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Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements. OMB No 1545-0047

Open to Public Inspection

A F	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and ending	JUN 3	<u>0, 2011</u>	<u></u>
В	heck if	C Name of organization	D Em	ployer identific	ation number
		INTERNATIONAL UNION OF OPERATING			
	Addres change	ENGINEERS LOCAL 825 A, B, C, D, R			
	Name change	Doing Business As		22-10	010985
	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Tele	phone number	
	Termin ated	65 SPRINGFIELD AVENUE, THIRD FLOOR		(973)	921-1900
	Amend	City or town, state or country, and ZIP + 4	G Gross	s receipts \$	13,020,930.
	Application	SPRINGFIELD, NJ 07081	H(a) Is	this a group re	
	pendin	F Name and address of principal officer:GREGORY LALEVEE	fo	r affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Ar	e all affiliates incl	uded? Yes No
1.7	ax-exe	empt status: 501(c)(3) 501(c)( 5) ◀ (insert no.) 4947(a)(1) or	527 If	"No," attach a	list. (see instructions)
J١	Vebsit	e: ▶ WWW.IUOE825.ORG	H(c) G	roup exemption	number 🕨
<b>K</b> F	orm of	organization: Corporation Trust Association X Other ► LABOR L	Year of format	ion: 1977 <b>M</b>	State of legal domicile: NJ
Pa	art I	Summary			
ø	1 1	Briefly describe the organization's mission or most significant activities: $\overline{ ext{THE}}$ $\overline{ ext{WOR}}$	K OF TH	E UNION	, AS THE
Activities & Governance	:	REPRESENTATIVE OF ITS MEMBERS, IS TO PROVIDE	E FOR T	HE CONT	INUOUS
Ē	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	more than 25	% of its net as	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	18
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	13
SS	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	32
žį.	6	Total number of volunteers (estimate if necessary)		6	0
(cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
•	b	Net unrelated business taxable income from Form 990 T, line 34		7b	0.
		RECEIVED	Prio	r Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 11)		0.	<u>0.</u>
Š	9	Program service revenue (Part VIII line 2g)	8,2	51,147.	<u>8,584,167.</u>
ě	10	Investment income (Part VIII, column (A), lines 3, 4) and 1/10	5	94,841.	842,348.
2012 Revenue	11	Other revenue (Part VIII, column (A), lines-5, 6d, 8c, 9c, 10c, and 1e)	1	63,551.	<u>34,090.</u>
Z0 Z0	12	Total revenue - add lines 8 through 1 (Must equal Part VIII column (A), line 12)	9,0	09,539.	9,460,605.
43	13	Grants and similar amounts paid (Part IX, column (A) lines 1-3)		27,000.	24,500.
<b>▽</b>	14	Benefits paid to or for members (Part IX, column (A), line 4)		217.	0.
SO MAR Expenses	15	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5·10)	5,1	12,194.	5,077,593.
₩ su	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
	ь	Total fundraising expenses (Part IX, column (D), line 25)			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,2	56,079.	3,722,211.
<u> </u>	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		95,490.	8,824,304.
<b>%</b> _	19	Revenue less expenses. Subtract line 18 from line 12	6	14,049.	<u>636,301.</u>
28 28			Beginning (	of Current Year	End of Year
SCALL Assets or l	20	Total assets (Part X, line 16)		40,396.	23,357,084.
\$	21	Total liabilities (Part X, line 26)		87,639.	787,240.
2	22	Net assets or fund balances. Subtract line 21 from line 20	21,8	52,757.	22,569,844.
	art II	Signature Block			
		ilties of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is
true	, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of which pr	eparer has any		
		Mayor talcon		Busines	55 Manager
Sig	n	Signature of officer		Date	1/12
He	re	GREGORY LALEVEE, BUSINESS MANAGER		410	1/4
	_	Type or print name and title	10.4	(	l Torin
		Print/Type preparer's name Preparer's signature	Date 2/9/	Check C	PTIN
Pai	d	SALVATORE J. ARMAO Jeliata . Uma	/_/	self-employe	ed
Pre	parer		.c. ' /	Firm's EIN 🛌	
Use	Only	Firm's address ▶ 1055 FRANKLIN AVENUE, SUITE 204		_	
		GARDEN CITY, NY 11530		Phone no. 5	16-256-3200
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
032	001 02-2	22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2010)

10000.	/ (Expenses +		, , ,	
	<del>-</del>			
-				
_				
		<del></del>		

Other program services. (Describe in Schedule O) (Expenses \$

including grants of \$

) (Revenue \$

Total program service expenses 4e

Form **990** (2010)

Form 990 (2010) ENGINEERS LOCAL 825 A, B, C, D, R
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)?		į	
	If "Yes," complete Schedule A	1		<u>X</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_	_	X
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	<u> </u>
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,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III  Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	8		
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
40	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	9		-41
10	If "Yes," complete Schedule D, Part V	10		х
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, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	Х	
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		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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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		X
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		<u> X</u>
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	X	<del> </del>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		
	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	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<del>                                     </del>	A
b	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	140		<del></del>
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		-	
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
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		X
<b>2</b> 0a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	· · · · · · · · · · · · · · · · · · ·			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		<u> </u>
		Form	990	(2010)

Form 990 (2010) ENGINEERS LOCAL 825 A, B, C, D, R

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,			i
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			i
	Schedule K If "No", go to line 25	24a	_	X
b	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			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<del></del>
þ	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	00		v
<b></b>	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			
	-	27		х
20	Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
28	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	-	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	A Laboratory of the Control of the C			
·	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		Х
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		X
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			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	<del> </del>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35_		X_
а	· · · · · · · · · · · · · · · · · · ·			
	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		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	-		v
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	-	<u> </u>
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	140te. Air 1 Orin 330 mais are required to complete consequie 5			2010)

22-1010985 Form 990 (2010) ENGINEERS LOCAL 825 A Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Ye<u>s</u> No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 26 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements. 32 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? X 2h Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a 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. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a 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). 7 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7c 7d d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting R 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. 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: 10 a 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 b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 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 13b

Form **990** (2010)

14a

X

13c

c Enter the amount of reserves on hand

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

22-1010985

Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line ba, bb, or rob below, describe the circumstances, processes, or changes in schedule of see instructions.			
	Check if Schedule O contains a response to any question in this Part VI			X
<u>Sec</u>	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 18		:	
b	Enter the number of voting members included in line 1a, above, who are independent  1b  13			,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	<b>/-</b>		
	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			
	of officers, directors or trustees, or key employees to a management company or other person?	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		_X_
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			
	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.			
а	The governing body?	8a	X	-
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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_		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
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	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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	X	
b	Other officers or key employees of the organization	15b	_X	
	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		X
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		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion:	<b>-</b>	_
	<u>IUOE LOCAL 825 UNION - 973-671-6900</u>			
	65 SPRINGFIELD AVENUE, SPRINGFIELD, NJ 07081			

032006 12-21-10

### Part VII 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.

(A)	(B)			(0	<b>C)</b>			(D)	(E)	(F)
Name and Title	Average	1		Pos	-			Reportable	Reportable	Estimated
	hours per week (describe	director (5)	heck	c all 1		app		compensation from the	compensation from related organizations	amount of other compensation
	hours for- related organizations in Schedule O)	ual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	¯(W-2/1099-MISC)	from the organization and related organizations
JOHN NACION	<u> </u>	<b> </b>	<b>-</b>	-		-				
TRUSTEE	2.00	x		X				0.	0.	0
AL ZABICKI										
TRUSTEE	2.00	X		X		<u> </u>		0.	0.	0
DANIEL MCGRAW						ĺ				
INTERNATIONAL SUPERVISOR	24.00		<u> </u>	X	<u> </u>	lacksquare		0.	66,384.	28,603
GREGORY LALEVEE		1			ł				_	
BUSINESS MANAGER	40.00	<u> </u>	<u> </u>	X		<u> </u>	_	143,711.	0.	40,245
JOHN WOOD	40.00			l				140.044		40 045
PRESIDENT/BUSINESS REPRESENTATIVE	40.00	├	-	X	-	-	_	142,911.	0.	40,245
JOE BALLENTINE	2 00			,,						0
VICE PRESIDENT	2.00		├	X			_	0.	0.	0
ROBERT DAVIS	40.00			x				144,960.	٥.	40,245
RECORDING SECRETARY/BUSINESS REPRESE	40.00	$\vdash$	╁	┲	┢	<del> </del>	-	144,500.	0.	40,245
JOE LOGAN	2.00	Ì		x				0.	0.	0
FINANCIAL SECRETARY  JAMES MCGOWAN	2.00	ļ	†			$\vdash$			-	
TREASURER/BUSINESS REPRESENTATIVE	40.00	<u> </u>	ļ	X		_	_	144,210.	0.	40,245
PATRICK MCDERMOTT	40.00		-	۱,,		İ		72 200		25 450
TRUSTEE/DISPATCHER	40.00	-	┼	X	┢	╁	┢	73,300.	0.	25,450
BOB CALHOUN	2.00			x	ł			0.	0.	0
AUDITOR	2.00	$\vdash$	$\vdash$	┢	-	$\vdash$	$\vdash$	·	0.	
HARRY ALLEN	2.00		ì	X			l	0.	0.	0
AUDITOR	2.00	-	$\vdash$	<u> </u>		+	┢	·		
PATRICK RAFFERTY	2.00			X				0.	0.	0
AUDITOR  JOHN ROCCO	2.00		T	1		T	T		· · · · · · · ·	
CONDUCTOR	2.00			X		1		0.	0.	0
FRANK IRVIN										
GUARD	2.00	L	$\perp$	x	L			0.	0.	0
DIRK EGGINK										
DISTRICT REPRESENTATIVE	2.00	_		X	$oxed{oxed}$			0.	0.	0
KEVIN LIGOURI										
DISTRICT REPRESENTATIVE	2.00			X			L	0.	0.	0

032007 12-21-10

Form **990** (2010)

22-1010985 Page 8

Post VIII									<u> </u>	765 Fage 0
Part VII Section A: Officers, Directors, Tru		nplo	yee	s, a	nd l	ligh	<u>est</u>			
` (A)	(B)			(0				(D)	(E)	(F)
Name and title	Average	١		Pos				Reportable	Reportable	Estimated
	hours per	(cl	neck	all	that	арр	ly)	compensation	compensation	amount of
i	week	ıoı						from	from related	other
	(describe hours for	direct				-		the	organizations	compensation
	related	e 0r	ste			usate		organization	(W-2/1099-MISC)	from the
	organizations	Individual trustee or director	nstitutional trustee		yee ye	ed III		(W-2/1099-MISC)		organization and related
	ın Schedule	ldual	릙	15	Key employee	est co	<u> </u>			organizations
	O)	Indiv	Insti	Officer	Keye	Highest compensated employee	For			organizations
ED ROWE								_	_	
DISTRICT REPRESENTATIVE	2.00			X	<u></u>		ldash	0.	0.	0.
STEVE GARLAND										
DISTRICT REPRESENTATIVE	2.00			X	<u> </u>			0.	0.	0.
ROBERT OCCHIUZZI						ļ	ļ		_	
BUSINESS REPRESENTATIVE	40.00					X	<u> </u>	144,609.	0.	40,245.
JOHN LOCRASTO				1	1				_	
BUSINESS REPRESENTATIVE	40.00	L				Х		144,587.	0.	40,245.
JOHN BULMER										
BUSINESS REPRESENTATIVE	40.00					X		144,622.	0.	40,245.
JOHN PRISK		ŀ						144.000		40 045
BUSINESS REPRESENTATIVE	40.00	_		ļ		X		144,232.	0.	40,245.
JOHN LYNCH						l				
BUSINESS REPRESENTATIVE	40.00	_				X		144,133.	0.	40,245.
JOHN WALSH										
DISTRICT REPRESENTATIVE/BUSINESS REP	40.00	_		_	_	<u> </u>	X	143,906.	0.	40,245.
JAMES BLACK									_	
AUDITOR/BUSINESS REPRESENTATIVE	40.00	<u> </u>				<u> </u>	X	143,079.		40,245.
1b Sub-total								1,658,260.		
c Total from continuation sheets to Part VI	I, Section A							135,851.		40,245.
d Total (add lines 1b and 1c)						<u> </u>		1,794,111.	66,384.	536,993.

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

Yes No

3 X

4 X

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person\_\_\_\_\_\_

Section B. Independent Contractors

line 1a? If "Yes," complete Schedule J for such individual

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

(C) Compensation	(B) Description of services	(A) Name and business address
634,703.	LEGAL	PITTA & GIBLIN LLP 120 BROADWAY, 28TH FL., NEW YORK, NY 10271
118,402.	CONSULTING	GIULIANI SECURITY & SAFETY LLC 5 TIMES SQUARE , NEW YORK, NY 10036
	ed above) who received more than	2 Total number of independent contractors (including but not limited to those list

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

2

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2010)

3

ENGINEERS LOCAL 825 A, B, C, D, R

Pai	t VIII	Statement of Rever	nue					
•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र र	1 a	Federated campaigns	1a					
E E	b	Membership dues	1b					
g,e	C	Fundraising events	1c					
#E	d	Related organizations	1d		1			
S,E	e	Government grants (contribut	· <del></del>		1			•
Pi Si	f	All other contributions, gifts, gran	F - I					
를	•	similar amounts not included abo	1 1					
들	g	Noncash contributions included in lines			1		,	
Contributions, gifts, grants and other similar amounts	_	Total. Add lines 1a-1f		<u> </u>				
$\Box$				Business Code			. ~ ~	
e l	2 a	MEMBERSHIP DUES	S AND AS	900099	8,571,806. 12,361.	8,571,806.		
ا کے	b	RENT FROM RELAT	TED ORGA	531120	12,361.	12,361.		
Program Service Revenue	С							
e a	d							
<u>6</u> —	е				<del></del>			
4	f	All other program service reve	enue					
$\rightarrow$	g	Total. Add lines 2a-2f		<u> </u>	8,584,167.			
	3	Investment income (including	dıvıdends, ınter	əst, and				
		other similar amounts)		<b>&gt;</b>	807,749.			807,749.
	4	Income from investment of ta	x-exempt bond p	oroceeds >				<del></del>
	5	Royalties .		<u> </u>				
			(i) Real	(ii) Personal	1			
	6 a	Gross Rents	110,903.		_			•
	b	Less: rental expenses	109,527		4			
	С	Rental income or (loss)	1,376.	·L			-	
	d	` '		<b>_</b>	1,376.	1,376.		<del></del>
	7 a	Gross amount from sales of	(i) Securities	(ii) Other	-			
		assets other than inventory	3461997	23,400.	4			,
ŀ	b	Less: cost or other basis	2440505	10 201				
		and sales expenses		10,291.	4			
		Gain or (loss)	21,490	13,109.	4 34 - 500 -	34,599.		-
	_	Net gain or (loss)			34,599.	34,399.	-	<del></del>
e l	8 a	Gross income from fundraisir						
Se l		including \$contributions reported on line	of					
Other Revenue								
je	_	Part IV, line 18	a b					
5		Less: direct expenses  Net income or (loss) from fun		'L		•		
		Gross income from gaming a	-		-			<del></del>
	9 4	Part IV, line 19	. a	.]				
	h	Less. direct expenses	. •		1			
		Net income or (loss) from gar	_	` <b></b>	1			
		Gross sales of inventory, less	•		<u> </u>			<del></del>
	10 0	and allowances	a	,				
	ь	Less: cost of goods sold	t		1			
		Net income or (loss) from sale	•	<b></b>	1			
		Miscellaneous Reveni		Business Code				
	11 a	MISCELLANEOUS :		900099	32,714.	32,714.		-
	b		_					
	c	<del></del>		, i				
	d							
	е	Total. Add lines 11a-11d			32,714.			
	12	Total revenue. See instructions.	· · · · · · · · · · · · · · · · · · ·	. ▶	9,460,605.	8,652,856.	0.	807,749.
03200	)9 -10							Form <b>990</b> (2010)

### Part IX Statement of Functional Expenses

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

	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	te columns (B), (C), and (C)  Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		0,0011303	general expenses	CAPONIGOS
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		-		,
-	the U.S. See Part IV, line 22	24,500.			,
3	Grants and other assistance to governments,				,
-	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				,
ı	Benefits paid to or for members				
,	Compensation of current officers, directors,		··		
	trustees, and key employees	845,442.			
3	Compensation not included above, to disqualified			·	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
,	Other salaries and wages	2,926,867.			
3	Pension plan contributions (include section 401(k)		· · · · · · · · · · · · · · · · · · ·		
	and section 403(b) employer contributions)	694,819.			
•	Other employee benefits	346,243.			
)	Payroll taxes	264,222.			
1	Fees for services (non-employees):				
а	Management				
b	Legal	655,092.			
С	Accounting	83,020.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		· · · · <del> · · · · · · · · · · · · · ·</del>		
f	Investment management fees	47,614.			
g	Other .	8,960.			
2	Advertising and promotion				
3	Office expenses	504,955.			
4	Information technology	124,781.			<u></u>
5	Royalties				
6	Occupancy	216,953.			
7	Travel	243,207.	<u> </u>		
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	107,878.			
)	Interest	000 -01			-
i	Payments to affiliates	900,701.			
2	Depreciation, depletion, and amortization	328,412.	<del></del>		
3	Insurance	80,600.			
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 O.)				
а	TICKETS AND ADS	66,846.			
b	AUTO EXPENSES	61,907.			
C	STRIKE BENEFITS	55,941.			
d	MISCELLANEOUS	47,548.	<del> </del>		-
e	DUES AND SUBSCRIPTIONS	32,696.			
•	All other expenses	155,100.			
, 5	Total functional expenses. Add lines 1 through 24f	8,824,304.	·		
<u>5</u> 6	Joint costs. Check here Inf following SOP	,,	<del></del>		
-	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				

Part •		Balance Sheet	(A)		(B)
			(A) Beginning of year		End of year
	1	Cash - non-interest-bearing .		1	66,068
	2	Savings and temporary cash investments	5,388,049.	2	4,824,499
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,399,314.	4	1,275,422
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), 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)		6	
Assets	7	Notes and loans receivable, net	·	7	
2	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges .	48,789.	9	39,998
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 5,726,331.			
	b	Less: accumulated depreciation 10b 2,779,162.	3,004,282.	10c	2,947,169
	11	Investments - publicly traded securities	11,039,505.	11	13,805,367
	12	Investments - other securities. See Part IV, line 11	1,660,457.	12	398,561
1	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	22,540,396.	16	23,357,084
	17	Accounts payable and accrued expenses	484,965.	17	575,888
- 1	18	Grants payable		18	
	19	Deferred revenue .	202,674.	19	211,352
	20	Tax-exempt bond liabilities		20	
23	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
<u>a</u>		highest compensated employees, and disqualified persons. Complete Part II			
- │		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
_	<u> 26</u>	Total liabilities. Add lines 17 through 25	687,639.	26	787,240
		Organizations that follow SFAS 117, check here   X and complete			1
ès		lines 27 through 29, and lines 33 and 34.			
and	27	Unrestricted net assets	22,207,060.	27	23,088,956
a Ra	28	Temporanly restricted net assets	-354,303.	28	-519,112
2	29	Permanently restricted net assets		29	
7		Organizations that do not follow SFAS 117, check here   and			
ō		complete lines 30 through 34.	~ -	-	ļ <u>-</u>
je i	30	Capital stock or trust principal, or current funds		30	
AS	31	Paid in or capital surplus, or land, building, or equipment fund	<del> </del>	31	_
¥	32	Retained earnings, endowment, accumulated income, or other funds	01 050 555	32	00 560 044
	33	Total net assets or fund balances	21,852,757.		22,569,844
	<u>34</u>	Total liabilities and net assets/fund balances	22,540,396.	34	23,357,084 Form <b>990</b> (2010

Pa	rt XI Reconciliation of Net Assets		.,		
•	Check if Schedule O contains a response to any question in this Part XI				X.
1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,46		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u>8,82</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>6,3</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	21,85		
5	Other changes in net assets or fund balances (explain in Schedule O)	5			<u>86.</u>
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	22,56	9,8	<u>44.</u>
Pa	rt'XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				لــــــــــــــــــــــــــــــــــــــ
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				. '
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	-		1 1
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				
b	Were the organization's financial statements audited by an independent accountant?		2b	_ X_	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			,
	separate basis, consolidated basis, or both:			,	
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audr	:		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	990	2010)

### 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

See separate instructions.

2010

Open to Public

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

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.

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

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
		TIONAL UNION OF	OPERATING	Empl	oyer identification number
	ENGINEE	ERS LOCAL 825 A,	B, C, D, R		22-1010985
Pa	art I-A Complete if the or	ganization is exempt und	der section 501(c	e) or is a section 527 or	rganization.
2	Provide a description of the organi	zation's direct and indirect politic	cal campaign activities	s in Part IV	
3	Volunteer hours				
De	art I-B Complete if the or	ganization is exempt und	ter section 501/c	·)(3)	
	Enter the amount of any excise tax			<u>&gt;,,(⊙).</u> ▶\$	
	Enter the amount of any excise tax				
	If the organization incurred a section				Yes No
	Was a correction made?	·		·	Yes No
t	o If "Yes," describe in Part IV.				
Pa	art I-C Complete if the or	ganization is exempt und	der section 501(c	c), except section 501(	c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fun	ction activities	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for	_	
	exempt function activities .			<b>▶</b> \$	
3	Total exempt function expenditure	s Add lines 1 and 2. Enter here a	and on Form 1120-PO	)L,	
	line 17b			▶\$	——————————————————————————————————————
5	Did the filing organization file Form Enter the names, addresses and e made payments. For each organiz contributions received that were p political action committee (PAC). It	mployer identification number (E ation listed, enter the amount pa romptly and directly delivered to	id from the filing orgar a separate political oi	nization's funds. Also enter th rganization, such as a separa	e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
			_		
	<del> </del>				
			-		
		<u> </u>			<u> </u>

032041 02-02-11

LHA

Schedule C (Form 990 or 990-EZ) 2010

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

INTERNATIONAL UNION OF OPERATING

Schedule C (Form 990 or 990-EZ) 2010	ENGINEERS	LOCAL 825 A	A, B, C, D, F	22-1	1010985 Page 2
Part II-A , Complete if the orga		npt under section	on 501(c)(3) and file	a Form 5/68	
· (election under sect					
	on belongs to an affil				
B Check L if the filing organizate	on checked box A an	d "limited control" pr	ovisions apply.		T
	s on Lobbying Exper itures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public opinion (g	rass roots lobbying)			
b Total lobbying expenditures to influ	ence a legislative bod	y (direct lobbying)		_	
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditure			. [		
e Total exempt purpose expenditures	(add lines 1c and 1d	) .	. [		
f Lobbying nontaxable amount. Enter			th columns.		
If the amount on line 1e, column (a) or	(b) is: The lob!	ying nontaxable an	nount is:		
Not over \$500,000		he amount on line 1e	).		
Over \$500,000 but not over \$1,000	,000 \$100,00	0 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	0 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000 \$225,00	0 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (ent	er 25% of line 1f)	•			
h Subtract line 1g from line 1a. If zero	or less, enter -0-				
i Subtract line 1f from line 1c. If zero	or less, enter -0-		L		
j If there is an amount other than zer	o on either line 1h or l	ine 11, did the organi	zation file Form 4720		
reporting section 4911 tax for this y	/ear?				Yes No
		raging Period Unde			
			on do not have to comp es 2a through 2f on pag		
			ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount			1		
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount			<del>  </del>		<del> </del>
e Grassroots ceiling amount (150% of line 2d, column (e))					
(130% of this 2d, column (e))			-	·-·	
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

### INTERNATIONAL UNION OF OPERATING

Schedule C (Form 990 or 990-EZ) 2010 ENGINEERS LOCAL 825 A, B, C, D, R 22-1010985 Page 3

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

(election under section 501(h)).

During the year, did the filing organization attempt to influence foreign, national, state or				
During the year, did the filing organization attempt to influence foreign, national, state or	Yes	No	Am	ount
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:			1	
a 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?				
e Publications, or published or broadcast statements?			<u> </u>	
f Grants to other organizations for lobbying purposes?		<u></u>		
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			<u> </u>	
i Other activities? If "Yes," describe in Part IV		<u> </u>	<u> </u>	
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		l		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
art III-A Complete if the organization is exempt under section 501(c)(4), sect	tion 501(c)	)( <del>5</del> ), or s	ection	
501(c)(6).				
			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  art 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 III-A, line		3 )(5), or s	ection	<u> </u>
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  art 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 Yes."		3 )(5), or s ine 3 is a	ection	
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Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  art III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	art III-A, li	3 )(5), or s ine 3 is a	ection	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  art 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 "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	art III-A, li	3 )(5), or s ine 3 is a	ection	
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### **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 Inspection

OMB No 1545-0047

Name of the organization

INTERNATIONAL UNION OF OPERATING ENGINEERS LOCAL 825 A, B, C, D, R **Employer identification number** 22-1010985

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc-	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year <b>&gt;</b> \$
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 176	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes	the organization's accounting for
	conservation easements.		
Pa	t III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	nbes these items	
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	•	. \$
2	If the organization received or held works of art, historical tre		al gaın, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		. \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

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

Schedule D (Form 990) 2010

ENGINEER	S	LOCA	Ш	825	Α.	В.	С.	D.	

22-	-1	01	09	85	Page 2

Par	3-13-11-11-11-11-11-11-11-11-11-11-11-11						
3,	Using the organization's acquisition, accession	on, and other record	s, check any of t	ne following that	t are a significant	use of its collection	n items
	(check all that apply):						
а	Public exhibition	d	Loan or e	xchange progra	ms		
b	Scholarly research	е	Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	how they furthe	r the organizatio	on's exempt purp	ose in Part XIV	
5	During the year, did the organization solicit o	r receive donations o	of art, historical ti	easures, or othe	er sımılar assets		
	to be sold to raise funds rather than to be ma					Yes Yes	No_
Par			te if the organiza	tion answered "	Yes" to Form 990	0, Part IV, line 9, or	
	reported an amount on Form 990, Par	t X, line 21.					
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribut	ions or other ass	sets not included		_
	on Form 990, Part X?			•		Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:			<del></del>	
						Amount	
С	Beginning balance .				1c		
d	Additions during the year				<u>1d</u>	<u> </u>	
е	Distributions during the year				1e		<del></del>
f	Ending balance			•	. <u>1f</u>		
	Did the organization include an amount on F		21?			Yes —	- No
	If "Yes," explain the arrangement in Part XIV.						
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to			<del></del>	
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Three	years back (e) Four	years back
1a	Beginning of year balance						
b	Contributions						
C	Net investment earnings, gains, and losses						
d	Grants or scholarships .				١		
е	Other expenditures for facilities					•	1
	and programs						r 1
f	Administrative expenses		<u>-</u> -				
g	End of year balance						
2	Provide the estimated percentage of the year	r end balance held a	s.				
а	Board designated or quasi-endowment		_%				•
b	Permanent endowment	%					
		%					
3а	Are there endowment funds not in the posse	ession of the organization	ation that are hel	d and administe	red for the organ	ization [	
	by:						Yes No
	(i) unrelated organizations					3a(i)	
						. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organization			•		3b	
4	Describe in Part XIV the intended uses of the			<del></del>			
Par				<del></del>			<del></del>
	Description of investment	(a) Cost or o		ost or other	(c) Accumulat	1	k value
		basis (investr		sis (other)	depreciation		2 000
1a	Land			222,000.	1 004 4	<del></del>	2,000.
b	Buildings		4,	084,942.	1,804,4		0,533.
С	Leasehold improvements			26,507.	16,5		9,940.
	Equipment	<u> </u>		596,190.	560,2		<u>5,944.</u>
	Other			596,692.	397,9		$\frac{8,752}{7,160}$
<u>Tota</u>	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	X, column (B), lu	e 10(c).)		<u> </u>	<u>7,169.</u>

	Schedule D	(Form 990)	2010
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ENGINEERS	ፒ.ሰሮልፒ.	825	Δ	R	С.	ח	R

(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation: nd-of-year market value
) Financial derivatives			
Closely-held equity interests .			
Other			,
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)		<del></del>	<del></del>
(1)			
tal. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related	3. See Form 990, Part X, line 13		ather of valuations
(a) Description of investment type	(b) Book value		ethod of valuation: nd-of-year market value
(1)			
(2)			
(3)			
(4)			······
(5)			
(6)		<del></del>	
(7)			
(8)			<del> </del>
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(9) (10)			
(9) (10) otal. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
(9) (10)	line 15.		(b) Book value
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(9) (10) (110) (111) (11	line 15.  (a) Description		(b) Book value
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(9) (10) (11) (12) (13) (14) (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	line 15.  (a) Description	(b) Amount	(b) Book value

INTERNATIONAL UNION OF OPERATING

	t XI Reconciliation of Change in Net Assets from Form 990 to	C, D Audit	, R ed Finan	cial Sta			Page 4
		,			210111011	9,460	605
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		8,824	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	••		3			,301.
4	Net unrealized gains (losses) on investments		•	4		80	<u>,786.</u>
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8	,		
9	Total adjustments (net). Add lines 4 through 8			9		80,	<u>,786.</u>
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Statements.		ith Rever	10   nue pei	Return		<u>,087.</u>
1	Total revenue, gains, and other support per audited financial statements			<del></del>	1	9,541	391.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		••				70321
	Net unrealized gains on investments	2a	R	0,78	5		
a	Donated services and use of facilities	2b		<del>•,,,</del>			
b							
C	Recoveries of prior year grants	2c			.		
d	Other (Describe in Part XIV.)	2d				9.0	706
е	Add lines 2a through 2d	•	•		2e		786.
3_	Subtract line 2e from line 1				3	9,460	,605.
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	<del></del>				
b	Other (Describe in Part XIV)	4b_					_
С	Add lines 4a and 4b .			•	4c		0.
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				_ 5	9,460	<u>605.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expe	nses p	<u>er Retu</u>		
1	Total expenses and losses per audited financial statements				1	8,824	304.
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		0.
3	Subtract line 2e from line 1				3	8,824	,304.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	·	·			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIV.)	4b			'		
	Add lines 4a and 4b				4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	•	•		5	8,824	304.
	t XIV Supplemental Information					0,021	75011
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	lines '	and 4. Pa	rt (V. line	s 1h and	2h: Part V line	Λ· Part
	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp						, wit
^, III	5 2, 1 art 71, 1110 0, 1 art 711, 11103 20 art 40, art 711, 11103 20 art 40.7 300 0011p	ioto trii	pair to pro	vido uny	additiona	, iiiioiiiiaaoii.	
				·	<del></del>		
		_					
					_		
		-					<u>_</u>

OMB No 1545-0247	2010	Open to Public Inspection	Employer identification number 22-1010985		[	X Yes No	1, for any	•	(h) Purpose of grant or assistance					
			Employ		the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	٠	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	additional space is needed						
•	s, ites	ganization answered "Yes" to Form 990, Part IV, line 21 or 22.  ▶ Attach to Form 990.			ty for the grants or as		anization answered "	can be duplicated if	(f) Method of valuation (book, FMV, appraisal, other)				:	
	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	s" to Form 990, Pa rm 990.			e grantees' eligibilit	· · ·	Complete if the org	than \$5,000. Part I	(e) Amount of non-cash assistance					
	d Other Assistand ts, and Individuals	on answered "Yes" to Fo ► Attach to Form 990.	TING	1	s or assistance, th	tude in the Unit	ne United States.	ant received more t	(d) Amount of cash grant					
	Grants an Governmen	Complete if the organizati	N OF OPERATING		amount of the grant	oring the use of prize	Organizations in the	box if no one recipie	(c) IRC section if applicable				ganizations	
		Compl	INTERNATIONAL UNION	and Assistance	to substantiate the	Istance?	Governments and	\$5,000. Check this	(b) EIN				and government or	
	_	תיא		General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of	criteria used to award the grants or assistance?	s and Other Assistance to	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	1 (a) Name and address of organization or government				Enter total number of section 501(c)(3) and government organizations	
SCHEDULE	(Form 990)	Department of the Treasury Internal Revenue Service	Name of the organization	Part I Gener	1 Does the org		Part II Grant	ר	1 (a) Name an o				2 Enter total n	

INTERNATIONAL UNION OF OPERATING

m M ENGINEERS LOCAL 825 A,

Page 2

22-1010985

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

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) SCHEDULE I, PART I, LINE 2: THE ORGANIZATION CONFIRMS THE MEMBERSHIP STATUS Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. OF THE WINNING APPLICANT'S PARENT/GUARDIAN. ALL DISBURSEMENTS ARE PAID (d) Amount of non-cash assistance o 24,500 (c) Amount of cash grant (b) Number of recipients USE IN UNDERGRADUATE EDUCATION AT UNIVERSITIES AND CHILDREN AND GRANDCHILDREN OF UNION MEMBERS FOR SCHOLARSHIPS AND GRANTS ARE AWARDED TO THE (a) Type of grant or assistance COLLEGES

DIRECTLY TO THE UNIVERSITY/COLLEGE.

### SCHEDULE J (Form 990)

**Compensation Information** 

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

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

INTERNATIONAL UNION OF OPERATING
ENGINEERS LOCAL 825 A, B, C, D, R

Employer identification number 22-1010985

**Questions Regarding Compensation** Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Compensation committee Written employment contract X Independent compensation consultant Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? X Participate in, or receive payment from, a supplemental nonqualified retirement plan? X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? 5a Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? **6**a Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2010

22-1010985 m m

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2010

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.

	(B) Bre	akdown of W	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C)	(D)	(E)	(F)
(А) Nате	compe	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(C)-(I)(B)	reported in prior Form 990 or Form 990-EZ
	(125,	12	0	18,557.	28,845.	11,400.	183,956.	0
1 GREGORY LALEVEE	(ii)	154	0	17.757.	28.845.	11.400.	183.156.	0
2 JOHN WOOD		0.	0.	4	4 1	1	<u> </u>	0
	() 125,	15	0	19,806.	28,845.	11,400.	185,205.	0.
3 ROBERT DAVIS			0		٥	-		0
4 JAMES MCGOWAN	(i) 125,	0.154.	0	19,056.	28,845.	11,400.	184,455.	0.0
	(1)	15	0.	19,455.		11,400.	184,854.	0.
5 ROBERT OCCHIUZZI	125	154	0	19 433	0 28 845	11 400	184 832	0
6 JOHN LOCRASTO		-	0	1	٧ ١	1		0.
	(125)	15	0	19,468.	28,845.	11,400.	184,867.	0.
7 JOHN BULMER		0 7	0		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1, 400	104 477	0
ASTAG NHOT, &	(i) 143,	0, 104.	0	19,0,8.	٧.	0.04,11	*	0
	() 125,	15	0	18,979.	28,845.	11,400.	184,378.	0
9 JOHN LYNCH	(ii)	0	0	- 1	- 1	Ι,	,	0
	(i) 125,	15	0	18,752.	28,845.	11,400.	184,151.	0
10 JOHN WALSH	m 125	5.154.	0	17.925.	28,845.	11,400.	183,324.	0
11 JAMES BLACK		J	0	0	0.	i I	0.	0
	(1) 125	,154	0.	10,697.	28,845.	11,400.	176,096.	0
12 TIMOTHY MULLER	(ii)	0	0	0	0	0.	0.	0
	©							
13	(E) (S)							
4	© (E)							
	()				-			
15	(ii)				_			
	<u> </u>				-			
16	(ii)				-			
				į			Schedule	Schedule J (Form 990) 2010

### **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 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Inspection

INTERNATIONAL UNION OF OPERATING Name of the organization

Employer identification number

ENGINEERS LOCAL 825 A, B, C, D, R	22-1010985
FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:	
LABOR UNION	
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSIC	N:
EMPLOYMENT OF LABOR, TO BRING ABOUT STABLE CONDITIONS IN THE	E INDUSTRY,
AND ESTABLISH NECESSARY PROCEDURES FOR RESOLUTIONS OF DISPUT	ES BETWEEN
EMPLOYERS AND EMPLOYEES.	
FORM 990, PART VI, SECTION A, LINE 3: IN MARCH 2008, THE ORG	ANIZATION WAS
PLACED UNDER SUPERVISION OF THE INTERNATIONAL UNION OF OPERA	TING ENGINEERS.
AN INTERNATIONAL UNION SUPERVISOR WAS APPOINTED TO RUN THE D	AY TO DAY
AFFAIRS OF THE LOCAL UNION. SUPERVISION ENDED EFFECTIVE JANU	JARY 1, 2011 AND
THE EXECUTIVE BOARD ASSUMED THE MANAGEMENT DUTIES OF THE ORG	ANIZATION.
FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION ISSUE	D NEW BYLAWS
AND UPDATED ITS CONSTITUTION EFFECTIVE JANUARY 1, 2011 WITH	THE END OF
SUPERVISION.	
FORM 990, PART VI, SECTION A, LINE 7A: ELECTIONS FOR EXECUTI	 [VE BOARD
MEMBERS ARE HELD EVERY 3 YEARS BY WHICH MEMBERS OF THE ORGAN	
ALL MEMBERS OF THE EXECUTIVE BOARD.	
FORM 990, PART VI, SECTION A, LINE 7B: CERTAIN ACTIONS AND I	SSUES ARE
VOTED ON BY THE MEMBERS IN ACCORDANCE WITH ARTICLE XII OF THE	E BYLAWS OF THE
LABOR ORGANIZATION.	

Schedule O (Form 990 or 990-EZ) (2010)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11

Schedule O (Form 990 or 990-EZ) (2010) Page 2 Name of the organization INTERNATIONAL UNION OF OPERATING **Employer identification number** ENGINEERS LOCAL 825 A, B, C, D, R 22-1010985 FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE BOARD ENGAGES AN INDEPENDENT CPA FIRM TO PREPARE THE FORM 990. UPON COMPLETION OF THE RETURN, THE CPA FIRM PROVIDES A DRAFT TO THE ORGANIZATION'S BUSINESS MANAGER. THE BUSINESS MANAGER REVIEWS THE FORM 990 UNDER HIS AUTHORITY GRANTED BY THE CONSTITUTION AND BY-LAWS OF THE LABOR UNION. THE FORM 990 IS SUBJECT TO REVIEW BY THE EXECUTIVE BOARD OF THE LOCAL AT A SUBSEOUENT BOARD MEETING. FORM 990, PART VI, SECTION B, LINE 12C: ALL OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE ORGANIZATION'S BUSINESS MANAGER IS SET BY THE EXECUTIVE BOARD OF THE LABOR ORGANIZATION. COMPENSATION TO OTHER OFFICERS AND EMPLOYEES OF THE ORGANIZATION IS DETERMINED BY THE BUSINESS MANAGER UNDER THE GUIDELINES DESCRIBED IN THE BYLAWS OF THE LABOR ORGANIZATION. THE LEVEL OF COMPENSATION IS SET BASED ON COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED INDIVIDUALS IN FUNCTIONALLY COMPARABLE POSITIONS AT OTHER ORGANIZATIONS OF SIMILAR SIZE AND IS SUBJECT TO INCREASES BASED ON CHANGES IN THE NATIONAL CONSUMER PRICE INDEX PUBLISHED BY THE U.S. DEPARTMENT OF LABOR. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION PROVIDES INFORMATION PERTAINING TO ITS GOVERNING DOCUMENTS, FINANCIAL STATEMENTS, POLICIES AND PROCEDURES TO THE PUBLIC AS REQUIRED BY LAW.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:

80,786.

Related Organizations and Unrelated Partnerships

2010 Open to Public Inspection Employer identification number OMB No 1545-0047 Direct controlling 22-1010985 entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets <u>e</u> Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Total income **©** ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) INTERNATIONAL UNION OF OPERATING В, С, D, ▶ Attach to Form 990. Primary activity 9 ENGINEERS LOCAL 825 A, Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULER (Form 990) Part II Part

(g) Section 512(b)(13) ટ × × controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) Exempt Code section DISTRICT OF COLUMBIA 501(C)(5) 527 Legal domicile (state or foreign country) VEW JERSEY TO SUPPORT LEGISLATION WHICH APPRECIATES THE Primary activity SOALS OF THE UNION ABOR UNION IUOE LOCAL 825 POLITICAL ACTION & EDUCATION INTERNATIONAL UNION OF OPERATING ENGINEERS COMMITTEE - 22-2009933, 65 SPRINGFIELD 53-0088590 1125 SEVENTEENTH STREET NW Name, address, and EIN of related organization 07081 AVENUE SPRINGFIELD, NJ 20036 WASHINGTON, DC

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

27

Schedule R (Form 990) 2010

032161 12-21-10 LHA

INTERNATIONAL UNION OF OPERATING

ENGINEERS LOCAL 825 A, B, C, D,

Schedule R (Form 990) 2010

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.) Part III

Page 2

22-1010985

General or Percentage managing ownership partner? 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 part IV, line 34 because it had one or more related part IV, line 34 because it had one or more related part IV. Yes No Code V-UBI camount in box 20 of Schedule - K-1 (Form 1065) N ate affocations? Disproportion-Yes No Ξ Share of end-of-year assets <u>6</u> Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Direct controlling entity ਉ (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization <u>a</u>

	(e) (f) (g)	Primary activity Legal domicile (state or foreign country)    Copin Scorp, Scorp, Scorp, Income end-of-year ownership country)   Copin Scorp, Scorp, Income end-of-year ownership or trust)   Copin Scorp, Income end-of-year ownership or trust   Copin Scorp, Income end-of-year ownership o							
organizations treated as a corporation or trust during the tax year)	(a) (b)	Name, address, and EIN of related organization							

Schedule R (Form 990) 2010

032162 12-21-10

## INTERNATIONAL UNION OF OPERATING

ENGINEERS LOCAL 825 Schedule R (Form 990) 2010

Page 3

22-1010985

Yes

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19 7 를 9 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. 782,948.PER CAPITA RATES 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? Part V | Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) (c) Amount involved (b)
Transaction
type (a-r) 0 Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) (1) INTERNATIONAL UNION OF OPERATING ENGINEERS 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) Sharing of facilities, equipment, mailing lists, or other assets c Gift, grant, or capital contribution from other organization(s) Other transfer of cash or property from other organization(s) q Other transfer of cash or property to other organization(s) Gift, grant, or capital contribution to other organization(s) Reimbursement paid by other organization for expenses 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) Sharing of paid employees Exchange of assets Ε 0 3

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Schedule R (Form 990) 2010

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22-1010985

Page 4

### INTERNATIONAL UNION OF OPERATING

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) В, ENGINEERS LOCAL 825 A, Schedule R (Form 990) 2010

General or managing partner? Yes No Ξ 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. Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) **6** Dispropor-tionate affocations? Yes No Share of end-ofyear assets <u>e</u> Are all partners section 501(c)(3) organizations? Yes No ন্ত Legal domicile (state or foreign country) Primary activity 9 Name, address, and EIN of entity

Schedule R (Form 990) 2010

### INTERNATIONAL UNION OF OPERATING

Schedule R	R (Form 990) 2010	ENGINEERS	LOCAL	825 A	, B,	С,	D,	R	22-1010985	Page 5
Part VII	(Form 990) 2010 Supplemental Info	rmation							•	
<u> </u>	Complete this part to pro	ovide additional inform	ation for res	nonses to d	niestior	ns on !	Schedi	ile R (see instri	ictions)	
	Complete this part to pro	TVICE ACCIDITAL INIONI	ation for res	porisos to t	40031101	13 011 (	<u>conjecte</u>	210 11 (300 11)311		
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Description	Date Acquired	Method	Life	S S	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
(D)2006 FORD EXPLORER-KALINOWSKY061506SL	061506		3.00	16	30,737.	,	<del>,</del>	30,737.	30,737.	4	0
(D)2006 FORD EXPLORER_DAVIS 8406061	061506SL	1	3.00.	16	33,163.	<u>-</u> ·		33,163.	33,163.		0.
00	20060706SL		3.00	16	32,512.		,	32,512.	32,512.	, l	0.
OLINE R	022706SL	ì	3.00	16	29,457.			29,457.	29,457.		0
RD TRUCK 4680	042707SL		3.00	16	31,263.		,	31,263.	31,263.		0.
008 GRAND JIS BL MCGOWAN	01 <mark>0108</mark> 51		3.00	16	21,746.		-1	21,746.	18,122.	1	3,624.
2008 FORD EXPLORER SOILVER 6157-OCCHUZ0101	01010851	ŠĽ	3.00	16	31,527.		1	31,527.	26,273.	:	5,254.
4	P010108SL	SL	3.00	16	21,702.		L	21,702.	18,085.	,	3,014.
(D)GRAND MARQUIS 17SILVER 9145-TUFARO	010108	SL	3.00	16	21,646.		,	21,646.	18,038.		3,608.
) JIS-SANTIAGO	93010108SL	SL	3.00	16_	32,597.		٠	32,597.	27,165.	;	5,432.
FORD RER-GRACE	9517010108SL		3.00	16_	23,480.	1		23,480.	17,331.	;	3,913.
ERCREW	110507SL	SL	3.00	16	9,452.		,	9,452.	8,402.	,	1,050.
2008 FORD TAURUS 21136936 TIVER	102208SL		3.00	16	26,977.			26,977.	14,987.		8,992.
8 FORD TAURUS	10220851		3.00	16	26,977.			26,977.	14,987.		8,992.
2008 FORD TAURUS	10220851,	ı	3.00		6,529			· 6	4		8,843.
ORD TAU	102208ST	) !			7.539		:	27,539.	15,300.		9,180.
2008 FORD TAURUS	103008SL	SI		16	7,34			,348	15,		9,116.
2008 FORD TAURUS	1117085	ST	3.00	_ 16	7.222	ı		, 222	4,36	! !	9,074.

Current Year Deduction	20,593.	0	0	0.	2,393.	2,914.	0	0	0	0	0	0	0	0.	0	0	0	0.
Current Sec 179	,	1	<u> </u>	1	1				<u>,, , , , , , , , , , , , , , , , , , ,</u>	1				+	3		!	
Accumulated Depreciation	427,171.	7,626.	8,000.	6,112.	12,264.	7,528.	1,032.	15,905.	5,350.	3,562.	9,391.	6,567.	31,981.	2,567.	179,472.	15,098.	33,756.	8,814.
Basis For Depreciation	679,581.	7,626.	8,000.	6,112.	35,893.	20,400.	1,032.	15,905.	5,350.	3,562.	9,391.	6,567.	31,981.	2,567.	179,472.	15,098.	33,756.	8,814.
Reduction In Basis	1 ,	1 1 1	1	* * *	1		,	:	1		,		•	- T				
Bus % Excl	ì	,	<del></del>	,	1	<del></del>				t 1 1	ı	1		,	,	4	:	
Unadjusted Cost Or Basis	679,581.	7,626.	8,000.	6,112.	35,893.	20,400.	1,032.	15,905.	5,350.	3,562.	9,391.	6,567.	31,981.	2,567.	179,472.	15,098.	33,756.	8,814.
No Se	0016	0016	0016	0016	0016	16	16	91	16	0016	16	16	16	16	<del>1</del> 6	16	16	16
Life	33.00	10.00	10.01	10.0[	15.0(	7.00	5.00	5.00	5.00	10.00	5.00	5.00	7.00	7.00	7.00	7.00	7.00	7.00
Method			,		1	SL	Ī	OSL .	SL	SL	SL	SL	SL	SL	Ì	SL	SL	SL
Date Acquired	011189SL	100297SL	100297SL	100297SL	05 <mark>160581</mark>	121207SL	040182SL	12309	121090SL	103097SL	101598SL	11159851	01070081	010700SL	010700SL	041600SL	040100SL	06010081
Description	CHERRY HILL 27BUILDING	28RENOVATIONS	29DUCT INSTALLATIONS	30ELECTRICAL WORK		3 ROOFTOP HEATING &	33IBM TYPEWRITER	E FURNIS	L825 SIGN AT CHERRY 41HILL	CARPET & 45INSTALLATION	PERIPHERALS-MICROWA 46RSE	Ø	$\Box$	INSTALLATION OF 50NETSSHELTER	51OFFICE FURNISHINGS	52FITNESS EQUIPMENT	530FFICE FURNISHINGS	AUDIO VISUAL EQUIP
Asset	27	28	29	30	31	32	33	40	41	45	46	47	49	50	51	52	53	54

Date Method Life
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2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

Current Year Deduction	0	0 -	0	0	0	545.	1,288.	0	0	0	0	, 0	170.	328.	188.	972.	225.	63.	actoribo Cacitoriotica
Curr	1	•	1		1	i		1			•				100		1		a Citatila
Current Sec 179	3 5 †	,	,	I.	1			,	,			,	1		1		1		9
Accumulated Depreciation	4,832.	11,413.	7,928.	9,664.	9,233.	3,177.	7,405.	3,549.	6,833.	8,294.	6,753.	5,622.	1,861.	3,620.	2,064.	13,618.	4,293.	3,664.	
Basis For Depreciation	4,832.	11,413.	7,928.	9,664.	9,233.	3,812.	9,014.	3,549.	6,833.	8,294.	6,754.	5,622.	2,031.	3,948.	2, 252.	14,590.	4,518.	3,727.	440 041
Reduction In Basis			;			-		ı				r							·
Bus % Excl		ł	,	ŧ		,		,						ı					
Unadjusted Cost Or Basis	4,832.	11,413.	7,928.	9,664.	9,233.	3,812.	9,014.	3,549.	6,833.	8,294.	6,754.	5,622.	2,031.	3,948.	2,252.	. 14,590.	4,518.	3,727.	
S. S.	16	16	16	16	16	16	16	16	16	16	16	1.6	16	16	16	16	<b>1</b> <u>6</u>	16	į
Life	3.00	3.00	3.00	3.00	3.00	7.00	7.00	3.00	3.00	3.00	3.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	
Method	ĪS	SL	SL	SL	ŠĽ	SL	SL	5SL	5SL	SL	SL	SL	- ZSI	SĪ	5SL	5SL	5SL	SL	1
Date Acquired	080704SL	122204SL	090404SL	072104SL	100504SL	082704SL	091004SL	021405	030905	040905	011405SL	041405SL	120905	120905 <u>S</u> L	11220	110305	091905	07200555	
Description	ELL COMPUTER	DELL COMPUTER	DELL	COMPTR	S COM CC	r_7	ES LATERAL	SERVER	(D) DELL SERVER FOR 87NY & CHERRY HILL	(D)LATTITUDE 88NOTEBOOKS &AXIM HAN040905SL	LATITTODES	UPGRADE FOR IP 90CAPABILITY PHONE	$\Box$	D)DELL NOTEBOO ATT X1	OKI COLORLASER PRTR 96MIDDLETOWN	~	(D)DELL COMPUTER SEQUIP	99(D)DELL EQUIPMENT	
Asset No	7.9	08	81	82	83	84	. 82	98	87	88	<u>6</u> ;	06	94	) 126	96	76	<b>8</b> 6.	6 6	028102

Current Year Deduction	. 216.	928.	1,422.	338.	453.	1,000.	407	166.	• 0	553	0	0	0,	0	0	0
Current Sec 179	,	1	•		,	,		•	,			1		I		
Accumulated Depreciation	4,100.	8,198.	11,373.	2,700.	3,699.	5,003.	3,458.	935.	2,441.	2,215.	2,529.	2,603.	2,603.	6,437.	12,507.	16,055.
Basis For Depreciation	4,316.	9,282.	14,217.	3,375.	4,528.	· E 0 0 0 3 •	4,068.	1,101.	2,441.	2,768.	2,529.	2,603.	2,603.	6,437	12,507.	16,055.
* Reduction in Basis						1	1	1	1	1	,		- ;		;	
Bus % Excl		_	,	ı		ı	i	<u>-</u>	,				_	{		
Unadjusted Cost Or Basis	4,316.	9,282.	14,217.	3,375.	4,528.	6,003.	4,068.	1,101.	2,441.	2,768.	2,529.	2,603.	2,603.	6,437.	12,507.	16,055.
eg S	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
Life	5.00	5.00	5.00	5.00	2.00	5.00	5.00	5.00	3.00	5.00	3.00	3.00	3.00	3.00	3.00	3.00
Method	i	ı	,					·					1	SL	SL	SL
Date Acquired	091905SL	123105SL	062706st	062706 <u>s</u> ı	TS908090	18906050	30 4 0 6 0 6	040606SL	041406SL	15900E90	081506SL	083106SL	083106SL	121506SL	082206SL	050107SL
Description	(D) DELL COMPUTER 100EQUIPMENT	(D) Z DELL POWEREDGE 1012850 SERVERS	r)	Ο	SWITCH	SYMANTIC BACKUP 105EXEC		MOBILE OFFICE		DIGITAL CAMERA & 109LENSES	HP LAPTOP 110SER#CND628OLGL	111HP LAPTOP	112HP LAPTOP	113(D)3 DELL LAPTOPS	114(D)3 DELL LAPTOPS	115(D)3 SERVERS
Asset	100	101	102	103	1043	105	106	107	108	109	110	111	112	113	114	115

(D) - Asset disposed

5.00 16

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

14,046

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8,308.

3.00

116(D)5 OPTIPLS (D)4 DELL 2950 118POWEREDGE SERVERS

Asset	Description	Date Acquired	Method	Life	No e	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
119	SYS FOF	101107SL	TS	2.00	16	7,552.	1		7,552.	4,153.		1,510.
120	거 <u>다</u>	060308	OBSL	5.00	16	72,464.	1	•	72,464.	30,194.		14,493.
121	INTIMUS 452 SHREDDER	102407SL	SL	5.00	16	1,995.	1	,	1,995.	1,064.	!	399.
122	AUDIO VISUAL EQUIP 122 <mark>IN BD_ROOM- UNION</mark> O	0110607SL	SL	2.00	16	5,499.			5,499.	2,933.		1,100.
123	123ROUTER EQUIPMENT	0 <u>8</u> 12075	SL	3.00	16	1,471.		,	1,471.	1,430.		41.
124	MULTITECH FAX 124FINDER FF100	081207SL	SL	3.00	16	610			610.	592.	l	18.
125	HEWLETT PACKARD 125(MICH GRACE)	082907SL	Sī	3.00	16	2,922.	1	ı	2,922.	2,760.	1	162.
126	HEWLETT 126PACKARD (MCGOWAN)	100107SL	SL	3.00	16	2,231.	,		2,231.	2,046.	i.	185.
127	127FUJITSU F15120C	102407SL	Sī	3.00	16	1,019.	1	:	1,019.	906		113.
1285	DELLC	112607SL	SL	5.00	16	12,696.		:	12,696.	. 635, 6		2,539.
125	OKIDATA C5500N 129PRINTER	121207SL	SL	3.00	16	647.	1		647.	558.	;	. 89
130	DELL LATITUDE 130D830(JVH)	123107	07SL	3.00	16	3,756.		,	3,756.	3,130.		626.
131		020408SL	SL	3.00	16	6,128.	i		6,128.	4,937.	ŧ	1,021.
132	$\vdash$	030708SL	SL	3.00	16	4,063.			4,063.	3,159.	•	904.
133	SCANNER FUJITSU 133F1-5120C	031708SL	SL	3.00	16	1,007.		• ;	1,007.	756.	,	251.
134	PRI T	042108SL	SL	3.00	16	3,129.	1		3,129.	2,260.	1	869.
135	HPLASEKUET F3005 135BUS AGENT AREA	042108SL	SL	3.00	16	769.	,		769.	555.	3	214.
136	136HP LASERJET 8100	053008SL	SL	3.00	16	398.			398.	277.		121.

(D) - Asset disposed

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# 2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Current Year Deduction	574.	344.	454	2,316.	405.	659	.0	0	26,245.	1,847.	587.	726.	21,106.	231.	1,613	31,886.	4,057.	10,575.
Current Sec 179	,				!	:	;	!	k k		í	•	,	:	;	;	; ; ;	
Accumulated Depreciation	1,305.	630.	794.	3,474.	506.	629			520,177.	9,234.	2,445.	2, 661.	196,986.	2,191.	16,937.	334,800.	40,911.	84,598.
Basis For Depreciation	1,879.	1,031.	1,361.	6,949.	1,216.	1,978.	132,000.	.000,06	. 180, 388	27,700.	5,865.	7,255.	823,118.	· 066'8	53,231.	1052226.	133,894.	348,965.
* Reduction In Basis		!	-		,			·		ı		,	,	,	•			
Bus % Excl				1	i						,	,		,				
Unadjusted Cost Or Basis	1,879.	1,031.	1,361.	6,949.	1,216.	1,978.	132,000.	.000,06	. 1866, 087.	27,700.	5,865.	7,255.	823,118.	.066,8	53,231.	1052226.	133,894.	348,965.
No No	16	16	16	16	16	16	1	-	0 <u>1</u> 6	016	016	016	016	016	016	016	016	016
Lıfe	3.00	3.00	3.00	3,00	3.00	3.00		-	33.0	15.0	10.0	10.0	39.0	39.0	33.0	33.0	33.0	33.0
Method	SL	8SL	SL	SI	SL	SL	<u> </u>	븅	1SL	5SL	1S9	SL	SL	SL	OSL	OST	OSL	SL
Date Acquired	0530088L	806060	.00108	010709SL	040709SL	061609SL	010391	1118	39	63005	042906	100106SL	031501SL	RE010101SL	010100	010100	060100	062502SL
Description	Eduti	088	DELL OPTIPLEX 1755/MULLER/ LVC 0811100108SL	DELL LATITODE E6500	VOSTRO NTBK J INV666117548	DELL PHASER 3635MFP 142NTWK PRINTER INV 7 0	4 3LAND MIDDLETOWN	44LAND CHERRY HILL 0	45MIDDLETOWN BUILDING010	146NEW SIDEWALK & CURB06300	WN	ANGER		N OF ROOM	ARCHITECTURE DESIGN SPRINGFIELD	LAS	ROOM ATIONS	DAMON DOUGLAS 54RENOVATIONS 0
Asset No	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154

(D) - Asset disposed

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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ıar n	. 92	306.	109.	221.	121.	72.	478.	42.	542.	378.	416.	341.	23.	65.	35.	35.	. 66	44.
Current Year Deduction	979'9	10,3(	10,10	10,22	10,12	10,272	7	54	2,	3.	<u></u>	34	35.	36	3	, E	29	24
Current Sec 179	!	•	٠					•						•			ı	
Accumulated Depreciation	9,939.	4,294.	4,212.	4,259.	2,530.	2,568.	199.	226.	226.	158.	173.	85.	54.	30.	28.	ı	,	-
Basis For Depreciation	26,505.	30,918.	30,326.	30,662.	30,362.	30,817.	1,433.	1,627.	1,627.	1,134.	1,248.	1,023.	696	1,095	1,005.	1,005.	1,077.	977.
Reduction In Basis	i i		1	1	!			÷	•	:		1				,	1	
Bus % Excl		ı	,	,		. ,	š.		ı	,		1	•	r	1	ı	,	
Unadjusted Cost Or Basis	26,505.	30,918.	30,326.	30,662.	30,362.	30,817.	1,433.	1,627.	1,627.	1,134.	1,248.	1,023.	969.	1,095.	1,005.	1,005.	1,077.	977.
No o	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
Life	4.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00
Method	SI	ĪSĒ	J <u>Š</u> Ō.	Sr	Zr	SL	TS(	OSL	Зr	SL	ТŠ	ZI.	ТŠ	SL	OSI.	SL	ТŠ	SI
Date Acquired	122208	012610	012610	0 <u>1</u> 2610SL	032310SL	032310SL	020210SL	020210	OZOZIOST	020210SL	020210 <u>S</u> E	033010SL	0427 <u>10</u> SL	052510SL	052510	062910SL	082410SL	092810
Description	TELRAD WIRELESS SSYSTEM	62010 FORD TAURUS	1572010 FORD TAURUS	1582010 FORD TAURUS	1592010 FORD TAURUS	1602010 FORD TAURUS	161DELL LAT E550	162DELL LAT E6500	163DELL LAT E6500	164DELL CORE E7500	165DELL VOSTRO 1720	166DELL LAT E5500	167DELL LAT E5500	168DELL BKUP SERVER	169DELL VOSTRO 3500	VOSTRO 3500	MI/E5300 STUD	DELL VOSTRO 2353500/ORDER 44559806092810SL
Asset	1559	1562	1572	1582	1592	160	161	162	163 <u>r</u>	164	165	166	1671	168	1691	170	2345	235 <u>3</u>

(D) - Asset disposed

## 2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE

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5,768. 1,382, 244. 2,213 313, 974 392 202 156, 129 166 99 227 247 222 247 67 227 Current Year Beduction Current Sec 179 Accumulated Depreciation 1,569. 1,728. 802 907 8,851 1,251 1,111 1,140 799 775 892 977 907 23,072 3,896 8,291 1,193 1,111 Basis For Depreciation Reduction In Basis Bus % Excl 1,140 1,193 8,851 1,251 3,896 1,728 802 8,291 775 677 907 1,111 799 892 907 23,072 1,569 1,111 Unadjusted Cost Or Basis \$ E 16 16 16 16 16 16 16 16 16 16 16 16 16 16 16 3.00 00. 3.00 00. 5.00 3.00 3.00 3.00 3.00 3.00 3.00 00. 3.00 00. 00. 00. 3.00 3.00 Lfe Method OSI OSI OSI 3500/ORDER 44559789092810SL 3500/ORDER 44799210092810SL 3400/ORDER 4479921009|28|10|SL 101210SL 01210SL 02610SL 610SL TABLE/MODERN OFFICE111610SL 533|12|28|10|SL 0<u>1|25|11|SL</u> 0|26|10|SL 0301115Date Acquired 01210 DATAPRISE POWEREDGE 410/IN POWERCONNECT 5424 VOSTRO 3500 VOSTRO 3500 EQUALLOGIC TRK 10/ORD 3G SER 320 2404000E/DATAPRISE BUNDLE SOFTWARE /IZIO LED TV/55 DELL VOSTRO 320 239k410 SERVER (2) SISCO ASA 5505 VSPHERE Ö 248|IN/SML CONF RM ENNTLS BUNDLE SMALL CONF RM CITRIX REMOTE 245FAST TTRK 50 Description APPLE I PAD/ DELL INSPIR VOSTRO DELL VOSTRO VOSTRO TRK 50 252 V5047 SGWETV VOSTRO TRACK 249xF4JC4RD7 ALEVEE MWARE 250ACCESS DELL DELL )ELL DELL FAST [PAD DELL 244FAST 253FAST (2) **24**6时 247 242 251 237 Asset No

(D) - Asset disposed

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:010 DEPRECIATION AND AMORTIZATION REPORT	
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FORM 990 PAGE 10

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Current Year Beduction	82.	.09	210.	54.	25.	28.	28.	22.	. 22.	25.	25.	15.	0	7,103.	6,305.	4,384.	4,480.	3,453.	tion Deduction
Current Sec 179		!	!	1	;	1	1		ī	í		1	1	1	1				mercial Revitaliza
Accumulated Depreciation	r I				!	;	1	1		1	•	, 1	i	-		ì	,		age, Bonus, Comi
Basis For Depreciation	984.	715.	6,300.	973.	889.	. 1994.	994.	780.	780.	887.	887.	534.	7,840.	31,964.	32,426.	31,568.	32,255.	31,080.	* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
Reduction In Basis		,	,	•	•			-			-			-	,				* ITC,
Bus % Excl	,	,								ı					,				
Unadjusted Cost Or Basis	984.	715.	6,300.	973.	889	. 1994.	994.	780.	780.	887.	887.	534.	7,840.	31,964.	32,426.	31,568.	32,255.	31,080.	(D) - Asset disposed
S S	16	16	16	16	16	16	16	16_	16	16	16	16	16	16	16	16	16	16	7·( <u>0</u>
Life	3.00	3.00	5.00	3.00	3.00	3.00	3.00	3.00	3.00	3,00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	
Method			1				<u>.</u>	,	k 	1	ii ii	ī.			•	,i	, <u>, , , , , , , , , , , , , , , , , , </u>	Li Li	
Date Acquired	040511SI	040511SL	041911SL	050311SL	J051711SL	052411SL	052411SL	060711SL	060711SL	060711SL	060711SL	060711SL	0630 <u>11</u> SL	102510SL	120810SL	011711SL	020711SL	022211SL	
Description	VOSTRO 310 TRACK GOMINHO	DELL LAT ESSIO	INFLATABLE UNION 256RAT/BIG SKY	2 <u>5</u> 7DELL VOSTRO 330	IPAD /WOOD,	VOSTRO I	DELL VOSTRO 330 260TOUCH	261 IPAD DLXFMP0GDF	262 IPAD DLXFMP17DFJ2	263 IPAD DN6FM8HTDFJ3	264IPAD DN6FMBOCDFJ3	265IPAD DLXFN2M3DFHW			9160TAURUS/PRISK 2011 FORD	9161TAURUS/HJELM	FORD JS/KAI	2163DAVIS	
Asset	254	255	256	257	258	259	260	261	262	263	264	265	266	9159	9160	9161	9162	9163	028102 05-01-10

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2010 DEPRECIATION AND AMORTIZATION REPORT	

FORM 990 PAGE 10

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					,	,		1	,							
Current Year Deduction	888	888	352,667			<b>;</b>	1	!	!	1	; ; ;	•			; ; ;	
Current Sec 179		,	0			,							•		,	,
Accumulated Depreciation		i	2857959.			ì	4							,		,
Basis For Depreciation	. 3 <u>1</u> ,963.	31,984.	6170364.	1		t				:		) }		i	•	
Reduction In Basis		, ;	0	1			1			1	; ; ;	;		1	;	; !
Bus % Excl			;	1	1		1	,	1	1	· ·		Ţ		•	
Unadjusted Cost Or Basis	31,963.	31,984.	6170364.													
No o	16	16	,										· ·			
Life	3.00	3.00	1	1	1	,				1 1 1	1	;		ı	-	
Method	,			1	t 1	1				,			1			
Date Acquired	061511SL	061511SL	1						;	;	,			;	,	
Description	2011 FORD TAURUS/J 9164BLACK	/LONG	TOTAL 990 FAGE			- *****			•	,	,			,		
Asset	9164	9165		1	1		 ,	í				,		i 1	į	!

(D) - Asset disposed

Part VII Section A. Officers, Directors, Tru (A)	(B)			(C	<b>;</b> )			(D)	(E)	(F)	
Name and title	Average hours per	(cl		Posi all t		app	ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
IMOTHY MULLER	40.00						X	135,851.	0.	40,245	
ISTRICT REPRESENTATIVE/DISPATCHER	40.00	_					23	133,031.		40,243	
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