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SCANNED APR 28 2011

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

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

A	For the	2010 calendar year, or tax year beginning and e	nding		
В	Check if	C Name of organization		D Employer identific	cation number
4		UNITED UNION OF ROUTERS, WATERPROOFERS	3 &		
	Addre	ALLIED WORKERS LOCAL 26, AFL-CIO			
	Name chang	Doing Business As		35-0	789161
$\bar{\Gamma}$	initial return		Room/suite	E Telephone number	
F	Termi				756-3713
F	Amen	ded		G Gross receipts \$	545,360.
┢	Appik	* MERRILLVILLE, IN 46410		H(a) Is this a group re	
_	pendi	F Name and address of principal officer:JEFF LUSSOW		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
-			r 527	1 ' '	
		empt status:501(c)(3)X501(c) (5) ◀ (insert no.) 4947(a)(1) on the: ▶ WWW • ROOFERS 26 • COM	1 321	,	list. (see instructions)
			I ver	H(c) Group exemption	
_			L Year	or formation: 1313 N	State of legal domicile: IN
P	art I j	Summary	· 10170		
æ	1	Briefly describe the organization's mission or most significant activities: LABOR	R UNIO	<u> </u>	
Activities & Governance	ł			~=	
Ē	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	sets.
Š		1 (1 ta) Appet of Area for the Appetulation of the Harring population of the Harring popula		3	
ن مع	4	Number of independent voting members of the governing body (Part VI, line $ \mathbf{b} $	À EUS		8
S	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a) 🕍	APR	1 2 2011	3
viti	6	Total number of volunteers (estimate if necessary)	<i>.</i>		0
ĆĖ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	non	74	0.
٩	Ь	Net unrelated business taxable Income from Form 990-T, line 34	الالالالا	CN. III. 761	
				Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Revenue	1	Program service revenue (Part VIII, line 2g)		518,172.	470,237.
Š		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	" -	562.	855.
æ				74,515.	74,268.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	593,249.	545,360.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	·	6,186.	6,820.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	· · ·	0,100.	0,020.
		Benefits paid to or for members (Part IX, column (A), line 4)	⊢	315,789.	323,824.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	}_	0.	
ë	1	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	<u>U•</u>	0.
X		Total fundraising expenses (Part IX, column (D), line 25)	<u>•</u>		0.48 00.5
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		223,687.	247,336.
	18	Total expenses. Add lines 13·17 (must equal Part IX, column (A), line 25)]	545,662.	577,980.
	19	Revenue less expenses. Subtract line 18 from line 12		47,587.	-32,620.
sets or			Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,248,791.	1,217,636.
₩	21	Total liabilities (Part X, line 26)	🗀	11,387.	12,852.
Net As Fund B	22	Net assets or fund balances. Subtract line 21 from line 20		1,237,404.	1,204,784.
	art II	Signature Block			
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of my	knowledge and belief, it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			
_		I golf Lusson		3/11/11	
Sig	n	Signature de difficer		Date	
Her		▲ JEFF LUSSOW, FINANCIAL SEC'Y TREASURER	2		
nei	e	Type or print name and title	<u>` </u>		
_		Print/Type preparer's name Priparer's signature	7.11	Date / Check	TT PTIN
Dale		Profuge preparer's name LEGACY PROFESSIONALS LLP	tala list	3/87/1 II self-employe	- 7∤
Paid				1	<u> </u>
	parer	Firm's name LEGACY PROFESSIONALS (LLP		Firm's EIN ▶	
use	Only	Firm's address > 9301 CALUMET AVENUE			10 026 1065
_		MUNSTER, IN 46321		Phone no. 2	19-836-1065
May	the If	S discuss this return with the preparer shown above? (see instructions)			X Yes No
0320	01 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instruction	ns.		Form 990 (2010)

UNITED UNION OF ROOFERS, WATERPROOFERS & ALLIED WORKERS LOCAL 26, AFL-CIO

	1 990 (2010) ALLIED WORKERS LOCAL 26, AFL-CIO	35-0789161	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission: LABOR UNION		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		es X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Y	es X No
4	If "Yes," describe these changes on Schedule O Describe the exempt purpose achievements for each of the organization's three largest program services by ex		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of allocations to others, the total expenses, and revenue, if any, for each program service reported	grants and	
4a	(Code) (Expenses \$ including grants of \$)(Reference of the condition of	evenue \$IAL_ADVANCE	EMENT)
4b	(Code:) (Expenses \$including grants of \$) (Recode:)	evenue \$	
	/(Expenses t		′
			·
4c	(Code:) (Expenses \$including grants of \$) (Re	evenue \$)
4d 	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	_,,
<u>4e</u>	Total program service expenses ►		990 (2010)

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			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		<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
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? If "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	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X	· (1	* `*	
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		<u> </u>
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		_X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		х
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		X
13	S TO THE STATE OF	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
Þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	ا بيرا	l	v
16	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		<u>X</u>
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note . Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
		Form!	990 (2	2010)

Form 990 (2010)

ALLIED WORKERS LOC
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l _
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			,,
	Schedule K. If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04.5		
4	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24U		\vdash
~	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			\vdash
	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		X
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			l
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions).			- <u>-</u> -
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
	An entity of which a current or former officer, director, trustee, or key employee; in 7es, complete ocheouse 2, Fart 17	200		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
34	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity?	33		<u> </u>
54	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		l
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	l	v	
	Note. All Form 990 filers are required to complete Schedule O	38_	X	0040;
		rom	コブリ (2010)

X

Form **990** (2010)

14a

	UNITED UNION OF ROOFERS, WATERPROOFER				
	990 (2010) ALLIED WORKERS LOCAL 26, AFL-CIO	35-0789	<u> 161</u>	P	age
Par					
	Check if Schedule O contains a response to any question in this Part V	<u> </u>			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 2			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?		1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 3	ļ		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ns?	2b	Х	ــــــ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		<u> </u>
4a	At any time duning the calendar year, did the organization have an interest in, or a signature or other	authority over, a			l
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial	Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		_5c	ļ	↓
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			1
	any contributions that were not tax deductible?		6a	X	↓
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).				l <u>.</u> _
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sei	vices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		ــــــ
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required		ŀ	l
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	ļ		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontract?	7e		↓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		↓
-	If the organization received a contribution of qualified intellectual property, did the organization file Fo	•	7g		└
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		↓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Description of the section 509(a)(3) supporting organizations.				ļ
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any time during the year?	8_		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a	<u> </u>	—
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		₩
10	Section 501(c)(7) organizations. Enter:	1 1			
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b [-	1	
11	Section 501(c)(12) organizations. Enter:	L., 1			
	Gross income from members or shareholders	11a	1		
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against		1		
	amounts due or received from them)	11b	 	<u> </u>	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	├	₩
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	ł		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>	ļ	┼
а	Is the organization licensed to issue qualified health plans in more than one state?	-	13a	<u> </u>	₩
	Note. See the instructions for additional information the organization must report on Schedule O				
ь	Enter the amount of reserves the organization is required to maintain by the states in which the		Ī	1	Ī

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13b

13c

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

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ALLIED WORKERS LOCAL 26, AFL-CIO

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

	Check if Schedule O contains a response to any question in this Part VI			<u> </u>					
Sec	tion 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 1a 1a 1								
b	Enter the number of voting members included in line 1a, above, who are independent 1b								
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		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			7.7					
	of officers, directors or trustees, or key employees to a management company or other person?	3		X					
4									
5									
6	Does the organization have members or stockholders?	_6_	X	_					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	_	v						
	governing body?	7a	X						
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year								
	by the following:		X						
а	The governing body?	8a		X					
b	Each committee with authority to act on behalf of the governing body?	8b		<u> </u>					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		v					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
		T40-	Yes	No X					
	Does the organization have local chapters, branches, or affiliates?	10a							
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	1		ĺ					
	and branches to ensure their operations are consistent with those of the organization?	10b	X	├──					
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	A	$\vdash \lnot$					
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-		X					
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a							
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	406	İ						
	to conflicts?	12b		\vdash					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-							
	in Schedule O how this is done	12c		х					
13	Does the organization have a written whistleblower policy?	13	_	X					
14	Does the organization have a written document retention and destruction policy?	14		 					
15	Did the process for determining compensation of the following persons include a review and approval by independent	1							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a		X					
	The organization's CEO, Executive Director, or top management official	15a		X					
b	Other officers or key employees of the organization	130							
40	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	16a		X					
	taxable entity during the year?	IUa	 	-					
D	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								
	·	16b							
500	exempt status with respect to such arrangements?	1 100							
	List the states with which a copy of this Form 990 is required to be filed ►IN								
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for							
18	public inspection. Indicate how you make these available. Check all that apply.								
	(V)								
40	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	and fina	ancial						
19	statements available to the public.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation.	•						
20	JEFF LUSSOW - (219)756-3713		_						
	25 WEST 84TH AVENUE, MERRILLVILLE, IN 46410								
				_					

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ALLIED WORKERS LOCAL 26, AFL-CIO

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

Check if Schedule O contains a response to any question in this Part VII

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. 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.

Name and Title	Average hours per	ŀ		_						(F)	
	hours ner				Reportable	(E) Reportable	Estimated				
		(cl	heck all that apply)			арр	ly)	compensation	compensation	amount of	
	week (describe hours for related organizations		institutional trustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related	
	in Schedule O)	Indiv	Institu	Officer	Key er	Highe emplo	Forme			organizations	
JEFF LUSSOW			Г								
FINANCIAL SEC'Y	40.00	L		X				95,253.	0.	39,273	
CHARLES SCHWUCHOW				i .				•			
PRESIDENT	3.00			X				0.	0.	0.	
RON STALBAUM	1	1	Ì	<u>'</u>							
VP - PAST	2.00			X				0.	0.	0.	
DALE KIEPURA			[- -		
REC SEC - PAST	2.00			X				0.	0.	0.	
TIM RITTER											
SERGANT AT ARMS - PAST	2.00			X				0.	0.	0.	
BOB BUXTON											
EXEC BOARD	2.00			X				0.	0.	0.	
DAN FILLA									-		
EXEC BOARD	2.00			X				0.	0.	0.	
DAN KNIGHT											
EXEC BOARD	2.00			X				0.	0.	0.	
JESSIE NETTROUR											
EXEC BOARD - PAST	2.00	L		Х				0.	0.	0.	
MICHAEL SPRAGGINS											
EXEC BOARD	2.00			X				0.	0.	0.	
MARK BASS										-	
VICE PRESIDENT	2.00	L		X				0.	0.	0.	
KBITH VITKOVICH	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1									
REC SEC	2.00			X				0.	0.	0.	
JUSTIN GUST											
SERGANT AT ARMS	2.00		L	X		_		0.	0.	0.	
							-				
							_				

Form 990 (2010)

Part VII Section A. Officers, Directors, Tru		nple	oyee			High	est						
(A)	(B)				(C) (D) (E						_	(F)	
Name and title	Average hours per	l (c				app	lv)	Reportable Reportab compensation compensation				timate iount (
	week	├	T			T	,,, 	from	from related			other	,,
	(describe	Individual trustee or director						the	organization			pensa	
	hours for related	50 80	stee		ļ	sated		organization	(W-2/1099-MIS	3C)		om the	
	organizations	truste	al trus		ag.	e e		(W-2/1099-MISC)			_	anızatı 1 relate	
	ın Schedule	Nd tal	Institutional trustee	Je:	Key employee	Highest compensated employee	ě					nızatı	
	0)	Ē	ısı	Officer	Key	宝島	ফু						_
-													
		┢				\vdash							
		_				\vdash				-			
						igspace							
			<u> </u>			$oxed{igspace}$							
-													
						T							
1b Sub-total	<u> </u>				L	Ļ		95,253.		0.	3,	9,2	73.
c Total from continuation sheets to Part V	II. Section A							0.		0.		, _	0.
d Total (add lines 1b and 1c)	.,					•		95,253.		0.	3.	9,2	73.
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed al	bov	e) wl	no re	eceived more than \$100),000 ın reportab	e			
compensation from the organization											Т	Yes	No
3 Did the organization list any former officer,	director or tru	stee	, ke	y em	nplo	yee,	or h	nighest compensated er	nployee on	ļ		103	
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su			•					•	the organization	1			37
and related organizations greater than \$15											4		X
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," corr							elat	ed organization or indiv	idual for services		5		X
Section B. Independent Contractors	piete Gariedan		O, 31	<i></i>	perc	3011							
Complete this table for your five highest co the organization NONE	mpensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of con	npens	ation f	rom	
(A)								(B)			(C		
Name and business	address						\dashv	Description of s	services		comper	nsatio	<u> </u>
				·									
	-												
													
							\dashv						
2 Total number of independent contractors (including but n	ot li	mite	d to	tho	se li	stec	d above) who received n	nore than				
\$100,000 in compensation from the organi	_					0		<u> </u>				200	
											Form 9	990 c	מומכ

Part VIII Statement of Revenue (D) Revenue excluded from (A) (B) (C) Unrelated Total revenue Related or exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 900099 465,317. 465,317. 2 a MEMEBERSHIP DUES AND A Program Service Revenue 4,920 EDUCATIONAL FUND 900099 4,920. All other program service revenue 470,237 Total. Add lines 2a-2f Investment income (including dividends, interest, and 855 855. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ii) Personal (i) Real 22,100. 6 a Gross Rents **b** Less rental expenses 22,100. c Rental income or (loss) 22,100. 22,100. d Net rental income or (loss) 7 a Gross amount from sales of (i) Secunties (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from garning activities See Part IV, line 19 b Less, direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 51,614 PROMOTION REVENUE 900099 51,614. MISCELLANEOUS 900099 554 554. All other revenue 52,168. Total. Add lines 11a-11d 545,360. 487,417 57,943. Total revenue. See instructions. 032009 12-21-10

35-0789161 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B) (C), and (D).

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). Do not include amounts reported on lines 6h (A) (B) (C) (D)								
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses			
1	Grants and other assistance to governments and		· · · · · · · · · · · · · · · · · · ·					
	organizations in the U.S. See Part IV, line 21	700.						
2	Grants and other assistance to individuals in							
	the U.S See Part IV, line 22	6,120.						
3	Grants and other assistance to governments,							
	organizations, and individuals outside the U.S							
	See Part IV, lines 15 and 16	1		1				
4	Benefits paid to or for members							
5	Compensation of current officers, directors,		_					
	trustees, and key employees	134,526.						
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 salanes and wages	123,651.						
3	Pension plan contributions (include section 401(k)							
	and section 403(b) employer contributions)	20,018.						
9	Other employee benefits	27,570.						
0	Payroll taxes	18,059.						
1	Fees for services (non-employees)							
а	Management			<u> </u>				
	Legal	3,425.	-					
С	Accounting	5,650.						
d	Lobbying							
е	Professional fundraising services. See Part IV, line 17		,					
f	Investment management fees							
g	Other							
2	Advertising and promotion	56,821.						
3	Office expenses	13,221.						
4	Information technology							
5	Royalties							
6	Occupancy	15,105.						
7	Travel	7,076.						
В	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
9	Conferences, conventions, and meetings	959.						
0	Interest							
1	Payments to affiliates	104,574.						
2	Depreciation, depletion, and amortization	8,803.						
3	Insurance	4,955.						
4	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 0.)							
а	REIMBURSED BUSINESS EXP	13,250.						
a b	PICKET EXPENSE	12,153.		 				
c	MEMBER PICNIC EXPENSE	590.	-					
d	DUES & SUBSCRIPTIONS	501.		-				
e	DRUG TESTING	200.						
e	All other expenses	53.		 				
-	Total functional expenses. Add lines 1 through 24f	577,980.		 				
<u>5</u> 8	Joint costs. Check here If following SOP	3.,,500		<u> </u>				
6	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							

Pa	rt X	Balance Sheet				
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1	
	2	Savings and temporary cash investments		966,923.	2	943,769.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, d				
	}	employees, and highest compensated employe				
	l	of Schedule L		5	· · · · · · · · · · · · · · · · · · ·	
	6	Receivables from other disqualified persons (as				
		4958(f)(1)), persons described in section 4958(c				
		employers and sponsoring organizations of sec				
S.		employees' beneficiary organizations (see instru	uctions)		6	
Assets	7	Notes and loans receivable, net			7	
Ş	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 369,786			مستمر سراسا سرامي الساسات
	b	Less: accumulated depreciation	10b 95,919	281,868.	10c	273,867
	11	Investments - publicly traded securities		11		
	12	Investments - other securities See Part IV, line			12	
	13	Investments - program-related See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	1,248,791.	16	1,217,636	
	17	Accounts payable and accrued expenses		17	 -	
	18	Grants payable			18	
	19	Deferred revenue		,	19	
	20	Tax-exempt bond liabilities			20	
ies	21	Escrow or custodial account liability. Complete			21	
Liabilities	22	Payables to current and former officers, directo	- · ·			
		highest compensated employees, and disqualif	ed persons Complete Part II			
_		of Schedule L			22	<u></u> .
	23	Secured mortgages and notes payable to unrela	' <u>'</u>		23	.
	24	Unsecured notes and loans payable to unrelate	d third parties	11 207	24	10 050
	25	Other liabilities. Complete Part X of Schedule D		11,387.	25	12,852
	26	Total liabilities. Add lines 17 through 25		11,387.	26	12,852.
		Organizations that follow SFAS 117, check he	ere and complete			
Net Assets or Fund Balances	~	lines 27 through 29, and lines 33 and 34.		1,237,404.		1,204,784.
lian	27	Unrestricted net assets		1,237,404.	27	1,204,704
20	28 29	Temporarily restricted net assets	•		28	
	29	Permanently restricted net assets	hadi basa 🔊 🗍 and		29	
L		Organizations that do not follow SFAS 117, c	heck here and			
2	30	complete lines 30 through 34.				
200	30	Capital stock or trust principal, or current funds			30	
ž	31	Paid-in or capital surplus, or land, building, or ed			31	
2	32	Retained earnings, endowment, accumulated in	come, or other funds	1,237,404.	32	1 204 704
	33	Total net assets or fund balances	••		33	1,204,784
	34	Total liabilities and net assets/fund balances	<u> </u>	1,248,791.	34	1,217,636

Form **990** (2010)

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3a

X

Act and OMB Circular A-133?

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

• Section 501(c)(4), (5), or (6) organiza		1ax), or Form 990-E.	2, Part V, line 35a (P	roxy rax), tnen
Name of organization UNITED ALLIED	UNION OF ROOFERS, WORKERS LOCAL 26,	AFL-CIO		Employer identification number 35-0789161
Part I-A Complete if the org	janization is exempt unde	er section 501(c)	or is a section 5	27 organization.
 Provide a description of the organiz Political expenditures Volunteer hours 	zation's direct and indirect politica	l campaign activities i	n Part IV	▶ \$
Part I-B Complete if the org	janization is exempt unde	er section 501(c)	(3).	
1 Enter the amount of any excise tax	incurred by the organization unde	er section 4955		▶\$
2 Enter the amount of any excise tax	incurred by organization manager	rs under section 4955	i	> \$
3 If the organization incurred a section	n 4955 tax, did it file Form 4720 f	or this year?		☐ Yes ☐ No
4a Was a correction made?				└─ Yes
b If "Yes," describe in Part IV.	onination is even tunde	v cootion EATION	avaant aaatian	E04(a)(a)
Part I-C Complete if the org		···		
1 Enter the amount directly expended		· ·		> \$
2 Enter the amount of the filing organ	ization's funds contributed to oth	er organizations for se	ection 527	. .
exempt function activities	. Addl			> \$
3 Total exempt function expenditures	Add lines 1 and 2 Enter nere an	a on Form 1120-POL	•	
line 17b	1120 DOL for this year?			Yes No
4 Did the filing organization file Form 5 Enter the names addresses and or	•	N of all agetion EQ7 no	lition organizations to	
5 Enter the names, addresses and er made payments. For each organiza		•		
contributions received that were pre-				
political action committee (PAC). If				operate organization at a
(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ento	n's contributions received and

032041 02-02-11

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Part II-A Complete if the org	ALLIED WOI	RKERS LOCAL	26, AFL-CIO	35-0 led Form 5768	789161 Page 2					
(election under section 501(h)).										
A Check ▶ ☐ If the filing organiza	tion belongs to an af	filiated group.	·-··							
Check if the filing organization checked box A and "limited control" provisions apply.										
Limi	ts on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals					
1a Total lobbying expenditures to infli										
b Total lobbying expenditures to infli	uence a legistative bo	ody (direct lobbying)								
c Total lobbying expenditures (add I	nes 1a and 1b)									
d Other exempt purpose expenditure	es									
 Total exempt purpose expenditure 	es (add lines 1c and 1	d)								
f Lobbying nontaxable amount. Ent		ne following table in bo	th columns							
If the amount on line 1e, column (a) o	or (b) is: The lol	obying nontaxable am	ount is:							
Not over \$500,000	20% o	f the amount on line 1e								
Over \$500,000 but not over \$1,00	0,000 \$100,0	00 plus 15% of the exc	cess over \$500,000.							
Over \$1,000,000 but not over \$1,5	00,000 \$175,0	00 plus 10% of the exc	cess over \$1,000,000.							
Over \$1,500,000 but not over \$17	,000,000 \$225,0	00 plus 5% of the exce	ess over \$1,500,000							
Over \$17,000,000	\$1,000	,000.								
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
g Grassroots nontaxable amount (er	iter 25% of line 1f)									
h Subtract line 1g from line 1a If zer	o or less, enter -0-									
i Subtract line 1f from line 1c If zero	o or less, enter -0-									
j If there is an amount other than ze	ro on either line 1h oi	r line 1i, did the organiz	ation file Form 4720							
reporting section 4911 tax for this	year?			!	Yes No					
•	ations that made a	• •	Section 501(h) n do not have to comp es 2a through 2f on pa							
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total					
2a Lobbying nontaxable amount	<u>.</u>									
b Lobbying ceiling amount										
(150% of line 2a, column(e))	<u> </u>									
c Total lobbying expenditures										
d Grassroots nontaxable amount										
e Grassroots ceiling amount (150% of line 2d, column (e))										
		1	I		1					

Schedule C (Form 990 or 990-EZ) 2010

f Grassroots lobbying expenditures

35-0789161 Page 3

Schedule C (Form 990 or 990-EZ) 2010 ALLIED WORKERS LOCAL 26, AFL-CIO 35-078916 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)).

		<u> </u>	a)	(t	o)
		Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or	1			4
	local legislation, including any attempt to influence public opinion on a legislative matter		ĺ .		
	or referendum, through the use of.		l		
а	Volunteers?				´, *
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
đ	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 Add lines 1c through 1i				
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				
	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), sect	ion 501(c))(5), or se	ction	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	Х	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), sect		3		Х
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa"Yes."		ine 3 is a		
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	icai			
_	expenses for which the section 527(f) tax was paid).				
	Current year		2a	<u> </u>	
D	Carryover from last year		2b		
2	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
-	expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		4		
5 Par			5		
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5, a	nd Part II.R	line 1. Alec	complete	this part
	ny additional information	iiiu Fait II-b,	, ine ii Aisc	, complete	uns part
					

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.

Open to Public

OMB No 1545-0047

Inspection

UNITED UNION OF ROOFERS, WATERPROOFERS & Name of the organization

ALLIED WORKERS LOCAL 26 AFL-CTO

Employer identification number 35-0789161

Pa	rt I Organizations Maintaining Donor Advise		r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	3	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
•	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
•	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?	or donor advisor, or for any other purpose con	Yes No
Pai	Conservation Easements. Complete if the org	panization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certified	· ·
	Preservation of open space	1 reservation of a certification	a tristone structure
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	a conseniation easement on the last
_	day of the tax year	ned conservation contribution in the form of a	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ricture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	- *	
~	listed in the National Register	arter of 17700, and not on a historic structure	2d
3	Number of conservation easements modified, transferred, rel	leased extinguished or terminated by the or	
•	year >	reased, extinguished, or terminated by the or	ganization during the tax
4	Number of states where property subject to conservation ear	sement is located	
5	Does the organization have a written policy regarding the per	\	
•	violations, and enforcement of the conservation easements in	.	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and	_	· · · —
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	on easements in its revenue and expense st	
	include, if applicable, the text of the footnote to the organization		
	conservation easements.		
Pai	TILL Organizations Maintaining Collections of	f Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statemen	at and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		,
b	If the organization elected, as permitted under SFAS 116 (AS		d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	•	-
	relating to these items	•	, , , , , , , , , , , , , , , , , , ,
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financial or	
_	the following amounts required to be reported under SFAS 1		man promote the second
а	Revenues included in Form 990, Part VIII, line 1	() to allow here.	▶ \$
	Assets included in Form 990, Part X	•	S S S S S S S S S S
_			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

35-0789161 Page 2 ALLIED WORKERS LOCAL 26, AFL-CIO Schedule D (Form 990) 2010 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research Other b Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included ີ Yes No on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c c Beginning balance Additions during the year 1d 1e Distributions during the year 1f Ending balance _ Yes 2a Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (e) Four years back (c) Two years back (d) Three years back (a) Current year (b) Prior year 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses g End of year balance Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment Permanent endowment % Term endowment 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No bv: 3a(i) (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value depreciation basis (investment) basis (other) 50,000. 50,000 1a Land 292,554 70,778 221,776. **b** Buildings c Leasehold improvements 27,232. 2,091. 25,141 d Equipment e Other

Schedule D (Form 990) 2010

273,867.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

		ORKERS LOC			35-0	789161	Page 3
	Investments - Other Securities	S. See Form 990, F	Part X, line 12				
	(a) Description of security or category (including name of security)	(b) Boo	k value	Cos	(c) Method of valuation st or end-of-year market v	alue	
(1) Financ	eial derivatives						
	y-held equity interests						
(3) Other				· —			
(A)							
(B)					· · · · · · · · · · · · · · · · · · ·		
(C)							
(D)							
(E) (F)					-		
(G)	·						
(H)							
(1)					· · · · · · · ·		
	(b) must equal Form 990, Part X, col (B) line 12					•	
Part VII	I Investments - Program Relat	ed. See Form 990,	Part X, line 1	3.			
	(a) Description of investment type	(b) Boo	k value	Cos	(c) Method of valuation: st or end-of-year market v		
(1)	<u> </u>						
(2)							
(3)							
(4)							
(5)							
(6)							
(8)							
(9)				-	·- ··-		
(10)							
	b) must equal Form 990, Part X, col (B) line 13	.) ▶					
Part IX	Other Assets. See Form 990, Part				<u> </u>		<u> </u>
		(a) Description		 		(b) Book va	alue
(1)							
(2)				 			
(3)						<u></u>	
(5)							
(6)							
(7)							
(8)						•	
(9)							
(10)							
	umn (b) must equal Form 990, Part X, col				<u>▶</u>		
Part X	Other Liabilities. See Form 990, F (a) Description of liability	Part X, line 25	<u> </u>	(h) Amount			
1.	· · · · · · · · · · · · · · · · · · ·			(b) Amount			
	deral income taxes AYROLL TAXES AND OTHE	:R	<u> </u>				
	ITHHOLDINGS			3,851.			
	CONOMY ROOFING AND SH	EET METAL					1
	URETY BOND			9,001.			
(6)		_					
(7)							
(8)							
(9)							
(10)		<u> </u>					
(11)				10 050			
FIN 48 U	lumn (b) must equal Form 990, Part X, col	(B) line 25.) omote to the organization	S funancial states	12,852. nents that reports the organ	zation's liability for uncertain tax	posmons under	
2. FIN 48 (/ 032053 12-20-10	ASC 740).			· · -	C_L_4	n D /5a 1	200) 2010
12-20-10			_		Scnedu	e D (Form 9	3U ZU IU

Sche	dule D (Form 990) 2010 ALLIED WORKERS LOCAL 26, A				<u>89161</u>	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan	icial State	ements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		11			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
_	-		7			
7	Prior period adjustments					
8	Other (Describe in Part XIV)		8			
9	Total adjustments (net). Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Statements.		10	Potum		
		iira Mirii Veae	ilue per r	T		
1	Total revenue, gains, and other support per audited financial statements			1	-	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1				
a	Net unrealized gains on investments	2a		- 1		
b	Donated services and use of facilities	2b		↓		
С	Recoveries of prior year grants	2c		-l -l		
d	Other (Describe in Part XIV)	_2d				
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]		
b	Other (Describe in Part XIV)	4b		<u></u>		
C	Add lines 4a and 4b			4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5		
Pa	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expe	enses per	Return		
1	Total expenses and losses per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.					
а	Donated services and use of facilities	2a]		
b	Prior year adjustments	2b]		
С	Other losses	2c]		
d	Other (Describe in Part XIV.)	2d]]		
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1		
b	Other (Describe in Part XIV)	4b		1		
С	Add lines 4a and 4b			4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5		
Pai	t XIV Supplemental Information					
Com	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1a and 4; Pa	art IV, lines 1	b and 2b,	Part V, line	4: Part
	2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comp					•
	·		•			
		-				
		• •	<u> </u>			
_						
						_

SCHEDULE 1 (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

WATERPROOFERS &

UNITED UNION OF ROOFERS, ALLIED WORKERS LOCAL 26,

General Information on Grants and Assistance

AFL-CIO

OMB No 1545-0047

Employer Identification number Sopen to Public inspection.

35-0789161

2 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (book, if applicable cash grant assistance cash grant or government or governm Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Enter total number of section 501(c)(3) and government organizations criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization Part Part II

Schedule I (Form 990) (2010)

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

AFL-CIO ALLIED WORKERS LOCAL 26,

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2010)

Part III.

Page 2

35-0789161

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV. | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information ALL RECORDS REGARDING DISBURSEMENT OF FUNDS ARE APPROVAL IS GRANTED THE BOARD PERFORMS NO SUBSEQUENT MONITORING OF THE USE OF THE EXECUTIVE BOARD CAREFULLY REVIEWS ALL REQUESTS FOR DONATIONS AND ONLY TO REPUTABLE ORGANIZATIONS WHO HAVE SATISFIED THE BOARD'S DUE (d) Amount of non-cash assistance 。 870. ö 5,250 (c) Amount of cash grant GRANTS PRIOR TO THEIR APPROVAL AND DISBURSEMENT. (b) Number of recipients MAINTAINED AT THE LOCAL OFFICE (a) Type of grant or assistance DONATIONS AND GRANTS. DILIGNECE. SCHOLARSHIPS FLOWERS

Schedule I (Form 990) (2010)

SCHEDULE O

(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 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

OMB No 1545-0047 20 Open to Public Inspection

Name of the organization

UNITED UNION OF ROOFERS, WATERPROOFERS &

Employer identification number

ALLIED WORKERS LOCAL 26, AFL-CIO 35-0789161 FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS ACTIVE MEMBERS WHO HAVE SATISFIED THE REQUIREMENTS FOR MEMBERSHIP AND ARE EMPLOYED UNDER THE JURISDICTION OF THE LOCAL UNION. FORM 990, PART VI, SECTION A, LINE 7A: MEMBERS CURRENT IN DUES PAYMENTS ARE ELIGIBLE TO VOTE FOR MEMBERS WHICH COMPRISE THE GOVERNING BODY. FORM 990, PART VI, SECTION A, LINE 7B: ALL ACTIONS OF THE EXECUTIVE BOARD (GOVERNING BODY) ARE PRESENTED TO THE GENERAL MEMBERSHIP FOR THEIR REVIEW AND APPROVAL AT PERIODIC MEMBERSHIP MEETINGS CONVENED AS REQUIRED BY INTERNATIONAL AND LOCAL GOVERNING DOCUMENTS. FORM 990, PART VI, SECTION A, LINE 8B: THE LOCAL DOES NOT HAVE ANY SEGREGATED COMMITTEES WHICH ACT ON BEHALF OF THE GOVERNING BODY. FORM 990, PART VI, SECTION B, LINE 11: THE COMPLETED FORM 990 IS PROVIDED TO THE ENTIRE EXECUTIVE BOARD FOR REVIEW PRIOR TO BEING FILED. AFTER THE BOARD'S REVIEW, THE FORM IS APPROVED, SIGNED AND SUBMITTED TO THE IRS. FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENT ARE AVAILABLE UPON REQUEST AT THE UNION OFFICE.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

► See separate instructions.

2010 Open to Public Inspection

OMB No 1545-0047

UNION OF ROOFERS, WATERPROOFERS & ALLIED WORKERS LOCAL 26, AFL-CIO ► Attach to Form 990.

Employer identification number 35-0789161 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Name of the organization Part I

Direct controlling Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because of had one or more related tax-exempt organizations during the tax year.) End-of-year assets <u>e</u> Total income 9 Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part

(g) Section 5 (2(b)(13) ž × controlled entity? Yes Direct controlling entity N/A status (if section Public charity 501(c)(3)) **Exempt Code** section 527 Legal domicile (state or foreign country) INDIANA TO SUPPORT TO STATE AND Primary activity LOCAL POLITICAL CANDIDATES COMMITTEE - 35-0789161, 25 W, 84TH AVENUE ROOFERS LOCAL UNION #26 POLITICAL ACTION Name, address, and EIN of related organization MERRILLVILLE, IN 46410

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

032161 12-21-10 LHA

Schedule R (Form 990) 2010

UNITED UNION OF ROOFERS, WATERPROOFERS & ALLIED WORKERS LOCAL 26, AFL-CIO

Schedule R (Form 990) 2010

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

Page 2

35-0789161

(J) (k) JBI General or Percentage	box managing ownership dule yes No			ad one or more related	(g) (h) Share of Percentage end-of-year ownership assets			
(h) (l) (l) Disproportion-	ate allocations? 20 of Schedule Yes No K-1 (Form 1065)			IV, line 34 because it h	(f) Share of total ncome			
	ŗ			to Form 990, Part	(e) Type of entity (C corp. S corp, or trust)			
(f) Share of total	псоте			ion answered "Yes'	(d) Direct controlling entity			
(e) Predominant income	(related, unrelated, excluded from tax under sections 512-514)			nplete if the organizat	(c) Legal domicile (state or foreign country)			
	entity			oration or Trust (Con year.)	(b) Primary activity			
(c)	domicile (state or foreign country)			s a Corport g the tax				
(b) Primary activity				janizations Taxable a poration or trust durin	Z.c			
(a) (b) (c) Name address and EIN Primary activity	of related organization			Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization			

W WATERPROOFERS UNITED UNION OF ROOFERS,

Page 3

35-0789161

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Yes

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AFL-CIO ALLIED WORKERS LOCAL 26 Schedule R (Form 990) 2010

Schedule R (Form 990) 2010 두 톤 ŧ 1 4 ပ္ 위 ₽ ₽ ¥ 우 4 卢 ¥ = ÷ (d) Method of determining amount involved 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Amount involved (b)
Transaction type (a-r) 25 Performance of services or membership or fundraising solicitations by other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule Lease of facilities, equipment, or other assets from other organization(s) Lease of facilities, equipment, or other assets to other organization(s) Gift, grant, or capital contribution from other organization(s) m Sharing of facilities, equipment, mailing lists, or other assets Other transfer of cash or property from other organization(s) Gift, grant, or capital contribution to other organization(s) Other transfer of cash or property to other organization(s) p Reimbursement paid by other organization for expenses o Reimbursement paid to other organization for expenses d Loans or loan guarantees to or for other organization(s) (a)
Name of other organization e Loans or loan guarantees by other organization(s) Purchase of assets from other organization(s) Sale of assets to other organization(s) n Sharing of paid employees h Exchange of assets 032163 12-21-10 Part V ≘ (2) <u>ම</u> (4) (5) 回

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Page 4

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UNITED UNION OF ROOFERS, WATERPROOFERS & ALLIED WORKERS LOCAL 26, AFL-CIO Schedule R (Form 990) 2010 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

inal was not a related organization. Occ. instructions regarding execution of contract (in)	(4)	[3]	5	(e)	٤	(6)	3
(a)			2			(A)	
Name, address, and EIN	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of-	Ulspropor- tionate	Code V-UBI amount in box 20	General or managing
San			Yes No			of Schedule K-1 (Form 1065)	1
							+
					_		
							_
			_				
							_
						_	
-							

Schedule R (Form 990) 2010