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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

			_		<u> </u>
		C Name of organization	.1	D Employer	identification number
_		UNITED ASSOCIATION OF JOURNEYMEN &		E2 01 E0	020
_		Doing Business As		53-0159	020
Naı —	me cha	nge		E Telephone	number
Inıt	ıal retu	Number and street (of P O box if mail is not delivered to street address)	Room/suite	(410) 26	9-2000
Ter	Miles of Large Brooked Miles Miles				
_ Am	ended			G Gross recei	pts \$ 172,011,749
— Арр	olicatio				
		F Name and address of principal officer	H(a) Is this a	group return for affi	luates 2 Ves V No
			11(4) 13 (1113 4	group recurrior and	naces y res y No
			H(b) Are all	affiliates included	d?
				-	
r Ta	x-exen	npt status 501(c)(3) 501(c)(5) (insert no) 4947(a)(1) or 527	H(c) Group	exemption n	number 🟲
1 W	eheit.	- IIA ORG			
			<u> </u>		
K For	n of or	ganization Corporation Trust Association ✓ Other ► INTERNATIONAL LABOR UNION	L Year of for		M State of legal domicile
Pa	rt I	Summary			
	1				
		· · · · · · · · · · · · · · · · · · ·			
Governance					
喜					
<u>\$</u>	2	Check this box F if the organization discontinued its operations or disposed	of more than 2!	5% of its net	assets
		, , , , , , , , , , , , , , , , , , ,		1	7
න් ග)	4	0
Activities &			•	5	102
<u> </u>				6	0
ă				7a	0
	ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0
			Prior	Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	0		
量	9	Program service revenue (Part VIII, line 2g)	74,573,238	74,913,369	
Rayenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,474,845		
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,549,860	3,130,391
	12				24.542.625
					84,518,605
				<u>, , , , , , , , , , , , , , , , , , , </u>	5,131,108
			_	9,830,933	9,384,562
8	15			27,351,677	27,272,819
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
Ě	ь	Total fundraising expenses (Part IX, column (D), line 25) •0			
Ш	17	- · · · · · · · · · · · · · · · · · · ·		22,183,154	30,400,806
					72,189,295
	19			16,581,280	12,329,310
ያ ው			Beginning	of Current	End of Year
စ္ကန္					cilu di Tear
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2	02,557,097	206,350,938
E E		, , , ,		' '	34,561,590
			1	59,460,038	171,789,348
		_			
mow	ledge	and belief, it is true, correct, and complete. Declaration of preparer (other than office			
			20:	12-05-07	
Sign		Signature of officer	Da	te	
Here	е				
		<u> </u>			_
		I propororio namo I I I I ROBERTSON I I I I I I I I ROBERTSON I I I I I I I I I I I I I I I I I I I			PTIN
Paid		CPA CPA CPA	.012-02-0/	imployed F V	<u> </u>
Prepa	arer				Firm's EIN
Use (Only	Firm's address • 4600 EAST-WEST HIGHWAY SUITE 300		Phone no ▶ (301) 830- 7400	

May the IRS discuss this return with the preparer shown above? (see instructions)

Par	t IIII Stateme	ent of Program Service Ac	complishments		rage z
		chedule O contains a response t	o any question in this Part III		· · · · · · · · · · · · · · · · · · ·
1		the organization's mission			
PRO	VIDING SERVICE	ES AND BENEFITS TO MEMBER	5		
2	the prior Form 99	90 or 990-EZ?	gram services during the year wh		┌ Yes ┌ No
		e these new services on Schedule			
3	services?		gnificant changes in how it condu	cts, any program	┌ Yes ┌ No
	If "Yes," describe	e these changes on Schedule O			
4	Section 501(c)(3	3) and 501(c)(4) organizations ar	ach of the organization's three larg id section 4947(a)(1) trusts are r enue, if any, for each program serv	equired to report the am	
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PROVIDING SERVIC	ES AND BENEFITS TO MEMBERS			
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d		services (Describe in Schedule (·		
	(Expenses \$	ıncludıng ç	rants of \$) (Revenue \$)
4e	Total program s	ervice expenses►\$			

Part IV Checklist of Required Schedules

-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νo
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2010)

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 179			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	-		
_	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
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)?	4a	Yes	
b	,		163	
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
С	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 any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
e	contract?	7e 7f		
	If the organization, during the year, pay premiums, directly of muliectly, on a personal benefit contract.			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8		
	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		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11				
	Gross income from members or shareholders			
U	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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	13a		
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	1		
1.4-	Did the organization receive any payments for indoor tanning services during the tax year?	1/1-		NI ~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		N o
	, and the second			

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

Charle of Cabadula O	contains a response to an	augetien in this Dart I/I					1.4
Check if Schedule O	contains a response to any	question in this Part VI					

Se	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο				
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No				
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was							
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No				
6	Does the organization have members or stockholders?	6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes					
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7a 7b	Yes					
8		75	165					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο				
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)							
	venue coue.)		Yes	No				
102	Does the organization have local chapters, branches, or affiliates?	10a	Yes					
	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	Yes					
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		N o				
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b						
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	140						
·	describe in Schedule O how this is done	12c						
13	Does the organization have a written whistleblower policy?	13		No				
14	Does the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		Νo				
b	Other officers or key employees of the organization	15b		No				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes					
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	Yes					
Se	ction C. Disclosure	1						
17	List the States with which a copy of this Form 990 is required to be filed ►MD							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)							
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. A nother's website. Upon request.							

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 GENERAL SECRETARY-TREASURER 3 PARK PLACE

ANNAPOLIS, MD 21401 (410) 269-2000

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

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

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

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

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

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi		C) (che	cka			(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	当吉 organizatio	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
See Additional Data Table										
-										
			<u> </u>							

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

(A) Name and Title	(B) A verage hours	I	((tion ((che		II		(D) Reportable compensation	(E) Reportable compensation	ו ה	(F) Estima amount o	ited f other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations		from t organizati relate	:he on and ed
See Additional Data Table												
										+		
										+		
	Sub-Total											
										_		
										_		
				•	•		-					
							-	10,781,673		0	4,9	906,493
2 Total number of individuals (inc	luding but not lir	nited to	thos	e lıs	ted	above) who	received more tha	n		·	
											Yes	No
					eye •	mploy •	ee, o	r highest compensa	ated employee	3		No
										4	Yes	
										5		No
Section B. Independent Cor	ntractors											
1 Complete this table for your five		nsated i	ndep	ende	ent c	ontra	tors	that received more	than			

\$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
O'DONOGHUE & O'DONOGHUE 4748 WISCONSIN AVENUE WASHINGTON, DC 20036	LEGAL SERVICES	2,704,287
KELLY PRESS INC 1701 CABIN BRANCH ROAD CHEVERLY, MD 20785	PRINTING & SUPPLY SERVICES	1,379,465
PRINT MANAGEMENT INC 36523 MOUNTVILLE ROAD MIDDLEBURG, VA 20117	PRINTING SERVICES	658,458
POSTMASTER 350 CENTRAL AVENUE LONG PRAIRIE, MN 56347	POSTAGE FOR PUBLICATION	632,000
K&R INDUSTRIES 14110 SULLYFIELD CIRCLE CHANTILLY, VA 20151	SUPPLY COMPANY	356,952
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►14) who received more than	

Part \		2010) Statement of Revenu	10				Pa	ge 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations	. 1c . 1d .1e and 1f	Business Code				
Program Service Revenue		MEMBERSHIP DUES & ASSE SALE OF JEWELRY, DECAL All other program service rev Total. Add lines 2a-2f		900099 900099	74,580,664 332,705 74,913,369			
	4 5 6a b	Investment income (including and other similar amounts). Income from investment of tax-exer. Royalties Gross Rents Less rental expenses Rental income or (loss). Net rental income or (loss)	(1) Real 578,635	(II) Personal	3,128,937 578,635			3,128,937 3,128,937
nue	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising	(i) Securities 90,810,052 87,453,530 3,356,522	(II) O ther 29,000 39,614 -10,614	3,345,908	3,345,908		
Other Revenue	c 9a b c	s of contributions reported on I See Part IV, line 18 Less direct expenses Net income or (loss) from fun Gross income from gaming at Less direct expenses Net income or (loss) from gaming at Less direct expenses	a b draising events . F ctivities See Part IV, line 19 . a	a b				
,	11a	-		Business Code 900099	2,551,756	2,551,756		
		Total. Add lines 11a-11d . Total revenue. See Instruction	▶		2,551,756 84,518,605		0	3,707,57

	990 (2010)				Page 10
Par	Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mus	t commists = II -	alumna		
А	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,565,415			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	565,693			
4	Benefits paid to or for members	9,384,562			
5	Compensation of current officers, directors, trustees, and key employees	13,769,025			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	6,509,229			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,188,481			
9	Other employee benefits	3,980,663			
10	Payroll taxes	825,421			
а	Fees for services (non-employees) Management	150,312			
ь	Legal	2,600,470			
С	Accounting	302,368			
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	295,752			
g	Other	103,596			
12	Advertising and promotion	595,634			
13	Office expenses	1,183,156			
14	Information technology	306,727			
15	Royalties				
16	Occupancy	1,490,558			
17	Travel	2,919,320			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	663,379			
20	Interest	1,359,296			
21	Payments to affiliates	3,556,266			
22	Depreciation, depletion, and amortization	1,178,809			
23	Insurance	201,768			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	2011 CONVENTION EXPENSE	7,769,432			
b	UA JOURNAL	2,856,081			
С	DONATIONS	922,432			
d	ORGANIZING EXPENSES	579,607			
e	EXPENSES- OFFICERS & RE	547,064			
f	All other expenses	818,779			
25	Total functional expenses. Add lines 1 through 24f	72,189,295			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2010)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			250	1	250
	2	Savings and temporary cash investments	16,233,626	2	17,204,028		
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$, and contributing e sponsoring organizations of section $501(c)(9)$ voluntary employorganizations (see instructions)	ers, and				
eţs		Schedule L			6		
Assets	7	Notes and loans receivable, net			33,510,625	7	33,688,152
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	and, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D		49,940,771			
	ь	Less accumulated depreciation	10b	3,431,967	47,115,099	10c	46,508,804
	11	Investments—publicly traded securities	104,093,363	11	107,735,701		
	12	$Investments-other securities \ \ See\ Part\ IV\ ,\ line\ 11 \ \ . \ \ .$			899,413	12	899,413
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	_
	15	Other assets See Part IV, line 11	•		704,721	15	314,590
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			202,557,097	16	206,350,938
	17	Accounts payable and accrued expenses .				17	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
eS	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
<u> </u>		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties			41,250,000	23	32,643,244
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D		1,847,059	25	1,918,346	
	26	Total liabilities. Add lines 17 through 25			43,097,059	26	34,561,590
es —		Organizations that follow SFAS 117, check here ▶ ☐ and comp through 29, and lines 33 and 34.		ines 27			
Balance	27	Unrestricted net assets				27	
80	28	Temporarily restricted net assets		28			
<u>=</u>	29	Permanently restricted net assets			29		
Fund		Organizations that do not follow SFAS 117, check here ▶ 🔽 ar lines 30 through 34.	nd con	plet e			
ō	30	Capital stock or trust principal, or current funds			159,460,038	30	171,789,348
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			139,400,038	31	171,769,348
ري ري					0	31	
	32	Retained earnings, endowment, accumulated income, or other fu	anus		159,460,038		171,789,348
Net	33	Total net assets or fund balances			· · · · · ·		-
	34	Total liabilities and net assets/fund balances			202,557,097	34	206,350,938

Pa	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		84.5	518,60
2	Total expenses (must equal Part IX, column (A), line 25)	2			189,29
3	Revenue less expenses Subtract line 2 from line 1	3		,	329,310
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4				
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,
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		171,7	789,34
Pai	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in	n			
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

DLN: 93493128006312

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

If the organization answered "Yes,"	' to Form 990, Part IV, Lin	e 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) organizations Complete Part III

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Volunteer hours

Employer identification number

53-0159020

Par	t I-A Complete if the organization is exempt under section 501(c) or is a section	on 52	7 organi	zation.
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV			
2	Political expenditures	F	\$	199,250

Par	t I-B Complete if the organization is exempt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organization under section 4955	>	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	>	\$

┌ No ☐ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

□ No Was a correction made? **4a**

If "Yes," describe in Part IV

art I-C	Complete if the or	ganization is exemp	t under section 501(c) except section 501(c)(3).

54,750 Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 199,250

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter - 0 directly delivered to a separate political organization If none, enter - 0 -See Additional Data Table

Did the filing organization file Form 1120-POL for this year?

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

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

•		·	_
Part II-B	Complete if the org	panization is exempt under section 501(c)(3) and has NOT filed Form 5768	
	(election under sec	ction 501(h)).	

		(a)		(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
ь	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?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 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		•	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	501(c)(5), o	r section
				Yes No

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		Νo

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		

Part IV Supplemental Information

political expenditure next year?

Dues, assessments and similar amounts from members

5 Taxable amount of lobbying and political expenditures (see instructions)

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

Ident if ier	Ret urn Reference	Explanation
ORGANIZATIONS DIRECT AND	PART I-A, LINE 1	PROVIDED CONTRIBUTIONS TO FEDERAL AND NON-
INDIRECT POLITICAL CAMPAIGN		FEDERAL CANDIDATES THROUGHOUT THE UNITED
ACTIVITIES		STATES

1 1

5

Software ID: Software Version:

EIN: 53-0159020

Name: UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Form 990, Schedule C, Part 1-C, Line 5

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's own internal funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
ANDREW CUOMO 2010	PO BOX 683 NEW YORK, NY 10008	134153895	10000	
ARIZONA DEMOCRATIC PARTY	2910 NORTH CENTRAL AVENUE PHOENIX,AZ 85012	860125308	20000	
CALIFORNIA DEMOCRACTIC PARTY	1401 21ST STREET SUITE 200 SACRAMENTO, CA 95811	942214618	49500	
COHEN FOR MAYOR	PO BOX 3481 ANNAPOLIS, MD 21403		500	
GOVERNOR DAYTON RECOUNT FUND	225 EAST PLATA BOULEVARD ST PAUL, MN 55107	273884798	5000	
FRIENDS OF CLASSIE HOYLE	200 WESTGATE CIRCLE SUITE 500 ANNAPOLIS, MD 21401		250	
FRIENDS OF JOHN C D'AMICO	4406 W LAWRENCE AVENUE CHICAGO,IL 60630	273269212	5000	
FRIENDS OF MATTIE HUNTER	PO BOX 439430 CHICAGO,IL 60616	323488958	1500	
FRIENDS OF VERSCHOORE	4600 46TH AVENUE ROCK ISLAND, IL 61201	810607901	7500	
GREGG FOR INDIANA	PO BOX 301 SANDBORN,IN 47578	356644803	5000	
HOUSE VICTORY 2012	214 SOUTH BRONOUGH STREET TALLAHASSEE,FL 32301	270054352	2500	
JIM HOOD FOR ATTORNEY GENERAL	550 HIGH STREET SUITE 1200 JACKSON, MS 39201		5000	
LOCAL UNION 519 PAC	14105 NW 58TH COURT MIAMI LAKES,FL 33014		25000	
MARYLAND DEMOCRATIC PARTY	33 WEST STREET SUITE 200 ANNAPOLIS, MD 21401	520908106		
MARYLAND INAUGURAL COMMITTEE	1010 HULL STREET SUITE 202 BALTIMORE, MD 21230		10000	
NO ON I-1082	PO BOX 2282 SEATTLE, WA 98111	272378918	12500	
SCHNEIDERMANN FOR ATTORNEY GENERAL	131 VARICK STREET NEW YORK, NY 10013	900039760	20000	
SENATE VICTORY 2012	214 SOUTH BRONOUGH STREET TALLAHASSEE,FL 32301	202106873	2500	
UTAH AFL-CIO	2261 S REDWOOD ROAD SUITE M WEST VALLEY,UT 84119	870231247	2500	
YES FOR SCHOOLS AND JOBS	PO BOX 9100 SEATTLE, WA 98109	272450737	5000	

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DLN: 93493128006312

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Rev

Supplemental Financial Statements

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

Open to Public

emai r	Revenue Service	orm 990. F See separate instructions.		Tilisheci	
JNIT	e of the organization ED ASSOCIATION OF JOURNEYMEN & ENTICES OF THE PLUMBING & PIPE		Employer identi	fication numbe	er
	t I Organizations Maintaining Donor A	dvised Funds or Other Similar Fu	53-0159020 53-0159020	nts Complet	te if the
	organization answered "Yes" to Form 99			iitoi compie	
	-	(a) Donor advised funds	(b) Funds a	nd other accou	nts
	Total number at end of year				
	Aggregate contributions to (during year)				
	Aggregate grants from (during year)				
	Aggregate value at end of year				
	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advised	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	☐ Yes	┌ No
ar	Conservation Easements. Complete	if the organization answered "Yes" to	o Form 990, Par	t IV, line 7.	
	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreated) Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	certified historic st	· ·	a
			Held at	the End of the	Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
c	Number of conservation easements on a certified his	toric structure included in (a)	2c		
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d		
	Number of conservation easements modified, transfe the taxable year • Number of states where property subject to conserva		d by the organizat	ion during	
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, hand	— dling of violations,	and Yes	┌ No
	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents during the ye	ar ►	
	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year 🕨	+\$	
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	?(d) above satisfy the requirements of sec	tion	☐ Yes	┌ No
	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financial			
art	Organizations Maintaining Collection Complete if the organization answered		or Other Simil	ar Assets.	
	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or research	ch in furtherance o		∍,
	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		
	(ii) Assets included in Form 990, Part X				
	If the organization received or held works of art, hist	orical treasures. or other similar assets fo			
	following amounts required to be reported under SFA				
а	Revenues included in Form 990, Part VIII, line 1		▶ \$		

Assets included in Form 990, Part X

Pari	444 Organizations Maintaining Co	illections of Art	t, His	tori	<u>cal Tre</u>	asu	res, or C	<u> the</u>	<u>r Similar As</u>	sets (contınued
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ıe foll	owing th	at are	e a significa	ant u	se of its collect	ion	
а	Public exhibition		d	\vdash	Loan or	exch	nange progi	rams			
b	Scholarly research		e	Γ	Other						
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain hov	v the	/ further	the o	rganızatıor	n's ex	empt purpose	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									┌ Yes	┌ No
Par	t IV Escrow and Custodial Arrang						answere	d "Y	es" to Form 9	90,	
	Part IV, line 9, or reported an ar										
	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ons o	r other ass	etsı		☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	able		Г		_		
_							_	_	An	nount	
C _	Beginning balance						_	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo		e 21?							Yes	No
	If "Yes," explain the arrangement in Part XI\				1 11371			D-	I T) (I 40		
Рa	rt V Endowment Funds. Complete	(a)Current Year		were Prior \			- orm 990, o Years Back		TIV, IINE 10. Three Years Back	(e) Four	Years Back
la	Beginning of year balance	(a) can con t can	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(-)		1(-,		(-)	
b	Contributions										
С	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities										
_	and programs										
f	Administrative expenses							+			
g	End of year balance										
2	Provide the estimated percentage of the year	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
Ь	Permanent endowment 🕨										
C	Term endowment 🕨										
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation	that a	ire held a	and a	dministere	d for	the	Yes	s No
	(i) unrelated organizations								3a(1
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organization								31)	
4	Describe in Part XIV the intended uses of th										
Par	t VI Investments—Land, Building	s, and Equipme	nt. S							т —	
	Description of investment				Cost or ot (investme		(b) Cost or o basis (othe		(c) Accumulated depreciation	(d) I	Book value
1a	Land						10,890	,004			10,890,004
b	Buildings		•			_	37,438	3,999	2,981,36	5	34,457,634
c	Leasehold improvements		•			_					
d	Equipment		•			_		5,544	226,33	5	440,209
е	Other			1			945	5,224	224,26	7	720,95

46,508,804

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
o thei		
Total. (Column (b) should equal Form 990. Part X. col (B) line 12.)	,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See		12
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III		(b) Book value
(a) Descrip) CIOII	(b) Book value
		1
		+
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
PAYROLL DEDUCTIONS	3,571	
MISC ACCT PAYABLE	98	
DEFERRED COMPENSATION	963,865	
HEALTH INSURANCE RESERVES	950,812	
	930,012	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	1,918,346	

	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	115	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	84,518,605
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	72,189,295
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	12,329,310
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8		8	
9	Other (Describe in Part XIV)	9	
	Total adjustments (net) Add lines 4 - 8		12 220 210
LO	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	12,329,310
	Reconciliation of Revenue per Audited Financial Statements With Revenue		eturn
L	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	-	
Ь	Donated services and use of facilities	-	
С	Recoveries of prior year grants	-	
d	Other (Describe in Part XIV)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
1	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
L	Total expenses and losses per audited financial statements	1	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	_	
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
1	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
		5	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		

Identifier Return Reference Explanation

additional information

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DLN: 93493128006312

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

	TED ACCOCTATION OF 10 HBNE	VMENIO					
	TED ASSOCIATION OF JOURNE RENTICES OF THE PLUMBING &				53-01590	20	
	rt I General Information	n on Activiti		ne United States. Co			
	"Yes" to Form 990, Par			s to substantiate the	amount of the gray	ata or	
For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award							
	the grants or assistance?	•	=				
	_						
	For grant makers. Describe in Pa United States	rt V the organiz	atıon's procedur	es for monitoring the use	of grant funds outsid	de the	
	Activites per Region (Use Part \	V ıf addıtıonal sı	pace is needed)	1			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (o a program service, desci specific type of service(s) in region		
	NORTH AMERICA	1	8		N/A	2,103,626	
	Sub-total	1	8			2,103,626	
Ł	Total from continuation sheets	1 ^					

to Part I

c Totals (add lines 3a and 3b)

2,103,626

Sch	edule F (Form 990))2010							Page 2
Pa	Part IV,	line 15, for any		nizations or Entitions or Entitions or Entitions or Entitions of Entit					
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			NORTH AMERICA	O R G A N I Z I N G G R A N T	104,379	CHECK			воок
			NORTH AMERICA	O R G A N I Z I N G G R A N T	43,460	CHECK			воок
			NORTH AMERICA	ORGANIZING GRANT	33,301	CHECK			воок
			NORTH AMERICA	O R G A N I Z I N G G R A N T	33,868	CHECK			воок
			NORTH AMERICA	O R G A N I Z I N G G R A N T	43,471	CHECK			воок
			NORTH AMERICA	ORGANIZING GRANT	15,824	CHECK			воок
			NORTH AMERICA	ORGANIZING GRANT	70,708	CHECK			воок
			NORTH AMERICA	O R G A N I Z I N G G R A N T	42,406	CHECK			воок
			NORTH AMERICA	O R G A N I Z I N G G R A N T	129,075	CHECK			воок
			NORTH AMERICA	ORGANIZING	25,496	СНЕСК			воок

23,735 CHECK

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	

GRANT

GRANT

ORGANIZING

NORTH AMERICA

воок

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

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 THE GRANTEES PROVIDE THE ORGANIZATION WITH WEEKLY UPDATES OF THEIR EXPENDITURES THE ORGANIZATION MAINTAINS AND MONITORS THE GRANTEES EXPENDITURES AND THE AMOUNTS OF THE GRANTS

Schedule F (Form 990) 2010

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493128006312 OMB No 1545-0047

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

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

Internal Revenue Service			Attach to Form 990				Inspect ion
Name of the organization UNITED ASSOCIATION OF JOURNE	EYMEN &					Employer identification	on number
APPRENTICES OF THE PLUMBING 8	k PIPE					53-0159020	
Part I General Informatio							
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	ard the grants or as	sıstance?					Г Yes Г।
Part II Grants and Other A Form 990, Part IV, line duplicated if additiona	ssistance to Go e 21 for any recip	vernments and O	rganizations in the nore than \$5,000. Ch	United States. Con eck this box if no one	recipient receive	d more than \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 50							
3 Enter total number of other orga				Cat No EQUEED			lo I /Form 000) 2010

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, P	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 THE GRANTEES PROVIDE THE ORGANIZATION WITH WEEKLY UPDATES OF THEIR EXPENDITURES THE ORGANIZATION MAINTAINS AND MONITORS THE GRANTEES EXPENDITURES AND THE AMOUNTS OF THE GRANTS

Software ID: Software Version:

EIN: 53-0159020

Name: UNITED ASSOCIATION OF JOURNEYMEN &

APPRENTICES OF THE PLUMBING & PIPE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALABAMA PIPE TRADES 3648 NINTH AVE N BIRMINGHAM,AL 35222	63-1068372	5	90,000		воок		ORGANIZING GRANT
COLORADO PIPE TRADES 2870 JANITELL ROAD COLORADO SPRINGS,CO 80906	84-1000434	5	336,500		воок		ORGANIZING GRANT
FLORIDA PIPE TRADES 13185 NW 45TH AVENUE OPA LOCKA,FL 33054	59-6209635	5	372,667		воок		ORGANIZING GRANT
GULF COAST DISTRICT COUNCIL #1PO BOX 8428 METAIRIE, LA 70011	14-1876884	5	120,833		воок		ORGANIZING GRANT
GEORGIA PIPE TRADES374 MAYNARD TERRACE ATLANTA,GA 30316	58-6054909	5	204,000		воок		ORGANIZING GRANT
ILLINOIS PIPE TRADES45 NORTH OGDEN AVENUE CHICAGO,IL 60607	36-6080375	5	16,000		воок		ORGANIZING GRANT
INDIANA PIPE TRADES 16633 GARNET RIDGE COURT FORT WAYNE, IN 46845	35-0312151	5	154,000		воок		ORGANIZING GRANT
KENTUCKY PIPE TRADES 525 DEROODE STREET LEXINGTON,KY 40508	31-1542217	5	6,000		воок		ORGANIZING GRANT
MARYLAND PIPE TRADES 8509 ARDMORE ARDWICK ROAD LANDOVER, MD 20785	52-2081390	5	78,000		воок		ORGANIZING GRANT
MICHIGAN PIPE TRADES 1008 OMALLEY DRIVE COOPERSVILLE,MI 49404	23-7352117	5	162,000		воок		ORGANIZING GRANT
MINK PIPE TRADES2501 WEST GRAND SPRINGFIELD, MO 65802	43-1826840	5	6,000		воок		ORGANIZING GRANT
MINNESOTA PIPE TRADES 4402 AIRPARK BLVD DULUTH, MN 55811	41-6033705	5	50,000		воок		ORGANIZING GRANT

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

Form 990,Schedule 1, Par	TII, Grants and	Tottler Assistance	to dovernments	and Organization	The office of		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ENGLAND PIPE TRADES1250 E MAIN STREET MERIDEN,CT 06450	22-2921877	5	139,000		воок		ORGANIZING GRANT
OHIO STATE ASSOCIATION947 GOODALE BOULEVARD COLUMBUS,OH 43212	31-1270975	5	246,167		воок		ORGANIZING GRANT
TENNESSEE PIPE TRADES 4229 PRESCOTT ROAD MEMPHIS,TN 38118	62-1538616	5	40,000		воок		ORGANIZING GRANT
TRI STATES ASSOCIATION 1211 RAPIDES AVENUE ALEXANDRIA,LA 71301	64-0889191	5	229,000		воок		ORGANIZING GRANT
VIRGINIA PIPE TRADES 701 STOCKTON STREET RICHMOND,VA 23224	54-1344947	5	72,000		воок		ORGANIZING GRANT
WASHINGTON STATE ASSOCIATION7030 TACOMA MALL BLVD TACOMA,WA 98409	91-0462121	5	39,000		воок		ORGANIZING GRANT
WEST VIRGINIA PIPE TRADES100 RICHARD AVENUE MORGANTOWN, WV 26501	55-0582055	5	46,000		воок		ORGANIZING GRANT
WISCONSIN PIPE TRADES 11175 WEST PARKLAND AVENUE MILWAUKEE,WI 53224	39-1606922	5	24,000		воок		ORGANIZING GRANT
SOUTHWEST PIPE TRADES 2002 AVENUE J LUBBOCK,TX 79405	20-3465106	5	582,967		воок		ORGANIZING GRANT
UA DISTRICT COUNCIL #16501 SHATTO PLACE LOS ANGELES,CA 90020	95-1664056	5	272,600		воок		ORGANIZING GRANT
DELAWARE PIPE TRADES 201 EXECUTIVE DRIVE NEWARK, DE 19702	82-0578163	5	12,000		воок		ORGANIZING GRANT
UA LOCAL UNION 4330 SOUTHWEST CUTOFF WORCESTER, MA 06104	04-1338432	5	5,333		воок		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 92 IRON ORE ROAD ENGLISHTOWN,NJ 07726	22-0583720	5	24,000		воок		ORGANIZING GRANT
UA LOCAL UNION 24986 S SPRINGFIELD SPRINGFIELD,NJ 07081	22-1345751	. 5	164,000		воок		ORGANIZING GRANT
UA LOCAL UNION 5111 HEMINGWAY DRIVE E PROVIDENCE, RI 02915	06-1475010	5	6,000		воок		ORGANIZING GRANT
UA LOCAL UNION 104168 CHICOPEE CHICOPEE, MA 01013	04-2705589	5	34,000		воок		ORGANIZING GRANT
UA LOCAL UNION 140226 S REDWOOD ROAD SALT LAKE CITY, UT 84119	20-2498482	2. 5	60,000		воок		ORGANIZING GRANT
UA LOCAL UNION 1591308 ROMAN WAY MARTINEZ,CA 94553	94-0944925		50,000		воок		ORGANIZING GRANT
UA LOCAL UNION 192441 WEST FIFTH STREET CHEYENNE, WY 82007	83-0136889	5	133,333		воок		ORGANIZING GRANT
UA LOCAL UNION 2281246 PUTMAN AVENUE YUBA CITY,CA 95991	94-1493708	5	20,000		воок		ORGANIZING GRANT
UA LOCAL UNION 296575 N RALSTIN MERIDIAN,ID 83642	82-0198631	. 5	49,000		воок		ORGANIZING GRANT
UA LOCAL UNION 322534 SOUTH ROUTE 73 WINSLOW, NJ 82007	21-0538170	5	55,000		воок		ORGANIZING GRANT
UA LOCAL UNION 367610 WEST 54TH AVENUE ANCHORAGE, AK 99518	92-0013284	5	16,000		воок		ORGANIZING GRANT
UA LOCAL UNION 3753568 GERAGHTY STREET FAIRBANKS,AK 99709	92-0013904	5	29,015		воок		ORGANIZING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UA LOCAL UNION 4832525 BARRINGTON COURT HAYWARD,CT 94545	94-1011692	5	48,000		воок		ORGANIZING GRANT
UA LOCAL UNION 55046 ROCKLAND STREET BOSTON,MA 02132	04-1859910	5	6,000		воок		ORGANIZING GRANT
UA LOCAL UNION 6697050 OAKLAND MILLS ROAD COLUMBIA,MD 21046	23-7152443	5	477,000		воок		ORGANIZING GRANT
UA LOCAL UNION 6933 GREGORY DRIVE S BURLINGTON,VT 05403	03-0210219	5	22,000		воок		ORGANIZING GRANT
UA LOCAL UNION 709 12140 RIVERA ROAD WHITTIER, CA 90606	95-1588769	5	24,000		воок		ORGANIZING GRANT
UA LOCAL UNION 7771250 E MAIN STREET MERIDEN,CT 06450	06-1390416	5	44,000		воок		ORGANIZING GRANT

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DLN: 93493128006312

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Name of the organization

Employer identification number 53-0159020

Pa	Questions Regarding Compensation			
			Yes	Νo
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			
	Tax idemnification 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 in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	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	Yes	
3	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			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	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			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	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			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990 , Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		
ь	Any related organization?	6b		
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs-section 53 4958-4(a)(3)? If "Yes," describe in Part III	_		
		8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Schedule J (Form 990) 2010

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	1	FIRST CLASS TRAVEL IS AUTHORIZED FOR OFFICERS PER THE UA'S GENERAL EXECUTIVE BOARD COMPANION TRAVEL IS AUTHORIZED FOR THE GENERAL PRESIDENT PER THE UA'S GENERAL EXECUTIVE BOARD
	PART I, LINE 4B	JOHN WRIGHT \$8,335 KIRK SMITH \$8,292 GINO MORIN \$135,608

Schedule J (Form 990) 2010

WILLIAM P HITE

PATRICK R PERNO

STEPHEN F KELLY

(11) (1)

(11)

(1)

(11)

(1)

(11)

(1)

(11)

(1)

(11)

(1)

(11) (1)

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(11)

(1)

(11)

(1)

(11)

(1)

(11)

(1)

(II)

(1)

152,400

161,270

153,900

146,400

161,684

168,400

152,878

168,400

147,878

158,390

168,400

161,270

105,378

155,400

137,356

154,386

147,878

161,270

161,270

JAMES KELLOGG

ROBERT KINSEY

JOHN LINDSTROM

GINO MORIN

JAMES MOSS

MICHAEL O'MARA

RICHARD OLIVER

LARRY SANDERSON

TERRY RANSON

GREG SAYLES

BUDROW TOZER

CHARLES WATTS

REUBEN BAUTISTA

GARY YOUNG

JAMES HART

RANDY WARD

LARRY CANN

JAMES MACDONALD

THOMAS MCNAMARA

(F) Compensation

reported in prior Form

990 or Form 990-EZ

0

0

0

0

0

518,773

460,931

444,157

0

Software Version:

(A) Name

	(11)	0	0	0	0	0	0	0
SEAN O'RYAN	(I) (II)	199,906	0	69,555 0	0 0	122,729 0	392,190 0	0 0
JOHN D WRIGHT	(I) (II)	206,049 0	0	69,582 0	0	123,596 0	399,227 0	0
MARK MCMANUS	(I) (II)	178,221 0	0	63,549 0	0	110,219		0
JOHN TELFORD	(I) (II)	238,658	0	46,900	21,815	95,707	403,080	0
MICHAEL ARNDT	(I) (II)	189,354	0	54,955	0	111,073	355,382	0
MICHAEL PLEASANT	(I) (II)	162,803	0	59,649	0	102,106	324,558	0
JOHN T DUGAN	(I) (II)	174,754	0	69,555	0	93,773	338,082	0
MARTIN NASEEF	(I) (II)	178,356 0	0	65,177	0	110,843	354,376	0
RICKY TERVEN	(I) (II)	186,766 0	0	69,327	0	116,118	372,211	0
WILLIAM E LILLE	(I) (II)	176,752 0	0	67,557	0	111,073	355,382	0
KIRK SMITH	(I) (II)	186,254 0	0	58,055	0	111,073	355,382	0
MICHAEL BEAVERS	(I) (II)	186,754 0	0	57,555 0	0	111,073	355,382	0
JEROME O'LEARY	(I) (II)	174,754 0	0	69,555	0	111,073	355,382	0
GARY HAMILTON	(I) (II)	195,664 0	0	48,950	0	111,073	355,687	0
PHILLIP STEPHENSON	(I) (II)	185,819	0	58,055	0	110,891	354,765	0
STEVEN ALLEN	(I) (II)	171,730	0	44,855	0	100,563	317,148 0	0
KEN AURECCHIA	(I) (II)	87,296 0	0	15,676	0	65,101	168,073	0
BILLY BORCHERT	(I) (II)	124,397	0	27,010	0	80,683 0		0
KENNETH BROADBENT	(I) (II)	91,663	0	11,803	0	66,935		0
SID STOLPER	(I) (II)	139,603	0	527 0	0	87,070 0	227,200	0
MARK BUTLER	(I) (II)	168,400	0	47,327	0	99,165	314,892	0
CURTIS CADE	(I) (II)	158,000	0	57,727 0	0	99,165	314,892	0
JAMES CAHILL	(I) (II)	148,398	0	67,557 0	0	99,165	315,120	0
BILL EDEN	(I) (II)	152,878	0	62,849	0	99,165	314,892	0
ROBERT JAEGER	(I) (II)	157,900	0	58,055	0	99,165	315,120	0
BRADLEY KARBOWSKY	(1)	161,900	0	53,628	0	99,165		0

64,160

46,900

60,555

69,327

46,900

47,128

62,650

47,128

67,849

57,565

47,128

46,900

31,037

60,555

63,077

61,142

68,077

46,900

46,900

0

0

0

0

0

0

0

0

0

	' '		•	1		"		•
RICKY TERVEN	(1) (11)	186,766 0	0	69,327 0	0	116,118 0	372,211 0	0 0
WILLIAM E LILLE	(1) (11)	176,752 0	0	67,557 0	0 0	111,073 0	355,382 0	0
KIRK SMITH	(1) (11)	186,254 0	0	58,055 0	0	111,073 0	355,382 0	0 0
MICHAEL BEAVERS	(1) (11)	186,754 0	0	57,555 0	0	111,073 0	355,382 0	0 0
JEROME O'LEARY	(1) (11)	174,754 0	0	69,555 0	0	111,073 0	355,382 0	0 0
GARY HAMILTON	(I) (II)	195,664 0	0	48,950	0 0	111,073	355,687	0 0

(1) 256,906 0 0 61,912 (11) 0 0 0 (1) 228,374 0 78,452 0 0

(1) 290,478 0 68,895 (11) 0

(B) Breakdown of W-2 and/or 1099-MISC compensation (ii) Bonus & (i) Base (iii) Other ıncentıve Compensation compensation compensation

(C) Deferred

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees compensation benefits

(D) Nontaxable (E) Total of columns (B)(I)-(D)

0

0

159,400

142,113

137,331

81,864

69,813

99,165

99,165

67,342

99,165

99,165

99,165

99,165

99,165

81,864

69,332

61,622

99,165

99,165

99,165

99,165

70,947

69,332

15,310

15,310

15,310

0

15,310

15,310

298,424

293,293

313,620

314,892

291,236

314,693

314,693

314,693

314,892

315,120

297,392

292,812

198,037

315,120

299,598

314,693

315,120

294,427

292,812

0

0

0

0

0

0

0

0

0

0

EIN:	53-0159020
Name:	UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE

Software ID:

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493128006312

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Name of the organization
UNITED ASSOCIATION OF JOURNEYMEN &
APPRENTICES OF THE PLUMBING & PIPE

Employer identification number

53-0159020

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		INDIVIDUALS BECOME MEMBERS OF THE UNITED ASSOCIATION IN ACCORDANCE WITH A GOVERNING CONSTITUTION AND BY-LAWS THE UNITED ASSOCIATION'S MEMBERS HAVE THE RIGHTS PROVIDED THEM IN THE CONSTITUTION AND BY-LAWS AND AFFORDED THEM UNDER APPLICABLE LAW

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		DELEGATES TO THE UNITED ASSOCIATION'S CONVENTION ELECT THE MEMBERS OF THE GOVERNING BODY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		CERTAIN DECISIONS OF THE GOVERNING BODY CAN BE APPEALED AT THE UNITED ASSOCIATION'S CONVENTION

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE GOVERNING BODY OF THE UNITED ASSOCIATION REVIEWED THE 990 PRIOR TO ITS FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S ANNUAL FINANCIAL DISCLOSURE STATEMENT DOL FORM LM-2 IS AVAILABLE FOR PUBLIC INSPECTION AT THE DOL WEBSITE

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

DLN: 93493128006312

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2010

Open to Public Inspection

Schedule R (Form 990) 2010

Department of the Treasury Internal Revenue Service

Name of the organization UNITED ASSOCIATION OF JOURNEYMEN & APPRENTICES OF THE PLUMBING & PIPE							53-0159020	t if icat	tion number		
Part I Identification of Disregarded Entities (Compl	ete ıf the organızatı	on ar	nswered "Yes	" on	Form 990, Pa	rt I					
(a) Name, address, and EIN of disregarded entity	(b) Primary activity		(c) Legal domicile (si or foreign counti	tate ry)	(d) Total income		(e) End-of-year assets	5	(f) Direct controlli entity	ng	
(1) PARK PLACE II TRUST 3 PARK PLACE ANNAPOLIS, MD 20814	BUSINESS TRUST		MD		,		0				
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t		ıf th	e organizatior	n ans	wered "Yes"	on l	Form 990, Part	IV, I	ine 34 becaus	se it hac	one
(a) Name, address, and EIN of related organization	(b) Primary activity	Lega or f	(c) al domicile (state Foreign country)	Exem	(d) npt Code section	Pu (ıf s	(e) blic charity status section 501(c)(3))	D	(f) irect controlling entity	Section 5	g) 512(b)(13) rolled nization
		igsqcup								Yes	No
		 									

Cat No 50135Y

Part III		_		ble as a Partner treated as a partne	• ' '		on answered	I "Yes" on Form 9	90, Part IV	, line 34
<i>(</i> -)	(1-)	(c)	(1)	(e)	(6)	(-)	(h)	(i)	(j)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Genei mana parti	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No	
(1) HILLCREST COUNTRY CLUB LIMITED PARTNERSHIP 4600 HILLCREST DRIVE HOLLYWOOD, FL33021 52-2200343	COUNTRY CLUB	FL						No			No	
Part IV Identif	ication of Relat	ed Org	anizations Taxa	ble as a Corpor	ation or Trust (Complete if the	organ	ızatıor	n answered "Yes"	on Fo	rm 9	90, Part IV,

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

chedule	R (Form 990) 2010				Pag	ge 3
Part V	Transactions With Related Organizations (Complete if the organization answered "Ye	es" on Form 990, Par	t IV, line 34, 35, 35A, or 36.)			
Not	. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one or more related orga	ınızatıons lısted ın Part	s II-IV?			
a Rec	eıpt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty			1a		No
b Gift	, grant, or capital contribution to other organization(s)			1b		No
c Gıft	grant, or capital contribution from other organization(s)			1 c		No
d Loa	ns or loan guarantees to or for other organization(s)			1 d	Yes	
e Loa	ns or loan guarantees by other organization(s)			1e		No
f Sale	of assets to other organization(s)			1f		No
g Pur	chase of assets from other organization(s)			1 g		No
h Exc	hange of assets			1h		No
i Leas	e of facilities, equipment, or other assets to other organization(s)			1i		No
j Lea:	se of facilities, equipment, or other assets from other organization(s)			1j		No
k Per	formance of services or membership or fundraising solicitations for other organization(s)			1k		No
I Perf	ormance of services or membership or fundraising solicitations by other organization(s)			11		No
m Sha	ring of facilities, equipment, mailing lists, or other assets			1m		No
n Sha	ring of paid employees			1n		No
o Rei	nbursement paid to other organization for expenses			10		No
p Rei	mbursement paid by other organization for expenses			1р		No
a Oth	er transfer of cash or property to other organization(s)			1q		No
-	er transfer of cash or property from other organization(s)			1r		No
2 If th	e answer to any of the above is "Yes," see the instructions for information on who must complete this line, i	T	onships and transaction thresholds			
	(a)	(b) Transaction	(c) Method of de	(d) etermin	ing amo	ount

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) HILLCREST COUNTRY CLUB LIMITED PARTNERSHIP	D	245,208	
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

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

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

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

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DLN: 93493128006312

OMB No 1545-0172

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

Attachment

Department of the Treasury See separate instructions.

► Attach to your tax return.

Sequence No 67

nternal Revenue Service (99)										<u> </u>
Name(s) shown on return	0 F 10 UBNEVM		sıness o	r activity to w	hıch th	ıs forr	n rela	tes	Id	dent if ying number
	SSOCIATION OF JOURNEYMEN & CES OF THE PLUMBING & PIPE FORM 990 PAGE 10									
		Certain Propert			179					3-0159020
Note: If y	ou have any li	sted property, co	omplete	Part V befo	re yo	u con	nplet	e Part I.		,
1 Maximum amount See	the instructions	for a higher limit f	or certai	n businesses	•				1	500,000
2 Total cost of section 1	79 property plac	ed in service (see	ınstruct	ions)	•	•			2	
3 Threshold cost of sect	ion 179 property	/ before reduction i	n lımıtat	ıon (see ınstrı	ıctıons) .			3	2,000,000
4 Reduction in limitation	Subtract line 3	from line 2 If zero	or less,	enter - 0 -					4	
5 Dollar limitation for tax	year Subtract	line 4 from line 1 I	fzero or	less, enter - C	- Ifm	arried	filing			
separately, see instruc	tions								5	
6 (a) [Description of pr	ronerty		(b) Cost (bu	siness	use	16	:) Elected c	ost	
(=)				onl	у)		_ <u>``</u>			
										-
7 Listed property Enter:	the amount from	line 20				7	\vdash			
7 Listed property Enter					•					-
8 Total elected cost of s		•	in colum	in (c), lines 6	and /	•	•		8	
9 Tentative deduction E					•		•		9	
10 Carryover of disallowed		•			٠		•		10	
11 Business income limitation							•		11	
12 Section 179 expense of	deduction Add li	nes 9 and 10, but	do not e	nter more thar	ılıne 1	1 •			12	
13 Carryover of disallowed					. .	13				
Note: Do not use Part.										
									opert I	y) (See instructions)
14 Special depreciation al tax year (see instruction		lified property (othe	er than li	sted property) place	dınse	ervice	during the	14	
15 Property subject to section 168(f)(1) election										
		election				•	•		15 16	1 179 900
16 Other depreciation (inc		Oo not include lis	sted nr	nerty) (Se	o insti	ructio	ns \		10	1,178,809
PACKS DC	preciation (I	Jo Hot melade ii		tion A	C IIISC	actio	113.)			
17 MACRS deductions for	assets placed i	n service in tax yea			010				17	
18 If you are electing t	-	•	_	_		ır ınto	one	or more		
general asset accou		•						.▶□		
Section B-Asse	<u> </u>		g 2010	Tax Year	Using	the	Gen	eral Depi	recia	tion System
		(c) Basıs for								
(a) Classification of	(b) Month and	depreciation		(d) Recovery	(- \ C .			/# \ M - +	ا ر	(g)Depreciation
property	year placed in service	(business/investi use	ment	period	(e) Co	onvent	ion	(f) Metho	oa	deduction
		only—see instruct	ions)							
19a 3-year property										
b 5-year property										
c 7 - year property										
d 10-year property										
e 15-year property										
f 20-year property g 25-year property	-			25 yrs				S/L		
h Residential rental				27 5 yrs		1 M		S/L		
property				27 5 yrs		1 M		S/L		
i Nonresidential real				39 yrs		1 M		 S/L		
property				•	M	1 M		S/L		
Sect io	n C—Assets Plac	ed in Service Durin	ıg 2010 1	ax Year Using	the A	lterna	tive [Depreciat ion	Syst	em
20a Class life								S/L		
b 12-year				12 yrs				S/L		
c 40-year	/	1 >		40 yrs	1	М		S/L		
	y (see instruc									T
21 Listed property Enter					•	•	•	- •	21	
22 Total. Add amounts fro and on the appropriate	lines of your ret	urn Partnerships a	and S coi	porations—se	e instr			Enter here	22	1,178,809
23 For assets shown abov portion of the basis att	·	-				23				

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other Ir	nforma	tion (C	Caution	: See	the i	nstruct	tions fo	or lim	its f	or pa	sseng	er au	tomot	iles.)
24a Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	Гпо		24	lb If "Ye	s," is th	ne ev	ıdence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost o ba:	rother	(busines	(e) r deprecia ss/investr se only)		(f) Recovery period	(c Meth Conve	nod/	I	(h Depreca deduc	ation/		(i) Electe section 1 cost	179
25 Special depreciation allo 50% in a qualified busi	•		rty placed	ın service (during the	tax year	and u	ised more	e than	25						
26 Property used more	e than 50%	 	ousiness	use												
		%												+		
		%														
27 Property used 50%	orless in a		ıness us	е					la u							
		%							S/L - S/L -					\dashv		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on lı	ne 21, _l	oage	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enterhe	ere and o	n line 7,	page 1							29				
				_Infor												
Complete this section If you provided vehicles to														se vehic	les	
30 Total business/in	vestment mi	les driven dur	ına the	_	a))		(c)		(d	-		e)		f)
year (do not inclu			•	Vehi	ıcle 1	Vehi	cle 2	V e	hicle 3	<u> </u>	ehic	le 4	Vehi	cle 5	Vehi	cle 6
31 Total commuting	milas drivan	during the ve	- r							+						
32 Total other person										_						
33 Total miles driver	•									_						
through 32	• • •															
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	No	Υ.	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u		by a more th	an 5%													
owner or related p 36 Is another vehicle		r porconal uc	• •		1					_				 		+
		stions for		vore W	ho Dro	vida \	/ohi	clas f	or He	hy '	The	ir En	anlov			
Answer these questio 5% owners or related	ns to determ	ine if you mee	et an exc												not mo	re thai
37 Do you maintain a employees?		y statement											our •	Y	es	No
30 D											L			-		
38 Do you maintain a employees? See t												y o u i				
39 Do you treat all us	se of vehicles	s by employee	s as per	sonal us	e? .											
40 Do you provide movehicles, and reta			•	oyees, o	btaın ınfo	ormatio •	n froi	m your e	employe	ees ab •	out t	the us	e of the	e		
41 Do you meet the r	equirements	concerning q	ualified a	automobi	ıle demoi	nstratio	n us	e? (See	ınstruc	tions) .					
Note: If your ansy	ver to 37, 38	, 39, 40, or 4	1 ıs "Ye:	s," do no	t comple	te Sect	ion E	for the	covere	d vehi	cles					
		, , ,		,	•											
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," Part VI Amortization (b) (a) Date amortization begins					(c) A mortizable amount s				p.	(e) A mortization period or percentage			(f) A mortization for this year			
42 A mortization of co	osts that beg		ur 2010	tax year	(see ins	truction	ns)									
				•	-		-									
43 A mortization of co	sts that beg	an before you	r 2010 t	ax year		•					13					
44 Total. Add amoun	ts ın column	(f) See the in	structio	ns for wh	ere to re	port					14					

Software ID: Software Version:

EIN: 53-0159020

 $\textbf{Name:} \ \ \textbf{UNITED} \ \ \textbf{ASSOCIATION} \ \ \textbf{OF JOURNEYMEN} \ \ \&$

APPRENTICES OF THE PLUMBING & PIPE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	age Position (check all that apply)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation				
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations	
WILLIAM P HITE GENERAL PRESIDENT	40 00			Х				359,373	0	159,400	
PATRICK R PERNO GENERAL SECRETARY-TREAS	40 00			х				318,818	0	142,113	
STEPHEN F KELLY ASSISTANT GENERAL PRES	40 00			х				306,826	0	137,331	
SEAN O'RYAN SR ADMIN ASSISTANT	40 00			X				269,461	0	122,729	
JOHN D WRIGHT ADMINISTRATIVE ASST - PAST	40 00			X				275,631	0	123,596	
MARK MCMANUS ADMINISTRATIVE ASSISTANT	40 00			х				241,770	0	110,219	
JOHN TELFORD DIR CANADIAN AFFAIRS	40 00			х				285,558	0	117,522	
MICHAEL ARNDT DIR TRAINING	40 00			х				244,309	0	111,073	
MICHAEL PLEASANT DIR JURISDICTION	40 00			х				222,452	0	102,106	
JOHN T DUGAN DIR JURISDICTION - PAST	40 00			х				244,309	0	93,773	
MARTIN NASEEF DIR HVACR	40 00			х				243,533	0	110,843	
RICKY TERVEN DIR POLITICAL AFFAIRS	40 00			Х				256,093	0	116,118	
WILLIAM E LILLE DIR CONSTRUCTION PROGRAMS	40 00			х				244,309	0	111,073	
BRETT MCCOY DIR ORGANIZNG	40 00			х				0	0	0	
KIRK SMITH DIR ORGANIZNG - PAST	40 00			х				244,309	0	111,073	
MICHAEL BEAVERS DIR INFORMATION TECHNOLOGY	40 00			х				244,309	0	111,073	
JEROME O'LEARY DIR ENERGY DEPARTMENT	40 00			X				244,309	0	111,073	
GARY HAMILTON DIR PLUMBING SERVICES	40 00			х				244,614	0	111,073	
PHILLIP STEPHENSON DIR PIPELINE & GAS DISTR	40 00			X				243,874	0	110,891	
STEVEN ALLEN DIR SUSTAINABLE TECH -PAST	40 00			х				216,585	0	100,563	
KEN AURECCHIA VICE-PRESIDENT	40 00			Х				102,972	0	65,101	
BILLY BORCHERT VICE-PRESIDENT	40 00			Х				151,407	0	80,683	
KENNETH BROADBENT VICE-PRESIDENT	40 00			Х				103,466	0	66,935	
SID STOLPER VICE-PRESIDENT	40 00			Х				140,130	0	87,070	
JAMES SULLIVAN VICE-PRESIDENT	40 00			Х				72,551	0	58,591	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		tion (hat a	che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation		
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations		
MARK BUTLER INTL REP	40 00			х				215,727	0	99,165		
CURTIS CADE INTL REP	40 00			х				215,727	0	99,165		
JAMES CAHILL INTL REP	40 00			х				215,955	0	99,165		
BILL EDEN INTL REP	40 00			х				215,727	0	99,165		
ROBERT JAEGER INTL REP	40 00			х				215,955	0	99,165		
BRADLEY KARBOWSKY INTL REP	40 00			х				215,528	0	99,165		
JAMES KELLOGG INTL REP	40 00			х				216,560	0	81,864		
ROBERT KINSEY INTL REP	40 00			х				208,170	0	85,123		
JOHN LINDSTROM INTL REP	40 00			х				214,455	0	99,165		
THOMAS MCNAMARA INTL REP	40 00			х				215,727	0	99,165		
GINO MORIN INTL REP	40 00			х				208,584	0	82,652		
JAMES MOSS INTL REP	40 00			х				215,528	0	99,165		
MICHAEL O'MARA INTL REP	40 00			х				215,528	0	99,165		
RICHARD OLIVER INTL REP	40 00			х				215,528	0	99,165		
TERRY RANSON INTL REP	40 00			х				215,727	0	99,165		
LARRY SANDERSON INTL REP	40 00			х				215,955	0	99,165		
GREG SAYLES INTL REP	40 00			х				215,528	0	81,864		
BUDROW TOZER INTL REP	40 00			х				208,170	0	84,642		
CHARLES WATTS INTL REP	40 00			х				136,415	0	61,622		
GARY YOUNG INTL REP	40 00			х				215,955	0	99,165		
REUBEN BAUTISTA SPECIAL REPRESENTATIVE	40 00					х		200,433	0	99,165		
JAMES HART SPECIAL REPRESENTATIVE	40 00					х		215,528	0	99,165		
RANDY WARD SPECIAL REPRESENTATIVE	40 00					x		215,955	0	99,165		
LARRY CANN SPECIAL REPRESENTATIVE	40 00					х		208,170	0	86,257		
JAMES MACDONALD SPECIAL REPRESENTATIVE	40 00					x		208,170	0	84,642		