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_{50m} 990

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

							<u> </u>				
<u> </u>	For the	2011 cale	ndar year, or tax year		January		and ending	Dec	ember	, 20 11	
В	Check If	fapplicable	C Name of organization	Jnited Steelworl	kers Local Union 16	88			D Employ	er identification i	number
	Address	change	Doing Business As							23-1092686	
	Name cl	hange	Number and street (or P	O box if mail is no	ot delivered to street add	iress)	Room/suite)	E Telepho	ne number	
	Initial ref	turn	200 Gibson St., Steelte	on, Pa						717-939-9366	
	Termina		-								
	Amende	ed return	Steelton, PA 17113						G Gross re	eceipts \$	496643
$\overline{\sqcap}$		ion pending	F Name and address of pr	incipal officer		-		H(a) Is this	a group return	for affiliates? Ye	s 🗸 No
_	, tppcu.	.io.i poiloiilg								ncluded? Tye	
_	Tay ava	most etatue	501(c)(3)	✓ 501(c) () ◀ (insert no) ☐ 494	7(a)(1) or	527	-1		a list (see instructi	
<u> </u>	Website	mpt status	L 30 1(c)(3)	<u> </u>) 4 (III361(110) [454	(a)(1) 01	<u> </u>	=		number ►	0260
7			□ C □ T	☐ Association 🗸	Other b	TLVa	ar of formatio		-T	of legal domicile	PA
_			Corporation Trust	Association [V] Other P	Litea	ar of formatio	11 1334	MI State	or legal domicile	<u> </u>
P	art I	Summ									
	1		escribe the organization						ntorcea c	ollective barga	ınıng
ø		agreeme	nt to better the working	g conditions for	the members, and	provide r	epresentat	ion.			
ਮੇ Governance											
Ë										·	
_ 8	2	Check th	is box $ ightharpoonupigcup \Box$ if the orga	anizatıon dısco	ntınued its operation	ons or di	sposed of	more than	1 25 % of	its net assets.	•
7 6 8 Se	3	Number	of voting members of	the governing	body (Part VI, line	1a)			3		1300
ر ال کی ہود Activities &	4	Number	of independent voting	members of t	he governing body	(Part VI	, line 1b)		4		0
ş, iğ	5	Total nur	mber of individuals en	nployed in cale	ndar year 2011 (Pa	rt V, line	e 2a) .		5		51
€ €	6		mber of volunteers (es						6		0
-	7a		elated business rever		• .				7a		0
2 2 2—	b		lated business taxable		• • •				7b		
	 	1101 01110	atou buomood tutubi				- 	Prior Y		Current \	
7	8	Contribu	tions and grants (Part	: VIII line 1h\			-		0		0
i, a			tions and grants (Part				<u> </u>		478221		473295
. e	9	_	service revenue (Parl								
Revenue	10		ent income (Part VIII, o						1998		1593
ン — が	11		venue (Part VIII, colum						2292		21755
ψ <u> —</u>	12		enue-add lines 8 thro				ne 12)		482511		496643
	13		nd similar amounts pa				· ·		7645		5736
	14		paid to or for membe						16270		13625
S	15	Salaries,	other compensation, e	inployee benefi	ts-(Partlix)Loolumn	A), lınes	5–10)		174935		152563
use	16a	Profession	onal fundraising fees ((PartIX, columi	n (A), line 11e)				0		0
Expenses	Ь	Total fun	draising expenses (Pa	artiX, column ((D); lingen25) ► 0		灣			STATE OF	
ũ	17	Other ex	penses (Part IX, colur	គ្គត្តិ (A), lines 11	a-11d, 11f-24by2				326859		303988
	18		oenses. Add lines 13-), line 25	5) . 🗆		525709	-	475912
	19		less expenses. Subtr				´ 🗀		(43198)		20731
≥ «	+						Ве	eginning of C	urrent Year	End of Y	'ear
Assets or Balances	20	Total ass	sets (Part X, line 16)						1091272		1112004
Asse	21		pilities (Part X, line 26)				· ·		188375		167128
E G	22		ets or fund balances.				· ·		902897		944876
15)	art II		ture Block	Jubilact line 2	1 110111 11116 20 .	<u></u>	· · · I		302037	l	344070
				1.11							
Ur tn	ider pena ie correc	atties of perju	iry, I declare that I have exa- lete Declaration of prepare	imined this return, r (other than officer	including accompanying it is based on all informa	i scheaule: tion of whi	s and statem ich preparer h	ents, and to has anv know	ine best of i ledae	my knowledge ar	na deliet, it is
		1	72 1-1 - A	4// 1	710 02002 011 011 111 111				10 USC	7 75	_
C:		2	Patrick P NI	My		-			57	1-11-	
Sig			nature of officer	Alice II				U	ate		
He	ere	1R	TRICK OF THE	HUGH						.	
			e or print name and title	ř-							
Pa	iid	Print/Ty	pe preparer's name	Prepa	rer's signature		Date	Э	Check	☐ if PTIN	
	epare	er							self-em	ployed	
	se On	1	name ►					Fin	n's ElN ▶		
		Firm's a	address ►		-			Ph	one no		
Ma	y the IF	RS discus	s this return with the	preparer show	n above? (see instr	uctions)				🔲 Ye	es 🗌 No
~	<u> </u>		ction Act Notice, see t					11282Y		Form	990 (2011)

Form 99	0 (2011)	Page 2
Part l		
		e to any question in this Part III
1		es, but is not limited to, on behalf of its members: collective bargaining, grievance organize and to improve the working conditions of its members.
2		rogram services during the year which were not listed on the
3	If "Yes," describe these new services on Schedul	lle O. ake significant changes in how it conducts, any program
3	services?	· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.	
4	expenses. Section 501(c)(3) and 501(c)(4) organ	complishments for each of its three largest program services, as measured by nizations and section 4947(a)(1) trusts are required to report the amount of ses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
74	The Local Union continues in an ongoing effort to o	defend and enforce the negotiated collective bargaining agreement for our
		The members' dues, related income and expenses are used to carry out these
	activities. The local union in continually striving to	maintain or accomplish improvements for our members.
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	<u> </u>	
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
		•••••••••••••••••••••••••••••••••••••••
4d	Other program services (Describe in Schedule O. (Expenses \$ including grants of	
4e	Total program service expenses ►	y / (noronido w)

Form 99				Page 3
Part	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	res	N 0
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	2		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	3		✓
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		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
	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		✓
-	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		<u> </u>
	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		1
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11e 11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
	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		1
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		/
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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_		1
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_		1
_	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		✓
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .		m 99 0	(2011)

Part 、 21				
21	Did the augustation report make then \$5,000 of greats and other accustones to any government or organization			
	Did the organization report more than \$5,000 of grants and other assistance to any government or organization		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	L
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		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28b 28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
38	Part VI	38	√	1

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			. 🔽	
<u> </u>	Check if Schedule O contains a response to any question in this rare v		Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a				į
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 !			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	[i
	reportable gaming (gambling) winnings to prize winners?	1c		1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				ĺ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	ļ			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	ļ	ī
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			,	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		V	-
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		-	-
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial				
	account)?	4a		1	
b	If "Yes," enter the name of the foreign country: ▶				-
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1	-
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/	-
C C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		1	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		<u> </u>	•
-	gifts were not tax deductible?	6b	ĺ		
7	Organizations that may receive deductible contributions under section 170(c).				İ
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			-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ	-
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	16	-	<u> </u>	Ī
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			ı
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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				ļ
9	organization, have excess business holdings at any time during the year?	8		<u> </u>	Ì
a	Did the organization make any taxable distributions under section 4966?	9a			J
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				i
а	Initiation fees and capital contributions included on Part VIII, line 12 10a				
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	-			
11	Section 501(c)(12) organizations. Enter:				
a b	Gross income from members or shareholders	┨	İ		İ
	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			j
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			 	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a			
_	Note. See the instructions for additional information the organization must report on Schedule O.				
b				1	
_	the organization is licensed to issue qualified health plans	-			
C 14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	1	
14a	If "Voc." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h	 	+-	-

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	truct	ions.
Section	on A. Governing Body and Management			<u> </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4 5	Did the organization make any significant changes to its governing documents since the pnor Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		√
6 7a	Did the organization have members or stockholders?	7a	✓	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b	√	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
	~····	40	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b 12a b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No,"</i> go to line 13	12a 12b	_	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		1
13 14 15	Did the organization have a written whistleblower policy?	13 14		√
а	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a		√
b	Other officers or key employees of the organization	15b		✓
	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		1
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed PA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only)
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			oolicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: PATRICK D. MC HUGH. Fin.secv. 200 Gibson Street. Steelton, PA 17113	of the	•	

Form	990	(201	1)

				-	
Part VII	Compensation of Officers, Direct	ctors, Trustees,	Key Employees,	Highest Compensated	Employees, and
	Independent Contractors				

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Check this box it neither the organization no	any relate	uoiga	ailiz	<u>auo</u>		ompe	1150	led any curren	t officer, director	, or trustee.
	ľ			•						
(A)	(B)	(B) Position (do not check more than one			(D)	(E)	(F)			
Name and Title	Average	/erage box, unless person is both an			Reportable	Reportable	Estimated			
	hours per week		officer and a director/trustee)		compensation from	compensation from related	amount of other			
	(describe	orc	Inst	Officer	<u>چ</u>	emg Hgt	Former	the	organizations	compensation
•	hours for related	lrec Vidu	₫.	cer	em	lest] a	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	tor	onal		Key employee	e 0		(14-2/1033-141100)	l	and related
	ın Schedule	Individual trustee or director	쿹		9	nper				organizations
	O)	99	Institutional trustee			Highest compensated employee		:		
(1) Gregory Bowers										
President	40			✓				6869.04		
(2) Robert Butler										
Treasurer	4			✓			<u> </u>	960.00		· · · · · · · · · · · · · · · · · · ·
(3) Linda M. Hare	_				١.					
Office Mgr.	40				✓		L_	49520.42		
(4) GREGORY REESE					_			ł		
Grievance chairman	40				✓		_	11955.58		
(5) Robert Crater					Ì				·	
Guide	0			✓			<u> </u>	983.80		
(6) Ray Napoli	_									
President	40			✓			$oxed{oxed}$	11624.61		
(7) Ramon Fernandez	_					İ				
Vice Pres	4			✓				1463.25		
(8) Carol Bricker	_	ĺ					ļ			
Rec. Secy.	4	ļ	L.,	✓				1333.96		
(9) Patrick D. McHugh				İ				ļ		
Fin. Secy.	2		L.	✓			<u> </u>	960.00		
(10) James Roberts, Mgr.										
Social Hall Manager	25			L_	✓			12537.86		
(11) Lynn Myers										
Trustee	2	_		1				0 00		
(12) William Brognia							!			
Trustee	2			✓	L	L		0.00		
(13) Marin Ivanoff		İ								
Safety Chairman	2	<u> </u>	<u></u>	✓	L		<u> </u>	0.00		
(14) Cathy Weaver										
Guard	0	<u> </u>		✓		L	<u> </u>	0.00	<u></u>	

Part	Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees			lignes	St C	ompensated E	mployees (d	continu	iea)		
(A) Name and title		(B) Average hours per week	Position (do not check more than on box, unless person is both a officer and a director/truste				is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related		Estin amo	(F) mated ount of ther	
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-M		from organ and	ensatior in the nization related izations	
(15) C	nristopher Hardy											•		
Guard (16)	<u> </u>	0			✓				0.00					
119														
(17)														-
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c	Sub-total			•				> > >	98208.00					
2	Total number of individuals (including but reportable compensation from the organi	not limited						e) w	ho received m	ore than \$1	00,000) of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete s						-	emp	oloyee, or high	est compe	nsated	d	Yes	No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ble	con	npei	nsatio					э 📗		<u> </u>
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc	dividua 			✓
	on B. Independent Contractors										A : :			
1	Complete this table for your five highest compensation from the organization. Repyear.													ıx
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens	ation	
												-		
2	Total number of independent contractor received more than \$100,000 of compens							th	nose listed ab	ove) who				

Part	VIII	Statement of Revenue										
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514				
ts ts	1a	Federated campaigns	1a		-							
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .										
٠, <u>١</u>	С	Fundraising events .										
ar A	d	Related organizations										
B, G	e	Government grants (cont										
Ü	f	All other contributions, gif										
F E	•	and similar amounts not incl										
결정	g	Noncash contributions include		· · · · · · · · · · · · · · · · · · ·				}				
S E	h	Total. Add lines 1a-1f		-								
				Business Code								
Ę.	2a	Membership Dues		900099	345031	345031		 				
æ	b											
Program Service Revenue	c			•								
eZ.	d											
ε	e					-						
gra	f	All other program serv										
<u>۾</u>	g	Total. Add lines 2a-2f		•	345031	1						
	3	Investment income (including divide	ends, interest,				<u> </u>				
		and other similar amou			1593	1593						
i	4	Income from investment	of tax-exempt be	ond proceeds ►								
	5	Royalties		▶								
			(i) Real	(ii) Personal								
	6a	Gross rents	128264									
	b	Less: rental expenses			,							
	С	Rental income or (loss)										
	d	Net rental income or (loss)	▶								
	7a	Gross amount from sales of	(i) Securities	(ii) Other								
		assets other than inventory										
	b	Less: cost or other basis										
		and sales expenses .										
	C	Gain or (loss)										
	d	Net gain or (loss) .		🕨	128264	128264						
enne/	8a	Gross income from ful	ndraising									
		events (not including \$										
Other Re		of contributions reporte										
je		See Part IV, line 18 .	· · · · a									
₹		Less: direct expenses										
		Net income or (loss) fr	_	events . >								
	9a	Gross income from gain										
		See Part IV, line 19 .			}							
	b	Less: direct expenses										
	C	Net income or (loss) fr	-	vities ►			 					
	10a	Gross sales of inv										
		returns and allowance										
		Less: cost of goods so										
	С	Net income or (loss) fr						ļ				
		Miscellaneous Re		Business Code								
	11a	Misc. Rebates and Rein	moursements	900099	21755	21755						
	b											
	C	All - Ab						 				
	d	All other revenue .		L	24755	_ 		<u> </u>				
	e	Total revenue See in			21755							
	12	Total revenue. See in	ISTRUCTIONS		496643			1				

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.	All other organizations must complete column (A) but are not
required to complete columns (B), (C), and (D).	

	Check if Schedule O contains a respon-	se to any question	in this Part IX .		
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21	5736			
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	13625 98209			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 8	Other salaries and wages	47352 0			
9	Other employee benefits	0			
10	Payroll taxes	7002			
11	Fees for services (non-employees):		 -		
а	Management	o]	
b	Legal	0			
C	Accounting	0			
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other ARB · FEES	5589			
12	Advertising and promotion	0			
13	Office expenses	103277		ļ <u>.</u>	
14	Information technology	0			
15	Royalties	0			
16	Occupancy MORTCACE	78431			
17	Travel	9602	<u></u>		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	0			
20	Interest	0			
21	Payments to affiliates	2877			
22	Depreciation, depletion, and amortization .	0			
23	Insurance	8675			ļ
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Cater & Manager Social Hall Rentals	59636			
b	Social Hall Expenses	11912			
С	Electric Bills	23989			
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	475912			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

ĮΡ	art X	Balance Sheet			
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	244172	1	264904
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
	_	employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary]	
S		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	* * * * * * * * * * * * * * * * * * * *
As	8	Inventories for sale or use		8	•
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b	847100	10c	847100
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1091272	16	1112004
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
es	22	Payables to current and former officers, directors, trustees, key			
≅		employees, highest compensated employees, and disqualified persons.			
Liabilities	l	Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties	188375	23	167128
	24	Unsecured notes and loans payable to unrelated third parties	·	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	06		188375		167128
	26	Total liabilities. Add lines 17 through 25	1003/3	20	107128
es		lines 27 through 29, and lines 33 and 34.			
SE.	27	Unrestricted net assets	902897	27	944876
39	28	Temporarily restricted net assets		28	
<u> </u>	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ts o	30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
Net	33	Total net assets or fund balances	902897	33	944876
_	34_	Total liabilities and net assets/fund balances	1091272	34	1112004
					Earm QQA (2011)

Page	1	2

Part					_
	Check if Schedule O contains a response to any question in this Part XI			<u> </u>	✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1		49	96643
2	Total expenses (must equal Part IX, column (A), line 25)	2		47	75912
3	Revenue less expenses. Subtract line 2 from line 1	3		- 2	20731
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		90	2897
5	Other changes in net assets or fund balances (explain in Schedule O)	5		7	21247
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		94	14876
Part					
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				Ī
•	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın	in		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		✓
b	Were the organization's financial statements audited by an independent accountant?			T	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over				
·	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant'	? 2c		
	If the organization changed either its oversight process or selection process during the tax year, ex			1	
	Schedule O.	•			1
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar wei	re		
u	issued on a separate basis, consolidated basis, or both:			1	
	Separate basis Consolidated basis Both consolidated and separate basis				
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın	1	\Box
Ja	the Single Audit Act and OMB Circular A-133?		. За	1	/
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao th			
D	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b		
	, ,		Fo	rm 99 0	(2011)
					,=,

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047

Open to Public Inspection

	ent of the Treasury		8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11t, to Form 990. ▶ See separate instruct		Inspection
	Revenue Service f the organization				er identification number
	•	ocal Union 1688			23-1092686
Par			r Advised Funds or Other Sim	ilar Funds or	Accounts. Complete if the
	organiz	zation answered "Yes" to Fo	rm 990, Part IV, line 6.		
			(a) Donor advised funds		(b) Funds and other accounts
1		at end of year			·
2	•••	ntributions to (during year).			
3		nts from (during year)			
4		ue at end of year	donor advisors in writing that the	acceta hold in	donor advisod
5	funds are the	ization inform all donors and e	t to the organization's exclusive leg	assets field in t	· · · · · · Yes · No
6			ors, and donor advisors in writing		
6			benefit of the donor or donor adv		
Par			ete if the organization answere		
1			y the organization (check all that a		
			ecreation or education) Prese		torically important land area
	☐ Protection	of natural habitat	☐ Prese	rvation of a cert	ified historic structure
		on of open space			
2			tion held a qualified conservation c	ontribution in th	e form of a conservation
	easement on t	the last day of the tax year.			[managed]
					Held at the End of the Tax Year
а					2a
b	_	•	ements		2b
C			tified historic structure included in		2c
d		ure listed in the National Regist	ed in (c) acquired after 8/17/06, er		2d
3		_	l, transferred, released, extinguishe		
	tax year ►		,g	,	, J
4		ites where property subject to	conservation easement is located	•	
5	Does the org	anization have a written poli	cy regarding the periodic monito	oring, inspection	n, handling of
	violations, and	denforcement of the conservat	ion easements it holds?		· · · · · 🗌 Yes 🗎 No
6	Staff and volu	nteer hours devoted to monito	ring, inspecting, and enforcing con	servation easem	nents during the year
	>				
7		penses incurred in monitoring,	inspecting, and enforcing conserva	ation easements	during the year
_	\$		1/ O(-1)		170/h\/4\/D\
8			on line 2(d) above satisfy the requi		
•			ports conservation easements in it		
9			text of the footnote to the organization		
		accounting for conservation e	_		
Pari			ctions of Art, Historical Treas	ures, or Othe	r Similar Assets.
			ered "Yes" to Form 990, Part IV		
1a			der SFAS 116 (ASC 958), not to re		
	works of art,	historical treasures, or other	similar assets held for public exhi	bition, education	n, or research in furtherance of
			of the footnote to its financial stater		
b			ider SFAS 116 (ASC 958), to repo		
			similar assets held for public exhi	ibition, education	in, or research in furtherance of
		, provide the following amount			• •
	(i) Access	included in Form 990, Part VIII,	line 1		· · •
2	If the organiz	ation received or held works	of art, historical treasures, or oth	 Jer similar asset	s for financial dain provide the
_	_		nder SFAS 116 (ASC 958) relating t		a in manage gain, provide the
а	_		e1		▶ \$
	Assets include	ed in Form 990, Part X			> \$

ı	Pao	e	2

Schedule	D (Form	990)	2011

Part										
3	Using the organization's acquisition, collection items (check all that apply):		ssion, and ot	her reco	rds, chec	k any of th	e follov	ving that are	a sig	nificant use of it
а	☐ Public exhibition					or exchang				
þ	☐ Scholarly research			е	Other	r <u></u>				
С	☐ Preservation for future generations									
4	Provide a description of the organiza XIV.	tion's	collections a	and expla	ain how t	hey further	the org	anization's e	xem	ot purpose in Par
5	During the year, did the organization assets to be sold to raise funds rather	solic than	it or receive to be mainta	donation ained as p	s of art, part of the	historical tr e organizati	reasure: ion's co	s, or other sullection?	mılar	□ Yes □ No
Part	IV Escrow and Custodial Arra									
	line 9, or reported an amour					, .				, ,
1a	Is the organization an agent, trustee	, cust	odian or oth	er intern	nediary fo	or contribut	tions or	other assets	not	
	included on Form 990, Part X?									☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XI	V and comple	ete the fo	ollowina t	able:				
			-					1	Am	nount
С	Beginning balance						10			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amou									☐ Yes ☐ No
	If "Yes," explain the arrangement in P			•						
	V Endowment Funds. Compl	ete if	the organiz	ation ar	swered	"Yes" to F	orm 9	90, Part IV,	line :	10.
			Current year		or year	(c) Two year		(d) Three years		(e) Four years back
1a	Beginning of year balance									
b	Contributions									
C	Net investment earnings, gains, and									
	losses						1			
d	Grants or scholarships									
	Other expenditures for facilities and							-		
	programs									
f	Administrative expenses									
9	End of year balance									
2	Provide the estimated percentage of t	the cu	ırrent year er	nd balanc	e (line 1g	,, column (a	ı)) held :	as:		
а	Board designated or quasi-endowme	nt 🕨		%						
b	Permanent endowment >	%								
С	Temporarily restricted endowment ▶									
	The percentages in lines 2a, 2b, and 2									
3a	Are there endowment funds not in th	e pos	session of th	ne organı	zation th	at are held	and ad	ministered fo	r the	
	organization by:									Yes No
	(i) unrelated organizations								•	3a(i)
	(ii) related organizations								•	3a(ii)
b	If "Yes" to 3a(ii), are the related organ								•	3b
4	Describe in Part XIV the intended use									
Part		omen			T .		i		_	
	Description of property		(a) Cost or of (investm		,	or other basis (other)		Accumulated epreciation		(d) Book value
1a	Land			18944	1	18944		<u> </u>		1894
b	Buildings			601766		601766				601766
С	Leasehold improvements			_	ļ				\perp	
d	Equipment			81482	ļ	81482				81482
<u>e</u>	Other			144908	<u> </u>	144908			⊥	144908
Total.	Add lines 1a through 1e. (Column (d) r	nust e	equal Form 9	90, Part i	X, columi	n (B), line 10	O(c).)	<u></u> ▶		847100

Part VII	Investments - Other Securities	See Form 990, Part X,	line 12.	<u>-</u>
. (6	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other		-		
(A)				
(B)				
(C)				
(D)				
(E) (F)				
(G)				
(H)				
(1)				
	(b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII	Investments-Program Related	J. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1)				
(2)				
(3)				
(4)				
(5)			· -	
(6)				
(7)				
(8)				
<u>(9)</u> (10)			· · · · · · · · · · · · · · · · · · ·	
	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	art X, line 15.		- -
	(a	a) Description		(b) Book value
(1)				
(2)	· · · · · · · · · · · · · · · · · · ·			
_(3)				
_(4)				
(5)				
(6)				
(7)	· · · · · · · · · · · · · · · · · · ·			
(8) (9)				
(10)				
Total. (Colu	ımn (b) must equal Form 990, Part X, c	ol. (B) line 15.)		
Part X	Other Liabilities. See Form 990,	Part X, line 25.		
1.	(a) Description of liability	(b) Book value		
	Income taxes			
(2)			_	
(3)			4	
(4)			4	
(5)			-	
(6)			4	
(8)		 	1	
(9)			1	
(10)			1	
(11)			1	
	(b) must equal Form 990, Part X, col. (B) line 25) ▶		1	
	SC 740) Footpote In Part VIV provide	the taut of the feetnets to	the examination's financial statem	onto that raparta tha

_	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	-
7	Prior period adjustments	7	••
В	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	· · · · · · · · ·
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
art	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
С	Add lines 4a and 4b	. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
art	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		n
1	Total expenses and losses per audited financial statements	. 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	_	
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	. 2e	
3	Subtract line 2e from line 1	. 3	
•	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 -	<u> </u>
4	'''''''''''''''''''''''''''''''''''''''		
	Investment expenses not included on Form 990, Part VIII, line 7b		
4 a	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV.)		
a b	Other (Describe in Part XIV.)		
a b c	Other (Describe in Part XIV.)		
4 a b c	Other (Describe in Part XIV.)		
4 a b c 5	Other (Describe in Part XIV.)	. 5	es 1b and 2b;
4 a b c 5 art	Other (Describe in Part XIV.)	; Part IV, lin	
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide
4 a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide
a b c 5 art mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide
a b c int mp	Other (Describe in Part XIV.)	; Part IV, lin	part to provide

Schedule D (Fo	rm 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
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SCHEDULE! (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

Open to Public Inspection OMB No 1545-0047 20

Schedule I (Form 990) (2011) % ⊡ (h) Purpose of grant or assistance **Employer identification number** to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. □ Yes 231092686 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Cat. No. 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance (e) United Steelworkers Local Union 1688 1 (a) Name and address of organization or government Name of the organization Part II Part I

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

United Steelworkers Local Union 1688			23-1092686	
Part IV, Section C, line 19: Th	e Local Union will make available its go	overning documents, conflict of onter	est policy, and financial	
statements to the public, upo				
Part XI, line 5: Other changes	in net assets or fund balances:			
	Start of Report Period	End of Report Period	+ or - Change in assets	
Mortgages Payable:	188375	167128	21247	
Part IV, line 21: Civic and Cha	aritable Contributions: 5736			
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