOTHY A STRICKER	(I) (II)		0	38,790 0	15,836 0	13,720 0	208,346	0
RICK L ROOT	(I) (II)		0	0	28,141 0	15,985 0	179,196 0	0
HARRY J ZELL	(I) (II)		0	0	29,521 0	16,332 0	185,666 0	0
JAMES A WILLIAMS JR	(I) (II)		0	0	11,603 0	17,024 0	182,529 0	0
JACK HAYN	(I) (II)		0	0	15,598 0	7,977 0	165,327 0	0
GAVIN MCDONALD	(I) (II)	127,609 0	0	0	21,599 0	17,319 0	166,527 0	0

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As Filed Data -

DLN: 93493314023951

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. 2010

Open to Public Inspection

Name of the organization INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES						E	Employer identification number				
INTERNATIONAL ORIGIN OF TAINTERS AND	, ALLIED	TRADES					3	5-01986	00		
Part I Excess Benefit Tra	nsacti	ions (s	ection 501	(c)(3) a	and section 501	(c)(4)	organı	zations d	only).		
Complete if the organiza	tion ans	wered "	'Yes" on For	m 990, I	Part IV , line 25a o	or 25b,	or Form	990-EZ,	Part V , I		
1 (a) Name of disqualified per				(b) Description of trans			saction		<u> </u>	(c) Corrected?	
										Yes	No
2 Enter the amount of tax impos	sed on t	he orga	nization man	aders of	r disqualified ners	ons dur	ına the v	ear unde	-		•
		· · ·		_			-	_	· \$		
3 Enter the amount of tax, if any	, on line	e 2, abo	ve, reimburs	ed by th	ne organization .			🕨	· \$		
Part II Loans to and/or) D 1// l 2.6		000 [-7 D+V	l 20	_	
Complete If the organ			d tes on r	orm 990	, Part IV, line 26	, or For	11 990-1	(f)	, ime 38	<u>a</u>	
(-) Name of out on the discussion and		oan to om the	(-)0			(e) :	[n	Approv	ed .	(g)Written	
(a) Name of interested person and purpose		zation?	(c)Orig		(d)Balance due	defau	lt?	by board or		agreemer	ıt?
pa.pood		1	-				T N-	committ	1	+	No.
	То	From				Yes	No	Yes	No	Yes	No
	+						1				
	1	1									
	1										
Total	. .			▶ s	•				·		
Part IIII Grants or Assista	nce Be	enefitt	ing Inter	ested	Persons.	•					
Complete if the org	<u>anızatı</u>	on ans	wered "Yes	" on Fo	rm 990, Part IV	/, line 2	27.				
(a) Name of interested per	son	(een interested per ganization	rson	(c) A n	nount of g	rant or ty	pe of assis	tance

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization answered Tes On Form 990, Part IV, line 20a, 20b, or 28c.								
(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?				
	organization			Yes	No			
(1) RASHIDA A RIGMAIDEN	FAMILY MEMBER OF KENNETH E RIGMAIDEN, EXECUTIVE GENERAL VICE PRESIDENT	· ·	RECEIVES COMPENSATION AS EMPLOYEE OF IUPAT		No			

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493314023951

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010

Open to Public

Inspection Employer identification number

Name of the organization
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

employer identification number

35-0198600

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2		JAMES A WILLIAMS/GENERAL PRESIDENT AND JAMES A WILLIAMS JR/REG ORG COORDINATOR ARE FATHER AND SON

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES (IUPAT) IS A MEMBERSHIP ORGANIZATION MEMBERSHIP TO IUPAT AND THE RIGHTS AND BENEFITS OF MEMBERSHIP ARE DISCUSSED IN SECTIONS 85 THROUGH 117 OF IUPAT'S CONSTITUTION WHICH CAN BE VIEWED ON ITS WEB-SITE WWW IUPAT ORG

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		NOMINATIONS AND ELECTIONS OF OFFICERS OF THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES (IUPAT) ARE DISCUSSED IN SECTIONS 149 THROUGH 152 OF IUPAT'S CONSTITUTION WHICH CAN BE VIEWED ON ITS WEB-SITE WWW IUPAT ORG

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES (IUPAT) FORM 990 IS PREPARED BY ITS INDEPENDENT PUBLIC ACCOUNTANT WHO THEN FORWARDS THE RETURN TO IUPAT'S GENERAL SECRETARY-TREASURER, WHO REVIEWS AND AUTHORIZES FOR FILING THE GOVERNING BODY IS PROVIDED AN ELECTRONIC COPY OF FORM 990 PRIOR TO FILING

ldentifier	Return Reference	Explanation
	, , ,	THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES (IUPAT) MAKES ITS GOVERNING DOCUMENT (CONSTITUTION) AVAIABLE TO THE PUBLIC ON ITS WEB-SITE WWW IUPAT ORG IUPAT MAKES ITS FINANCIAL STATEMENTS MADE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 166,835

Identifier	Return Reference	Explanation
	FORM 990, PART XII LINE 2B	THE INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES FINANICAL STATEMENTS ARE AUDITED AS PART OF A CONSOLIDATED FINANCIAL STATEMENT WHICH INCLUDE POLITICAL ACTION TOGETHER FUNDS, FINISHING TRADES DISASTER RELIEF FUND, BUILDING CORP AND JOB CORPS

Identifier	Return Reference	Explanation						
	, ,	AS STATED IN SECTION 24 OF THE GENERAL CONSTITUTION, THE MEMBERSHIP OF IUPAT ELECTS THE GOVERNING BODY EVERY 5 YEARS AT ITS GENERAL CONVENTION THE LAST GENERAL CONVENTION WAS HELD IN AUGUST 2010						

Identifier	Return Reference	Explanation						
	FORM 990, PART V, LINE 1A	IUPAT ISSUED 16 FORMS 1099, IUPAT BUILDING CORP LLC, EIN 20-1975167, ISSUED 7 FORMS 1099 AND JOB CORPS, EIN 52-0886811, ISSUED 0 FORMS 1099						

Identifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 10A	IUPAT HAS 34 DISTRICT COUNCILS AND APPROXIMATELY 376 LOCAL UNIONS THROUGHOUT THE UNITED STATES AND CANADA ALL DISTRICT COUNCILS AND LOCAL UNIONS ARE GOVERNED BY IUPAT'S GENERAL CONSTITUTION AND THE LAWS STATED THEREIN

Identifier	Return Reference	Explanation
	FORM 990, PART VI, LINE 15	THE SALARIES OF THE GENERAL PRESIDENT, EXECUTIVE GENERAL VICE PRESIDENT, GENERAL VICE PRESIDENTS AND GENERAL SECRETARY TREASURER ARE GOVERNED BY SECTIONS 48, 50, 53 AND 61 RESPECTIVELY OF THE GENERAL CONSTITUION

ldentifier	Return Reference	Explanation						
	FORM 990, SCHEDULE J, LINE 2	THE DISCRETIONARY SPENDING ACCOUNTS OF THE GENERAL PRESIDENT, EXECUTIVE GENERAL VICE PRESIDENT AND GENERAL SECRETARY-TREASURER DO NOT REQUIRE SUBSTANTIATION THE OFFICE ALLOWANCES FOR THREE GENERAL VICE-PRESIDENTS DO NOT REQUIRE SUBSTANTIATION ALL OTHER ITEMS LISTED ON LINE 1A OF SCHEDULE J REQUIRE SUBSTANTIATION FOR REIMBURSEMENT						

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2010

DLN: 93493314023951

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Employer identification number

35-0198600

Part I Identification of Disregarded Entities (Com	plete	e if the organizat	ion	answered "Ye	or	n Form 990, Part	IV, line 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controllin entity	g	
(1) IUPAT BUILDING CORP LLC 7234 PARKWAY DRIVE HANOVER, MD 21076 20-1975167		TITLE HOLDING CORP		DC		1,747,068	30,738,74	16		
(2) JOB CORPS 7234 PARKWAY DRIVE HANOVER, MD 21076 52-0886811		JOB CORP PROGRAM		DC		6,796,843		0		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during			elft	the organizatio	n ar	nswered "Yes" or	n Form 990, Part I	IV, line 34 becaus	e ıt had	one
(a) Name, address, and EIN of related organization	(a) Name, address, and EIN of related organization		Lega or	(c) egal domicile (state or foreign country)		(d) empt Code section	(e) Public charity status (if section 501(c)(3))	charity status Direct controlling		g) 12(b)(1: rolled ızatıon
(1) IUPAT - POLITICAL ACTION TOGETHER - LEGISLATIVE AND EDUCATIONAL									Yes	No
FUND 7234 PARWAY DRIVE		ITICAL ACTION		DC		SECTION 527				No
HANOVER, MD 21076 23-7387939	COM	СОММІТТЕЕ								
(2) IUPAT - POLITICAL ACTION TOGETHER - PC										
7234 PARWAY DRIVE		ITICAL ACTION		DC		SECTION 527				No
HANOVER, MD 21076 23-7185561	COMIN	MMITTEE								
(3) PAINTERS AND ALLIED TRADES FOR CHILDREN'S HOPE FOUNDATION										
7234 PARWAY DRIVE HANOVER, MD 21076	CHAR	CHARITY		DC		501(C)(3)	170(B)(1)(A)(VI)			No
52-2318869 (4) IUPAT 401K PLAN										
7234 PARWAY DRIVE	DENC			200		404(4)/504(4)				
HANOVER, MD 21076 35-0198600	PENS	NSION FUND		DC		401(A)/501(A)				No
(5) FINISHING INDUSTRIES DISASTER RELIEF FUND - U										
7234 PARWAY DRIVE	CHAR			DC		501(C)(3)	170(B)(1)(A)(VI)			No
HANOVER, MD 21076 20-3571726										
(6) JOB CORPS 401K PLAN										
7234 PARWAY DRIVE HANOVER, MD 21076	PENS	ION FUND		DC		401(A)/501(A)				No
52-0886811										

(a) ame, address, and EIN of related organization	(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) f end-of-year assets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No		
				ble as a Corpora zations treated as a						nswered "Y	'es" on	Form	990,	Part IV,	
Name, address, an	(a) d EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	j) e of f-year ets		(h) Percentage ownership	
				1	1		1		1						

(5)

(6)

Pa	Transactions With Related Organizations (Complete if the organization answered "Ye Note. Complete line 1 if any entity is listed in Parts II, III or IV	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, 0F 36.)	Ye	s No			
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related orga	inizations listed in Part	c II-IV2		+	+			
a	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	mizations nated in rait	3 11 14	1a	+	No			
ь									
	Gift, grant, or capital contribution from other organization(s)			10		No			
d	and, grant, or capital contribution with other organization(c)								
e									
f	Sale of assets to other organization(s)			1f	1	No			
g	Purchase of assets from other organization(s)			19	ı	No			
h	Exchange of assets			11		No			
i	i Lease of facilities, equipment, or other assets to other organization(s)								
j	j Lease of facilities, equipment, or other assets from other organization(s)								
k	k Performance of services or membership or fundraising solicitations for other organization(s)								
ı	Performance of services or membership or fundraising solicitations by other organization(s)								
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n									
0	Reimbursement paid to other organization for expenses			10	,	No			
p	Reimbursement paid by other organization for expenses			11	Ye	5			
q	O ther transfer of cash or property to other organization(s)			10		No			
r	O ther transfer of cash or property from other organization(s)			11		No			
	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, i	ıncludıng covered relat	ionships and transact	ıon thresholds					
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ		ımount			
(1) IL	JPAT - POLITICAL ACTION TOGETHER - LEGISLATIVE AND EDUCATIONAL FUND	Р	97,592	FMV					
(2) IL	IPAT - POLITICAL ACTION TOGETHER - LEGISLATIVE AND EDUCATIONAL FUND	N	985,089	FMV					
(3)									
(4)									

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eneral or anaging eartner?	
			Yes	No		Yes	No		Yes	N	
										+	
										-	
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

Software ID:

Software Version: EIN: 35-0198600

Name: INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity (state or foreign country)		(d) Exempt Code section	(e) Public charity status (if section 501(c) (3)) (f) Direct controlling entity		Sectio (b)(contr	(g) on 512 o(13) trolled nization	
						Yes	No	
IUPAT - POLITICAL ACTION TOGETHER - LEGISLATIVE AND EDUCATIONAL FUND 7234 PARWAY DRIVE HANOVER, MD21076 23-7387939	POLITICAL ACTION COMMITTEE	DC	SECTION 527				No	
IUPAT - POLITICAL ACTION TOGETHER - PC 7234 PARWAY DRIVE HANOVER, MD21076 23-7185561	POLITICAL ACTION COMMITTEE	DC	SECTION 527				Νο	
PAINTERS AND ALLIED TRADES FOR CHILDREN'S HOPE FOUNDATION 7234 PARWAY DRIVE HANOVER, MD21076 52-2318869	CHARITY	DC	501(C)(3)	170(B)(1)(A)(VI)			Νο	
IUPAT 401K PLAN 7234 PARWAY DRIVE HANOVER, MD21076 35-0198600	PENSION FUND	DC	401(A)/501(A)				No	
FINISHING INDUSTRIES DISASTER RELIEF FUND - U 7234 PARWAY DRIVE HANOVER, MD21076 20-3571726	CHARITY	DC	501(C)(3)	170(B)(1)(A)(VI)			No	
JOB CORPS 401K PLAN 7234 PARWAY DRIVE HANOVER, MD21076 52-0886811	PENSION FUND	DC	401(A)/501(A)				No	